

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Andy Ramos
Mailing Address 907 West Trail
City Dodge City State KS Zip Code 67801
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 40.00
Transaction ID : 415fe09e-e7b6-436d-8
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify) ▶

Full Name of Payee Billy Martin
Mailing Address 250 JS Brewton rd
City goldonna State LA Zip Code 71031
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 40.00
Transaction ID : 90162391-186b-4cb0-9
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Ms. Mary L Landrieu
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: LA

Disbursement For: [] Primary [X] General 2014
[] Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 80.00
(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.

Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

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Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Billy Martin
Mailing Address 250 JS Brewton rd
City goldonna State LA Zip Code 71031
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 3.30
Transaction ID : de763ba7-07bb-4469-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Camille N Yearry
Mailing Address 2025 NE 67th St
City Gladstone State MO Zip Code 64118
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 40.00
Transaction ID : eff7093e-5221-473b-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 43.30
(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.
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FEC IDENTIFICATION NUMBER C C00530766
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Full Name of Payee Camille N Yearry
Mailing Address 2025 NE 67th St
City Gladstone State MO Zip Code 64118
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 30.03
Transaction ID : 18cbdc12-378e-49c3-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Lorri Anderson
Mailing Address 7214 Duchamp Dr
City Charlotte State NC Zip Code 23215
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 80.00
Transaction ID : 96b04c8c-b75d-4d74-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 110.03
(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.
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FEC IDENTIFICATION NUMBER C C00530766
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Full Name of Payee Lorri Anderson
Mailing Address 7214 Duchamp Dr
City Charlotte State NC Zip Code 23215
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 12.60
Transaction ID : 335bf14e-631c-4fa0-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kellie DAunoy-Jones
Mailing Address 1017 Maris Stella St.
City Slidell State LA Zip Code 70460
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 20.00
Transaction ID : 85708a26-4289-4fec-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 32.60
(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.
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FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kellie DAunoy-Jones
Mailing Address 1017 Maris Stella St.
City Slidell State LA Zip Code 70460
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 6.00
Transaction ID : f62d8e0f-a301-4662-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Chad Stieben
Mailing Address 16864 Stillwell Rd
City Bonner Springs State KS Zip Code 66012
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 40.00
Transaction ID : ef12128f-efcd-402b-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 46.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Full Name of Payee Chad Stieben
Mailing Address 16864 Stillwell Rd
City Bonner Springs State KS Zip Code 66012
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 12.60
Transaction ID : 69f5dadd-b5df-4783-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Brittany Jones
Mailing Address 338 Wayne Drive
City Shreveport State LA Zip Code 71105
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 6.00
Transaction ID : 615fcd28-bfd5-435f-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 18.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Felicia A Jones
Mailing Address 4106 Martha St
City Shreveport State LA Zip Code 71109
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 60.00
Transaction ID : ce399bfc-e890-4ec9-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Felicia A Jones
Mailing Address 4106 Martha St
City Shreveport State LA Zip Code 71109
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 8.10
Transaction ID : a8b89afc-8455-4409-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 68.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Full Name of Payee Lee R Carter
Mailing Address 3110 Brentwood Rd
City Raleigh State NC Zip Code 27604
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 40.00
Transaction ID : 5709c662-93e7-425d-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Lee R Carter
Mailing Address 3110 Brentwood Rd
City Raleigh State NC Zip Code 27604
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 12.30
Transaction ID : 825e21e1-13f9-4d94-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 52.30
(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.
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FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Dylan J Sparks
Mailing Address 915 East Market Ave
City Searcy State AR Zip Code 72149
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 100.00
Transaction ID : 0b21b96b-4f17-4b68-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Dylan J Sparks
Mailing Address 915 East Market Ave
City Searcy State AR Zip Code 72149
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 83.40
Transaction ID : af77d68f-a22f-4c7d-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 183.40
(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.
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NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Alexa S Dudley
Mailing Address 4367 Splitlog Rd
City Goodman State MO Zip Code 64843
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 60.00
Transaction ID : c0807436-7d23-4d9c-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Alexa S Dudley
Mailing Address 4367 Splitlog Rd
City Goodman State MO Zip Code 64843
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 26.70
Transaction ID : 246f5ebc-e5ab-4a8b-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 86.70
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Full Name of Payee Michael Vidrine
Mailing Address 1103 West Wilson Street
City Ville Platte State LA Zip Code 70586
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landriou [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 30.00
Transaction ID : b62a885b-153a-421e-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Michael Vidrine
Mailing Address 1103 West Wilson Street
City Ville Platte State LA Zip Code 70586
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landriou [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 26.40
Transaction ID : 6ae11098-61ec-42c8-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 56.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FEC IDENTIFICATION NUMBER C C00530766
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Full Name of Payee Kelly Dolan
Mailing Address 543 S 2nd St
City Bellaire State NC Zip Code 77401
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 70.00
Transaction ID : 05620647-461c-4c34-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kelly Dolan
Mailing Address 543 S 2nd St
City Bellaire State NC Zip Code 77401
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 8.40
Transaction ID : 06bcfetc-625a-448a-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 78.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Katelyn Stringer
Mailing Address 2134 Oxford Dr
City Salina State KS Zip Code 67401
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10/26/2014
Amount 30.00
Transaction ID : 6cbe1bb4-e85f-4c44-b
Date of Disbursement or Obligation 10/26/2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Katelyn Stringer
Mailing Address 2134 Oxford Dr
City Salina State KS Zip Code 67401
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10/26/2014
Amount 0.98
Transaction ID : b5c99f97-5784-4880-8
Date of Disbursement or Obligation 10/26/2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 30.98
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Francis Richardson
Mailing Address 220 Doucet Rd
City Lafayette State LA Zip Code 70503
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 40.00
Transaction ID : ee64d185-a0a8-471f-9
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Ms. Mary L Landrieu
Support [] Oppose [X]
Office Sought: [] House [X] Senate
District: 00 State: LA

Disbursement For: [] Primary [X] General 2014
[] Other (specify) ▶

Full Name of Payee Francis Richardson
Mailing Address 220 Doucet Rd
City Lafayette State LA Zip Code 70503
Purpose of Expenditure Mileage Category/Type 002

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 4.44
Transaction ID : 692156c6-f24d-487a-9
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Ms. Mary L Landrieu
Support [] Oppose [X]
Office Sought: [] House [X] Senate
District: 00 State: LA

Disbursement For: [] Primary [X] General 2014
[] Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... 44.44
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Zachary Vidrine
Mailing Address 202 Rue Des Cajun
City Ville Platte State LA Zip Code 70586
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 50.00
Transaction ID : 7468d070-ab50-4700-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Zachary Vidrine
Mailing Address 202 Rue Des Cajun
City Ville Platte State LA Zip Code 70586
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 29.10
Transaction ID : c625a3ae-acea-42ac-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 79.10
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee: Kyler A Jost
Mailing Address: 1830 College Height Rd
City: Manhattan State: KS Zip Code: 66502
Purpose of Expenditure: Salary Category/Type: 001

Date of Public Distribution/Dissemination: 10/26/2014
Amount: 30.00
Transaction ID: 2dd0b26c-ed50-44ce-8
Date of Disbursement or Obligation: 10/26/2014

Name of Federal Candidate: Mr. Greg Orman
Support: [] Oppose: [X]
Calendar Year-To-Date Per Election for Office Sought: 185176.39

Office Sought: [] House [X] Senate
District: 00 State: KS
Disbursement For: [] Primary [X] General 2014

Full Name of Payee: Kyler A Jost
Mailing Address: 1830 College Height Rd
City: Manhattan State: KS Zip Code: 66502
Purpose of Expenditure: Mileage Category/Type: 002

Date of Public Distribution/Dissemination: 10/26/2014
Amount: 3.30
Transaction ID: 10aef2e4-dea6-4505-a
Date of Disbursement or Obligation: 10/26/2014

Name of Federal Candidate: Mr. Greg Orman
Support: [] Oppose: [X]
Calendar Year-To-Date Per Election for Office Sought: 185176.39

Office Sought: [] House [X] Senate
District: 00 State: KS
Disbursement For: [] Primary [X] General 2014

(a) SUBTOTAL of Itemized Independent Expenditures: 33.30
(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.

Ms. Emily Buchanan [Electronically Filed] Date 10/27/2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Patrice Wolfe
Mailing Address 9909 Treasure Hill Rd
City Little Rock State AR Zip Code 72205
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 25.00
Transaction ID : 9911f1a7-b369-4fce-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Patrice Wolfe
Mailing Address 9909 Treasure Hill Rd
City Little Rock State AR Zip Code 72205
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 10.50
Transaction ID : 2c47221e-a620-4c5f-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 35.50
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Lisa Booth
Mailing Address 1434 South Avenue
City Eden State NC Zip Code 27288
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 100.00
Transaction ID : ebcf7fca-1b17-446f-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Lisa Booth
Mailing Address 1434 South Avenue
City Eden State NC Zip Code 27288
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 13.50
Transaction ID : 4b536604-b708-4572-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 113.50
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kevin L Battle
Mailing Address 3300 Asher Ave
City Little Rock State AR Zip Code 72204
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 70.00
Transaction ID : 4da56862-cfcd-4b65-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kevin L Battle
Mailing Address 3300 Asher Ave
City Little Rock State AR Zip Code 72204
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 36.00
Transaction ID : 95039096-58c6-440e-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 106.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Mary Catherine Toburen
Mailing Address 1222 SE 44 St
City Topeka State KS Zip Code 66609
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 60.00
Transaction ID : 5a1a4ed3-eca1-4c54-8
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify) ▶

Calendar Year-To-Date Per Election for Office Sought 185176.39

Full Name of Payee Mary Catherine Toburen
Mailing Address 1222 SE 44 St
City Topeka State KS Zip Code 66609
Purpose of Expenditure Mileage Category/Type 002

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 7.35
Transaction ID : 2fd9a0ed-d106-4cef-b
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify) ▶

Calendar Year-To-Date Per Election for Office Sought 185176.39

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 67.35
(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.

Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Chelsi M Cox
Mailing Address 4254 Eagle Lake Ct
City Bel Aire State KS Zip Code 67220
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 15.00
Transaction ID : 07edbf2-0883-46d1-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Chelsi M Cox
Mailing Address 4254 Eagle Lake Ct
City Bel Aire State KS Zip Code 67220
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 4.50
Transaction ID : 503d565a-cafe-43fd-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 19.50
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Andy Ramos
Mailing Address 907 West Trail
City Dodge City State KS Zip Code 67801
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 80.00
Transaction ID : 0ca96c41-9baa-464e-9
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
[] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Office Sought: [] House District: 00
[] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014
[] Other (specify)

Full Name of Payee Victor M Valdez
Mailing Address 1702 Central Ave
City Dodge City State KS Zip Code 67801
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 80.00
Transaction ID : de395e95-c8d3-4598-b
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
[] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Office Sought: [] House District: 00
[] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014
[] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 160.00, (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 Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Christopher Marquess
Mailing Address 110 W Pecan St
City Ville Platte State LA Zip Code 70586
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 50.00
Transaction ID : 3a2e63f5-c676-4d84-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Christopher Marquess
Mailing Address 110 W Pecan St
City Ville Platte State LA Zip Code 70586
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 36.90
Transaction ID : ccf19611-81d9-43e2-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 86.90
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jake Mathews
Mailing Address 6418 East 12 St
City Wichita State KS Zip Code 67206
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 30.00
Transaction ID : cacd2bdc-9aad-444e-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jake Mathews
Mailing Address 6418 East 12 St
City Wichita State KS Zip Code 67206
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 8.40
Transaction ID : 963424a4-910d-42f7-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 38.40
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Amy Rich
Mailing Address 5119 E Boston St
City Wichita State KS Zip Code 67218
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 15.00
Transaction ID : 552d5d83-2132-4266-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Amy Rich
Mailing Address 5119 E Boston St
City Wichita State KS Zip Code 67218
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 6.90
Transaction ID : 5fb50118-3d6d-4886-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 21.90
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Christopher L Gilbert
Mailing Address 55 Lovell Johnson Rd
City Picayune State MS Zip Code 39466
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landriau [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 65.00
Transaction ID : ce20a7a3-5c0e-4dd5-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Christopher L Gilbert
Mailing Address 55 Lovell Johnson Rd
City Picayune State MS Zip Code 39466
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landriau [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 27.90
Transaction ID : 883ef0c6-92bd-48ec-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 92.90
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Cameryn L Rasmussen
Mailing Address 4455 N Edaemoor Ct
City Bel Aire State KS Zip Code 67220
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 30.00
Transaction ID : eaf3c80b-0690-4d27-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Cameryn L Rasmussen
Mailing Address 4455 N Edaemoor Ct
City Bel Aire State KS Zip Code 67220
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 9.00
Transaction ID : 9526812f-b9a7-47e3-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 39.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Ashley T Reed
Mailing Address 1519 E Village Estates Dr
City Park City State KS Zip Code 67216
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 30.00
Transaction ID : b4dc1132-81f7-4493-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Ashley T Reed
Mailing Address 1519 E Village Estates Dr
City Park City State KS Zip Code 67216
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 9.00
Transaction ID : 5ecbb10a-877d-4e52-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 39.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Tywan Scott-Kwofie
Mailing Address 117 East Maple St
City Bucklin State KS Zip Code 67834
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 20.00
Transaction ID : 539c36fd-152e-4428-8
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify) >

Calendar Year-To-Date Per Election for Office Sought 185176.39

Full Name of Payee Tywan Scott-Kwofie
Mailing Address 117 East Maple St
City Bucklin State KS Zip Code 67834
Purpose of Expenditure Mileage Category/Type 002

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 8.10
Transaction ID : bd94210c-dbe0-447c-a
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify) >

Calendar Year-To-Date Per Election for Office Sought 185176.39

(a) SUBTOTAL of Itemized Independent Expenditures 28.10
(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.

Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Irene R Hoyer
Mailing Address 4310 N Mission Rd
City Bel Aire State KS Zip Code 67226
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 22.00
Transaction ID : 6660d53c-1a9a-4965-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Irene R Hoyer
Mailing Address 4310 N Mission Rd
City Bel Aire State KS Zip Code 67226
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 5.40
Transaction ID : 7dfece47-7046-445d-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 27.40
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Carmen Maddrey
Mailing Address 2043 Nottingham Ln
City Burlington State NC Zip Code 27215
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 30.00
Transaction ID : 8e33450e-b290-4a5f-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Carmen Maddrey
Mailing Address 2043 Nottingham Ln
City Burlington State NC Zip Code 27215
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 18.00
Transaction ID : d94b8652-7036-4f7e-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 48.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jennifer Cheever
Mailing Address 4545 S Gold
City Wichita State KS Zip Code 67217
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 60.00
Transaction ID : 7be1310c-e464-4913-9
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify)

Calendar Year-To-Date Per Election for Office Sought 185176.39

Full Name of Payee Jennifer Cheever
Mailing Address 4545 S Gold
City Wichita State KS Zip Code 67217
Purpose of Expenditure Mileage Category/Type 002

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 11.40
Transaction ID : c18233a0-8d38-43ba-8
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify)

Calendar Year-To-Date Per Election for Office Sought 185176.39

(a) SUBTOTAL of Itemized Independent Expenditures 71.40
(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.

Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Michael Terry
Mailing Address 936 S Cypress
City Wichita State KS Zip Code 67207
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 10/26/2014
Amount 60.00
Transaction ID : d30509f7-f33c-4fbc-b
Date of Disbursement or Obligation 10/26/2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify)

Full Name of Payee Michael Terry
Mailing Address 936 S Cypress
City Wichita State KS Zip Code 67207
Purpose of Expenditure Mileage Category/Type 002

Date of Public Distribution/Dissemination 10/26/2014
Amount 11.40
Transaction ID : d3d4a824-5f50-409e-9
Date of Disbursement or Obligation 10/26/2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 71.40
(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.

Ms. Emily Buchanan [Electronically Filed] Date 10/27/2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Corey S McKnight
Mailing Address 1510 Bailey St
City West Monroe State LA Zip Code 71292
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 40.00
Transaction ID : 8b0b5c88-99fa-4779-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Joshua D Syrotchen
Mailing Address 915 East Market Ave
City Searcy State AR Zip Code 72149
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 110.00
Transaction ID : dba32c8e-12aa-48ca-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 150.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Joshua D Syrotchen
Mailing Address 915 East Market Ave
City Searcy State AR Zip Code 72149
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 114.00
Transaction ID : 862b6e41-2be7-469e-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Chris McCoy
Mailing Address 1025 Cayley Ct
City High Point State NC Zip Code 27260
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 107.50
Transaction ID : b92c9377-d1ac-4717-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 221.50
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Chris McCoy
Mailing Address 1025 Cayley Ct
City High Point State NC Zip Code 27260
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 25.80
Transaction ID : feff3370-1a6e-48d4-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Billy Martin
Mailing Address 250 JS Brewton rd
City goldonna State LA Zip Code 71031
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 40.00
Transaction ID : 8627775d-5fa4-4713-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 65.80
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Billy Martin
Mailing Address 250 JS Brewton rd
City goldonna State LA Zip Code 71031
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 3.60
Transaction ID : 75f2fd4c-5e7d-4a13-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee OLynda Walker
Mailing Address 10000 Mount Pleasant Rd
City Midland State NC Zip Code 28107
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 95.00
Transaction ID : d65c91e5-a633-4b6f-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 98.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee OLynda Walker
Mailing Address 10000 Mount Pleasant Rd
City Midland State NC Zip Code 28107
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 25.80
Transaction ID : 2f14ac94-994a-49b8-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Maria A Britt
Mailing Address 4894 Thunder Bolt
City Concord State NC Zip Code 28205
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 95.00
Transaction ID : a9e81cfb-9e6c-4792-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 120.80
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jessica R Resendiz
Mailing Address 9685 Paula St
City Keithville State LA Zip Code 71047
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 60.00
Transaction ID : 640296b0-c0cf-469d-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jessica R Resendiz
Mailing Address 9685 Paula St
City Keithville State LA Zip Code 71047
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 26.40
Transaction ID : 40e20247-f9cd-4482-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 86.40, (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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Emma K Johnson
Mailing Address 8 Bradbury Dr
City Little Rock State AR Zip Code 72212
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 70.00
Transaction ID : bcb397db-81f3-4a10-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Emma K Johnson
Mailing Address 8 Bradbury Dr
City Little Rock State AR Zip Code 72212
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 45.00
Transaction ID : a4d76792-1c95-4703-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 115.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Lilly Green
Mailing Address 205 Medallion Circle
City Shreveport State LA Zip Code 71119
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 60.00
Transaction ID : c5fe55ac-99ff-4d6e-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Lilly Green
Mailing Address 205 Medallion Circle
City Shreveport State LA Zip Code 71119
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 48.00
Transaction ID : 7461af57-12e2-43be-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 108.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Molly E Oman
Mailing Address 607 N Hughes
City Little Rock State AR Zip Code 72205
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 70.00
Transaction ID : 9782f67a-c7a4-43ea-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Molly E Oman
Mailing Address 607 N Hughes
City Little Rock State AR Zip Code 72205
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 45.00
Transaction ID : 1c0a09c4-e988-4d0e-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 115.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Adam K Plunkett
Mailing Address 9760 N Pomona Ave
City Kansas Cuty State MO Zip Code 64153
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 115.00
Transaction ID : 5fb675ec-1465-4276-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Adam K Plunkett
Mailing Address 9760 N Pomona Ave
City Kansas Cuty State MO Zip Code 64153
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 68.70
Transaction ID : e6462426-0ec7-419c-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 183.70
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Gregory Green
Mailing Address 2506 Bolch Street
City Shreveport State LA Zip Code 71104
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 80.00
Transaction ID : 6496f894-29ec-4762-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Gregory Green
Mailing Address 2506 Bolch Street
City Shreveport State LA Zip Code 71104
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 32.70
Transaction ID : e02373bf-c82d-4dcd-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 112.70
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jennifer F Gilbert
Mailing Address 180 McNeil Steep Hollow Rd
City Carriere State MS Zip Code 39426
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 32.50
Transaction ID : d6d79e57-e0a2-4149-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jennifer F Gilbert
Mailing Address 180 McNeil Steep Hollow Rd
City Carriere State MS Zip Code 39426
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 13.80
Transaction ID : 6016f56c-21ec-41cd-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 46.30
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kaitlyn B Allen
Mailing Address 2121 Daniel Dr
City Searcy State AR Zip Code 72143
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 80.00
Transaction ID : 92cae90f-7998-4e9b-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kaitlyn B Allen
Mailing Address 2121 Daniel Dr
City Searcy State AR Zip Code 72143
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 76.50
Transaction ID : 708890a1-a0e5-483e-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 156.50
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Rhonda Moback
Mailing Address 2704 E Glen Oaks Dr
City Wichita State KS Zip Code 67216
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 22.00
Transaction ID : b25e67b1-60d2-418a-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Rhonda Moback
Mailing Address 2704 E Glen Oaks Dr
City Wichita State KS Zip Code 67216
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 6.00
Transaction ID : dbca023e-9c96-4887-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 28.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Amelia Brackett
Mailing Address 804 Roundabout Circle
City Searcy State AR Zip Code 72143
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 80.00
Transaction ID : 7e1eafe0-6775-46d2-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Shelbi L Randall
Mailing Address 202 East Park Ave Apt 40
City Searcy State AR Zip Code 72143
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 60.00
Transaction ID : ebc9019d-d886-4e25-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 140.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Shelbi L Randall
Mailing Address 202 East Park Ave Apt 40
City Searcy State AR Zip Code 72143
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 62.55
Transaction ID : 75736d1e-c944-4568-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Taylor N Randall
Mailing Address 2002 E Park Ave Apt 40
City Searcy State AR Zip Code 72143
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 60.00
Transaction ID : a6fbac1f-d0b7-4b47-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 122.55
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Todd Ellis
Mailing Address P.O. Box 712
City Alexander State AR Zip Code 72002
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 55.00
Transaction ID : 9b617cbd-c3f4-46cd-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Todd Ellis
Mailing Address P.O. Box 712
City Alexander State AR Zip Code 72002
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 21.60
Transaction ID : 0c99f586-e635-4c22-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 76.60
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kolbe J Peloquin
Mailing Address 623 Union Park Circle
City Colwich State KS Zip Code 67030
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 25.00
Transaction ID : 76e37224-35de-4984-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kolbe J Peloquin
Mailing Address 623 Union Park Circle
City Colwich State KS Zip Code 67030
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 2.10
Transaction ID : 806e19eb-c8b3-453b-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 27.10
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kelli R Zimmerman
Mailing Address 248 Hungerford
City Haysville State KS Zip Code 67060
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10/26/2014
Amount 40.00
Transaction ID : 4a9afc91-7a9c-425c-9
Date of Disbursement or Obligation 10/26/2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kelli R Zimmerman
Mailing Address 248 Hungerford
City Haysville State KS Zip Code 67060
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10/26/2014
Amount 12.90
Transaction ID : e99b1cac-0ae3-4c80-b
Date of Disbursement or Obligation 10/26/2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 52.90
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10/27/2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Konner M Zimmerman
Mailing Address 248 Hungerford
City Haysville State KS Zip Code 67060
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 40.00
Transaction ID : 6b97f3d5-18a1-4d5c-b
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Calendar Year-To-Date Per Election for Office Sought 185176.39
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Konner M Zimmerman
Mailing Address 248 Hungerford
City Haysville State KS Zip Code 67060
Purpose of Expenditure Mileage Category/Type 002

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 12.90
Transaction ID : b00acae7-4129-49c9-b
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Calendar Year-To-Date Per Election for Office Sought 185176.39
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 52.90
(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.

Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Joneisha Stewart
Mailing Address 2329 Runnymede Dr
City Marrero State LA Zip Code 70072
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 70.00
Transaction ID : fe6455e8-9537-4e72-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Joneisha Stewart
Mailing Address 2329 Runnymede Dr
City Marrero State LA Zip Code 70072
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 8.40
Transaction ID : 335842e7-bec4-49a8-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 78.40
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee ERIC TABARY
Mailing Address 6101 NORA ST
City METAIRIE State LA Zip Code 70003
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 70.00
Transaction ID : acc23e1e-3617-4a0c-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee LaVonna A Brown
Mailing Address 1211 Treaty Rd
City Delphos State KS Zip Code 67436
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 55.00
Transaction ID : e0533214-551a-403c-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 125.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee LaVonna A Brown
Mailing Address 1211 Treaty Rd
City Delphos State KS Zip Code 67436
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 5.70
Transaction ID : 8b004527-1e27-4920-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Ronald E Brown
Mailing Address 1211 Treaty Rd
City Delphos State KS Zip Code 67436
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 40.00
Transaction ID : 636066d1-5e68-419f-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 45.70
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Ronald E Brown
Mailing Address 1211 Treaty Rd
City Delphos State KS Zip Code 67436
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 7.80
Transaction ID : 5defce41-6367-43a2-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Colton R Overcash
Mailing Address 121 Ohara Dr
City Salisbury State NC Zip Code 28147
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 50.00
Transaction ID : ba246dd4-91c8-4a2f-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 57.80
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Colton R Overcash
Mailing Address 121 Ohara Dr
City Salisbury State NC Zip Code 28147
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 96.00
Transaction ID : 3aaebe3c-53ae-4524-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Brandon Wheeler
Mailing Address 10112 Piney Creek Ct
City Charolette State NC Zip Code 28215
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 90.00
Transaction ID : 5388f795-c22f-4750-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 186.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Brandon Wheeler
Mailing Address 10112 Piney Creek Ct
City Charolette State NC Zip Code 28215
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 74.10
Transaction ID : 1dbb6ea6-f290-47fc-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jeanne Tribou
Mailing Address 22369 Ponderosa Dr.
City Mandeville State LA Zip Code 70471
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 45.00
Transaction ID : c8266355-8803-42a9-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 119.10
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jeanne Tribou
Mailing Address 22369 Ponderosa Dr.
City Mandeville State LA Zip Code 70471
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 13.20
Transaction ID : 33d4dce5-7f56-482d-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Darius Beverly
Mailing Address 157 Bishop Drive
City Avondale State LA Zip Code 70094
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 55.00
Transaction ID : f9988354-4354-4738-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 68.20
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Ms. Dinah Beverly
Mailing Address 157 Bishop Drive
City Avondale State LA Zip Code 70064
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 55.00
Transaction ID : 19363b5f-96ff-4bd6-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Ms. Dinah Beverly
Mailing Address 157 Bishop Drive
City Avondale State LA Zip Code 70064
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 3.30
Transaction ID : e7cf6904-4f39-4599-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 58.30
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kathryn M Wolfe
Mailing Address 204 W 9th St
City Pittsburg State KS Zip Code 66762
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 90.00
Transaction ID : 9eaf9317-bae3-43be-a
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify) ▶

Calendar Year-To-Date Per Election for Office Sought 185176.39

Full Name of Payee Kathryn M Wolfe
Mailing Address 204 W 9th St
City Pittsburg State KS Zip Code 66762
Purpose of Expenditure Mileage Category/Type 002

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 26.70
Transaction ID : 8d4e6e34-b144-4924-a
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Greg Orman
Support [] Oppose [X]
Office Sought: [] President [X] Senate
District: 00 State: KS

Disbursement For: [] Primary [X] General 2014
[] Other (specify) ▶

Calendar Year-To-Date Per Election for Office Sought 185176.39

(a) SUBTOTAL of Itemized Independent Expenditures 116.70
(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.

Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Randy M Gold
Mailing Address 1436 Haigs Creek Dr
City Elgin State SC Zip Code 29045
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 120.00
Transaction ID : 12e86e14-1dba-4bf8-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Randy M Gold
Mailing Address 1436 Haigs Creek Dr
City Elgin State SC Zip Code 29045
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 82.02
Transaction ID : 68b73a73-aac3-498d-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 202.02
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Aleksandra B Padua
Mailing Address 110 Bridge gate Dr
City Cary State NC Zip Code 27519
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 40.00
Transaction ID : f578b0ba-47c5-4fea-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Aleksandra B Padua
Mailing Address 110 Bridge gate Dr
City Cary State NC Zip Code 27519
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 11.85
Transaction ID : 35b10f07-b7b5-4a6e-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 51.85
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jacob W Joosten
Mailing Address 1906 S Pine Apt B
City Pittsburg State KS Zip Code 66762
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 10/26/2014
Amount 85.00
Transaction ID : 20c558c3-d531-409b-9
Date of Disbursement or Obligation 10/26/2014
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Calendar Year-To-Date Per Election for Office Sought 185176.39
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jacob W Joosten
Mailing Address 1906 S Pine Apt B
City Pittsburg State KS Zip Code 66762
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 10/26/2014
Amount 22.80
Transaction ID : dff305a-9726-4c0f-b
Date of Disbursement or Obligation 10/26/2014
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Calendar Year-To-Date Per Election for Office Sought 185176.39
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 107.80
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10/27/2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee: Kaleigh J Wagner
Mailing Address: 18065 Wayne Rd
City: Odessa, State: FL, Zip Code: 33556
Purpose of Expenditure: Salary, Category/Type: 001
Date of Public Distribution/Dissemination: 10/26/2014
Amount: 120.00
Transaction ID: 8b05cd34-8777-4c44-8
Date of Disbursement or Obligation: 10/26/2014
Name of Federal Candidate: Mr. Mark L Pryor, Support: [], Oppose: [X]
Office Sought: [] House, [X] Senate, District: 00, State: AR
Calendar Year-To-Date Per Election for Office Sought: 206329.04
Disbursement For: [] Primary, [X] General 2014, [] Other (specify)

Full Name of Payee: Rachel H Young
Mailing Address: Box #11543 915 E Market Ave
City: Searcy, State: AR, Zip Code: 72149
Purpose of Expenditure: Salary, Category/Type: 001
Date of Public Distribution/Dissemination: 10/26/2014
Amount: 130.00
Transaction ID: 5ee76b4e-48fb-42bb-b
Date of Disbursement or Obligation: 10/26/2014
Name of Federal Candidate: Mr. Mark L Pryor, Support: [], Oppose: [X]
Office Sought: [] House, [X] Senate, District: 00, State: AR
Calendar Year-To-Date Per Election for Office Sought: 206329.04
Disbursement For: [] Primary, [X] General 2014, [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 250.00
(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.

Ms. Emily Buchanan [Electronically Filed] Date 10/27/2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Rachel H Young
Mailing Address Box #11543 915 E Market Ave
City Searcy State AR Zip Code 72149
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 112.59
Transaction ID : fdb4cc50-a6f8-41bb-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Hannah K Smith
Mailing Address 633 Scott Dr
City Gibsonville State NC Zip Code 27249
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 65.00
Transaction ID : 32c181e0-1784-4eae-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 177.59
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Hannah K Smith
Mailing Address 633 Scott Dr
City Gibsonville State NC Zip Code 27249
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 16.80
Transaction ID : 9c74a4be-2151-47de-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kaylan N Swanson
Mailing Address 633 Scott Dr
City Gibsonville State NC Zip Code 27249
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 65.00
Transaction ID : d3884224-81cb-4acb-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 81.80
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Joseph R English
Mailing Address 915 East Market Ave Apt 4
City Searcy State AR Zip Code 72143
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 60.00
Transaction ID : 5f085b42-0332-41b6-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Joseph R English
Mailing Address 915 East Market Ave Apt 4
City Searcy State AR Zip Code 72143
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 60.00
Transaction ID : b46a76ae-4d8e-401f-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 120.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Rebecca A Shearer
Mailing Address 6544 Arno College Grove Rd
City College Grove State TN Zip Code 37046
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 85.00
Transaction ID : 3e73f8f7-9926-4cda-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Rebecca A Shearer
Mailing Address 6544 Arno College Grove Rd
City College Grove State TN Zip Code 37046
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 34.80
Transaction ID : ef6dbb67-81ab-4368-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 119.80, (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.

Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Parker H Morrow
Mailing Address 506 N Horton Street
City Searcy State AR Zip Code 72143
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 85.00
Transaction ID : 88560092-a31e-4cb5-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Parker H Morrow
Mailing Address 506 N Horton Street
City Searcy State AR Zip Code 72143
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 40.80
Transaction ID : 06ca3b52-c671-4bad-a
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 125.80
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Marsha Barnell
Mailing Address 3847 SW Atwood Terrace
City Topeka State KS Zip Code 66610
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 10/26/2014
Amount 11.50
Transaction ID : c8a03771-6207-4a29-a
Date of Disbursement or Obligation 10/26/2014
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Calendar Year-To-Date Per Election for Office Sought 185176.39
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Marsha Barnell
Mailing Address 3847 SW Atwood Terrace
City Topeka State KS Zip Code 66610
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 10/26/2014
Amount 5.40
Transaction ID : 31e4a15c-660a-4076-b
Date of Disbursement or Obligation 10/26/2014
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Calendar Year-To-Date Per Election for Office Sought 185176.39
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 16.90
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10/27/2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jonathan P Barnell
Mailing Address 3847 SW Atwood Terrace
City Topeka State KS Zip Code 66610
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 11.50
Transaction ID : 674e6109-893d-40fa-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Natalie M Foutch
Mailing Address 1057 Waldron Road
City LaVergne State TN Zip Code 37086
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 130.00
Transaction ID : 2b0415a8-ba0d-40b8-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 141.50
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Heather N Montgomery
Mailing Address 106 Wyncrest Ct
City Hendersonville State TN Zip Code 37075
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 100.00
Transaction ID : d2ef5eef-fa21-4c4b-8
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Mark L Pryor
Support [] Oppose [X]
Office Sought: [] House [X] Senate
District: 00 State: AR

Disbursement For: [] Primary [X] General 2014
[] Other (specify)

Full Name of Payee Heather N Montgomery
Mailing Address 106 Wyncrest Ct
City Hendersonville State TN Zip Code 37075
Purpose of Expenditure Mileage Category/Type 002

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 53.70
Transaction ID : d6b8b651-bf31-4d70-b
Date of Disbursement or Obligation 10 / 26 / 2014

Name of Federal Candidate Mr. Mark L Pryor
Support [] Oppose [X]
Office Sought: [] House [X] Senate
District: 00 State: AR

Disbursement For: [] Primary [X] General 2014
[] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 153.70
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kinsey E Beck
Mailing Address 103 Glenhaven Ct
City Harvest State AL Zip Code 35749
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 10/26/2014
Amount 100.00
Transaction ID : dafcfb57-dd44-4387-b
Date of Disbursement or Obligation 10/26/2014
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 206329.04
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Katelynn Arnett
Mailing Address 311 Outlook Ct
City St Peters State MO Zip Code 63376
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 10/26/2014
Amount 115.00
Transaction ID : f6613f09-af08-4b9a-9
Date of Disbursement or Obligation 10/26/2014
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Calendar Year-To-Date Per Election for Office Sought 185176.39
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 215.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10/27/2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Katelynn Arnett
Mailing Address 311 Outlook Ct
City St Peters State MO Zip Code 63376
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 68.70
Transaction ID : 4ec39d3c-8c2f-4605-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Vonniqua Jackson
Mailing Address 111 Westchester Blvd Apt D4
City Slidell State LA Zip Code 70458
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 211751.81

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 50.00
Transaction ID : 63182421-6468-4ef4-9
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 118.70
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Brenda L McCune
Mailing Address 1254 Fleming St Apt 6
City Conway State AR Zip Code 72032
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 50.00
Transaction ID : 2ea5bf8b-069e-4690-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Brenda L McCune
Mailing Address 1254 Fleming St Apt 6
City Conway State AR Zip Code 72032
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 17.10
Transaction ID : 2fed0e67-c5c7-4aff-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 67.10
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Kaylan N Swanson
Mailing Address 633 Scott Dr
City Gibsonville State NC Zip Code 27249
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 25 / 2014
Amount 60.00
Transaction ID : 6563fe5f-a891-4120-9
Date of Disbursement or Obligation 10 / 25 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jordyn Kilbury
Mailing Address 5416 S Santa Fe Street
City Wichita State KS Zip Code 67216
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 24 / 2014
Amount 50.00
Transaction ID : c343fe44-411e-4b62-a
Date of Disbursement or Obligation 10 / 24 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 110.00
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Jordyn Kilbury
Mailing Address 5416 S Santa Fe Street
City Wichita State KS Zip Code 67216
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 24 / 2014
Amount 8.40
Transaction ID : e2b7f64a-c4f3-4fce-9
Date of Disbursement or Obligation 10 / 24 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Anthony Pearson
Mailing Address 112 apache Dr
City Search State AR Zip Code 72149
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 50.00
Transaction ID : 3c521e88-6b98-4b95-b
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 58.40
(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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Anthony Pearson
Mailing Address 112 apache Dr
City Search State AR Zip Code 72149
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206329.04

Date of Public Distribution/Dissemination 10 / 26 / 2014
Amount 30.00
Transaction ID : 766aef5d-b8a0-4071-8
Date of Disbursement or Obligation 10 / 26 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Hannah K Smith
Mailing Address 633 Scott Dr
City Gibsonville State NC Zip Code 27249
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 25 / 2014
Amount 60.00
Transaction ID : 4b043486-0d59-47cd-8
Date of Disbursement or Obligation 10 / 25 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 90.00
(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.

Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Hannah K Smith
Mailing Address 633 Scott Dr
City Gibsonville State NC Zip Code 27249
Purpose of Expenditure Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1061768.24

Date of Public Distribution/Dissemination 10 / 25 / 2014
Amount 9.00
Transaction ID : 3ba49631-0376-4af7-b
Date of Disbursement or Obligation 10 / 25 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Joseph Dockers
Mailing Address 1000 Fairway Dr
City chesapeake State VA Zip Code 23320
Purpose of Expenditure Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 185176.39

Date of Public Distribution/Dissemination 10 / 25 / 2014
Amount 45.00
Transaction ID : 055afb2c-d41c-465b-b
Date of Disbursement or Obligation 10 / 25 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 54.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 7307.41

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.
Ms. Emily Buchanan [Electronically Filed] Date 10 / 27 / 2014
Signature