

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 Josh R Arnold
Mailing Address 1531 N Ridgewood Dr
City Wichita State KS Zip Code 67208
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 25.00
Transaction ID : 1ea24a1b-0521-4d46-b
Date of Disbursement or Obligation 11 / 01 / 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 206128.45
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Josh R Arnold
Mailing Address 1531 N Ridgewood Dr
City Wichita State KS Zip Code 67208
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 7.80
Transaction ID : d3636e89-cef0-4397-a
Date of Disbursement or Obligation 11 / 01 / 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 206128.45
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 32.80
(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 11 / 03 / 2014
Signature

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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 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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : d59d51cb-608b-406c-b
Date of Disbursement or Obligation 11 / 01 / 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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 52.80
Transaction ID : 76a65430-e275-4e85-9
Date of Disbursement or Obligation 11 / 01 / 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 132.80
(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.

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Full Name of Payee Dorthy Meyer
Mailing Address 11707 South African Street
City Olathe State KS Zip Code 66062
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 15.00
Transaction ID : 236c4c9e-2ff4-48a1-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Laurel Littler
Mailing Address 145 Bradford Circle
City Clayton State NC Zip Code 27527
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 30.00
Transaction ID : 85297bea-e92b-4c8c-9
Date of Disbursement or Obligation 11 / 01 / 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 45.00
(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 Laurel Littler
Mailing Address 145 Bradford Circle
City Clayton State NC Zip Code 27527
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 19.65
Transaction ID : a0ef7598-91a8-4c1e-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee James A Sears
Mailing Address 305 Averroe Dr
City Apex State NC Zip Code 27502
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 30.00
Transaction ID : f370dc84-1106-4ba2-b
Date of Disbursement or Obligation 11 / 01 / 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 49.65
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Full Name of Payee Andrea L Hammond
Mailing Address 12920 Kneeland Ln
City Neosho State MO Zip Code 64850
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 10.00
Transaction ID : e117a357-63bc-4e26-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Judith A Murphy
Mailing Address PO Box 37
City East Bend State NC Zip Code 27018
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 67.50
Transaction ID : 1d53eaac-7b55-49b8-b
Date of Disbursement or Obligation 11 / 01 / 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 77.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Full Name of Payee Judith A Murphy
Mailing Address PO Box 37
City East Bend State NC Zip Code 27018
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 14.30
Transaction ID : b2f00abe-e3d5-4f88-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Claud B Murphy JR
Mailing Address PO Box 37
City East Bend State NC Zip Code 27018
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 77.50
Transaction ID : 9c047112-20b9-4e9f-a
Date of Disbursement or Obligation 11 / 01 / 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 91.80
(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 Matt Gleb
Mailing Address 3815 Robin Road
City Ayden State NC Zip Code 28513
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 28.00
Transaction ID : 37e28554-f247-493d-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Matt Gleb
Mailing Address 3815 Robin Road
City Ayden State NC Zip Code 28513
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 10.50
Transaction ID : 1c871d9d-d32c-4c3d-9
Date of Disbursement or Obligation 11 / 01 / 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 38.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
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Full Name of Payee Anthony W Stevens
Mailing Address 3405 German Shepherd Trail
City Wake Forest State NC Zip Code 27587
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 28.00
Transaction ID : 2746c572-d2b9-4135-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Anthony W Stevens
Mailing Address 3405 German Shepherd Trail
City Wake Forest State NC Zip Code 27587
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 4.32
Transaction ID : dca39ed0-a52f-4f3d-9
Date of Disbursement or Obligation 11 / 01 / 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 32.32
(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 Kacie Gleb
Mailing Address 3815 Robin Road
City Ayden State NC Zip Code 28513
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 28.00
Transaction ID : 4850ef91-cc1c-4c29-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jennie Butler
Mailing Address 1676 Shady Creek Rd
City Ayden State NC Zip Code 28513
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 26.67
Transaction ID : 07da6ef9-759c-4707-b
Date of Disbursement or Obligation 11 / 01 / 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 54.67
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 Jennie Butler
Mailing Address 1676 Shady Creek Rd
City Ayden State NC Zip Code 28513
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 6.30
Transaction ID : ad023423-4c0d-47b2-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Daniel M Quackenbush
Mailing Address 12062 NC 902 Hwy
City Bear Creek State NC Zip Code 27207
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 47.50
Transaction ID : a5e1a4ce-d888-4f89-a
Date of Disbursement or Obligation 11 / 01 / 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 53.80
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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NAME OF COMMITTEE (In Full) Women Speak Out PAC
FEC IDENTIFICATION NUMBER C C00530766
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Full Name of Payee Daniel M Gauckebush
Mailing Address 12062 NC 902 Hwy
City Bear Creek State NC Zip Code 27207
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 15.00
Transaction ID : 75acdc17-c16a-4061-a
Date of Disbursement or Obligation 11 / 01 / 2014
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1084824.67
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jane M Kesinger
Mailing Address 209 Hillside Dr
City Baldwin City State KS Zip Code 66006
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 10.00
Transaction ID : 8f13b609-bf0a-4406-9
Date of Disbursement or Obligation 11 / 01 / 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 206128.45
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 25.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 Jane M Kesinger
Mailing Address 209 Hillside Dr
City Baldwin City State KS Zip Code 66006
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 1.38
Transaction ID : b6a1c248-596b-4600-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kendyl H Browder
Mailing Address 4429 Lagan Circle
City Winterville State NC Zip Code 28590
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 30.00
Transaction ID : b48efe38-f2f5-413f-a
Date of Disbursement or Obligation 11 / 01 / 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 31.38
(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 Kendyl H Browder
Mailing Address 4429 Lagan Circle
City Winterville State NC Zip Code 28590
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 12.60
Transaction ID : 54c8891e-28fb-4410-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 70.00
Transaction ID : 7b194188-3eb5-4510-9
Date of Disbursement or Obligation 11 / 01 / 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 82.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 Diane Smith
Mailing Address 4006 Wolkswalk Place
City Raleigh State NC Zip Code 27610
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 43.00
Transaction ID : e232beb8-a475-4405-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Diane Smith
Mailing Address 4006 Wolkswalk Place
City Raleigh State NC Zip Code 27610
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 9.60
Transaction ID : 49ed625a-0013-4b2e-9
Date of Disbursement or Obligation 11 / 01 / 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 52.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 Stephanie E Hardy
Mailing Address 3039 Four Way Rd
City Snow Hill State NC Zip Code 28580
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 20.00
Transaction ID : 71e597ed-36d9-4380-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : c8588ea5-8b2d-4307-b
Date of Disbursement or Obligation 11 / 01 / 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 70.00
(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 11 / 03 / 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 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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 23.16
Transaction ID : 1d8fa5c0-3b39-4d2a-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Linda J Fueling
Mailing Address 6424 Purple Martin Ct
City Wilmington State NC Zip Code 28411
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 23.00
Transaction ID : bba743d9-67e0-4437-8
Date of Disbursement or Obligation 11 / 01 / 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 46.16
(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 Linda J Fueling
Mailing Address 6424 Purple Martin Ct
City Wilmington State NC Zip Code 28411
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 8.58
Transaction ID : d6f77601-9d2e-48de-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Heather A Smith
Mailing Address 995 Clairborne Rd
City Calhoun State LA Zip Code 71225
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 30.00
Transaction ID : 1efb11d3-b58a-42ff-8
Date of Disbursement or Obligation 11 / 01 / 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 38.58
(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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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 A Smith
Mailing Address 995 Clairborne Rd
City Calhoun State LA Zip Code 71225
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 14.40
Transaction ID : 9ce82762-7304-4872-b
Date of Disbursement or Obligation 11 / 01 / 2014
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 228584.65
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Joanna Kindstedt
Mailing Address 2134 Tobaccoville Rd
City Rural Hall State NC Zip Code 27045
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 40.80
Transaction ID : 69b132cc-b40e-4d6a-9
Date of Disbursement or Obligation 11 / 01 / 2014
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1084824.67
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 55.20
(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.
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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 James Kindstedt
Mailing Address 5510 Dogwood Dr
City Winston Salem State NC Zip Code 27105
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 40.80
Transaction ID : f3077b16-b09b-4842-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee James Kindstedt
Mailing Address 5510 Dogwood Dr
City Winston Salem State NC Zip Code 27105
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 9.66
Transaction ID : 87c9d62d-7d8a-4fa7-9
Date of Disbursement or Obligation 11 / 01 / 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 50.46
(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 11 / 03 / 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
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 15.00
Transaction ID : 3a40b8c7-4445-49b6-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
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
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 6.00
Transaction ID : 51c04d38-0a4d-4605-b
Date of Disbursement or Obligation 11 / 01 / 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 21.00
(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 11 / 03 / 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 Susan K Hamby
Mailing Address 202 Violet 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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : c665c36b-0dd8-4c0a-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Leona Martin
Mailing Address 9901 Floyd St
City Overland Park State KS Zip Code 66212
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : e0aaada4-2828-4a40-a
Date of Disbursement or Obligation 11 / 01 / 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 100.00
(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 11 / 03 / 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 Leona Martin
Mailing Address 9901 Floyd St
City Overland Park State KS Zip Code 66212
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 11.10
Transaction ID : 901f7bb2-00a1-48a7-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Eva M Johnston
Mailing Address 2517 N 47th St
City Milwaukee State WI Zip Code 53210
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 35.00
Transaction ID : 4b1b8c4f-4f87-447e-9
Date of Disbursement or Obligation 11 / 01 / 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 46.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ms. Emily Buchanan [Electronically Filed] Date 11 / 03 / 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 Zachary R McCleese
Mailing Address 323 Rolling Pines Dr
City Spring Lake State NC Zip Code 28390
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : 914ab9cb-c32f-4e96-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Zachary R McCleese
Mailing Address 323 Rolling Pines Dr
City Spring Lake State NC Zip Code 28390
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 30.60
Transaction ID : 384c9595-b0f7-48f6-8
Date of Disbursement or Obligation 11 / 01 / 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 110.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ms. Emily Buchanan [Electronically Filed] Date 11 / 03 / 2014
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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 Christopher L Brazil
Mailing Address 5560 Dogwood Dr
City Winston Salem State NC Zip Code 27105
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 31.50
Transaction ID : 111ce467-bf98-4084-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Christopher L Brazil
Mailing Address 5560 Dogwood Dr
City Winston Salem State NC Zip Code 27105
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 3.90
Transaction ID : eac81295-568f-47b5-9
Date of Disbursement or Obligation 11 / 01 / 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 35.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ms. Emily Buchanan [Electronically Filed] Date 11 / 03 / 2014
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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 Kirsten E McKinney
Mailing Address 1419 S Highbush Ave
City Fayetteville State AR Zip Code 72701
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 12.50
Transaction ID : 0ea65dab-391b-4350-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kirsten E McKinney
Mailing Address 1419 S Highbush Ave
City Fayetteville State AR Zip Code 72701
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 4.50
Transaction ID : 860284cf-7dc0-4941-a
Date of Disbursement or Obligation 11 / 01 / 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 17.00
(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 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 35.00
Transaction ID : fc38e57f-025c-4902-8
Date of Disbursement or Obligation 11 / 01 / 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 2.40
Transaction ID : 639e66ab-ac48-46cb-a
Date of Disbursement or Obligation 11 / 01 / 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 37.40
(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 Janet Morris
Mailing Address 620 Old Barbome Rd Lot 2
City West Monroe State LA Zip Code 71291
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 70.00
Transaction ID : e1339759-8ab7-4230-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Janet Morris
Mailing Address 620 Old Barbome Rd Lot 2
City West Monroe State LA Zip Code 71291
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 8.40
Transaction ID : 5b547ae3-fcae-40c8-b
Date of Disbursement or Obligation 11 / 01 / 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 78.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ms. Emily Buchanan [Electronically Filed] Date 11 / 03 / 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 Elvis Spears
Mailing Address 2150 Hope St
City New Orleans State LA Zip Code 70119
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 60.00
Transaction ID : 684a499f-27e4-4ad4-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Elvis Spears
Mailing Address 2150 Hope St
City New Orleans State LA Zip Code 70119
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 10.50
Transaction ID : 16f5a068-38e3-4e9b-8
Date of Disbursement or Obligation 11 / 01 / 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 70.50
(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 11 / 03 / 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 Rys
Mailing Address 160 #50 Pompano Dr
City New Bern State NC Zip Code 28560
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 75.00
Transaction ID : 6c717f1f-6c12-469b-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Joseph R Rys
Mailing Address 160 #50 Pompano Dr
City New Bern State NC Zip Code 28560
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 12.84
Transaction ID : c40f5a90-c6ea-4b55-b
Date of Disbursement or Obligation 11 / 01 / 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 87.84
(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 11 / 03 / 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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 30.00
Transaction ID : d4f345b5-20b4-464c-9
Date of Disbursement or Obligation 11 / 01 / 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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 15.00
Transaction ID : d49bc57c-8038-4729-9
Date of Disbursement or Obligation 11 / 01 / 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 45.00
(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 11 / 03 / 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 Edmond D Rea
Mailing Address 416 Vine Dr
City Lawrence State KS Zip Code 66049
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 75.00
Transaction ID : 06ce0ce7-4d01-4237-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Edmond D Rea
Mailing Address 416 Vine Dr
City Lawrence State KS Zip Code 66049
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 15.30
Transaction ID : 28cfea5d-9dfe-48fc-9
Date of Disbursement or Obligation 11 / 01 / 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 90.30
(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 11 / 03 / 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 Cecilla A Rebrick
Mailing Address 5003 Allison Lane
City Ft. Smith State AR Zip Code 72901
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 40.00
Transaction ID : 5175afd8-9ac7-46a1-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Cecilla A Rebrick
Mailing Address 5003 Allison Lane
City Ft. Smith State AR Zip Code 72901
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 1.50
Transaction ID : 11dfcf92-75c6-4163-a
Date of Disbursement or Obligation 11 / 01 / 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 41.50
(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 11 / 03 / 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 60.00
Transaction ID : 031200d7-db18-4503-9
Date of Disbursement or Obligation 11 / 01 / 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 10.23
Transaction ID : 7cfd64b1-4b14-47e0-9
Date of Disbursement or Obligation 11 / 01 / 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 70.23
(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 11 / 03 / 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 Charleen Ecuyer
Mailing Address 3738 Woodland Ridge Blvd
City Baton Rouge State LA Zip Code 70816
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 82.50
Transaction ID : 293e094e-724b-4e93-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Charleen Ecuyer
Mailing Address 3738 Woodland Ridge Blvd
City Baton Rouge State LA Zip Code 70816
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 18.00
Transaction ID : 8b931e94-9f00-4805-8
Date of Disbursement or Obligation 11 / 01 / 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 100.50
(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 11 / 03 / 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 Avery Rodriguez
Mailing Address 11 Cooper Lane
City Conway State AR Zip Code 72034
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 139.00
Transaction ID : 65b4b562-c7c0-422e-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Avery Rodriguez
Mailing Address 11 Cooper Lane
City Conway State AR Zip Code 72034
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.10
Transaction ID : 9a9eddaf-c350-476d-9
Date of Disbursement or Obligation 11 / 01 / 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 189.10
(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 11 / 03 / 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 Chelsey Waite
Mailing Address 3738 Woodland Ridge Blvd
City Baton Rouge State LA Zip Code 70816
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 82.50
Transaction ID : cb7c20f0-390d-46c7-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Chelsey Waite
Mailing Address 3738 Woodland Ridge Blvd
City Baton Rouge State LA Zip Code 70816
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 82.50
Transaction ID : 7a2b09cc-da19-446a-9
Date of Disbursement or Obligation 11 / 01 / 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 165.00
(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 11 / 03 / 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 Vanessa E Ecuyer
Mailing Address 3738 Woodland Ridge Blvd
City Baton Rouge State LA Zip Code 70816
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 82.50
Transaction ID : 4dbd8d1a-2238-403a-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jackson S Tuttle
Mailing Address 404 Chancery Park Ct
City Kernersville State NC Zip Code 27284
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 65.00
Transaction ID : dcd4b6eb-4ec1-4463-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 147.50, (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 11 / 03 / 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 Jackson S Tuttle
Mailing Address 404 Chancery Park Ct
City Kernersville State NC Zip Code 27284
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 10.50
Transaction ID : b07f919d-48d7-4508-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Michael A Stieben
Mailing Address 16864 Stillwell
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : 776267a9-53ff-40c8-9
Date of Disbursement or Obligation 11 / 01 / 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 60.50
(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 11 / 03 / 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 A Stieben
Mailing Address 16864 Stillwell
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 22.80
Transaction ID : 9e934ee9-4ccb-4414-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Eric J Smith
Mailing Address 4967 Dysartville
City Morganton State NC Zip Code 28655
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 70.00
Transaction ID : 2acfde44-f62e-4a26-b
Date of Disbursement or Obligation 11 / 01 / 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 92.80
(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 11 / 03 / 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 E Smith
Mailing Address 4967 Dysartsville Rd
City Morganton State NC Zip Code 28655
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 70.00
Transaction ID : 69766968-bacb-49f2-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jennifer E Smith
Mailing Address 4967 Dysartsville Rd
City Morganton State NC Zip Code 28655
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 9.30
Transaction ID : 42e261a8-0e63-4c65-b
Date of Disbursement or Obligation 11 / 01 / 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 79.30
(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 11 / 03 / 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 Jeffrey S Hauge
Mailing Address 211 N Ashley Park
City Wichita State KS Zip Code 67212
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 25.00
Transaction ID : 695317f6-c434-4c14-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jeffrey S Hauge
Mailing Address 211 N Ashley Park
City Wichita State KS Zip Code 67212
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 6.00
Transaction ID : cce4ada3-d01a-4729-a
Date of Disbursement or Obligation 11 / 01 / 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 31.00
(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 11 / 03 / 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 Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 60.00
Transaction ID : dd7defcf-29ef-4086-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
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 Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 14.40
Transaction ID : 787617e1-0304-4735-a
Date of Disbursement or Obligation 11 / 01 / 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 74.40
(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 11 / 03 / 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 Laura U Logie
Mailing Address 2565 Shire Circle
City Harrisonburg State VA Zip Code 22801
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : f97b4f45-22c2-40fb-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
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 Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : 02adf4d0-710b-47af-b
Date of Disbursement or Obligation 11 / 01 / 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 130.00
(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 11 / 03 / 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 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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 9.90
Transaction ID : 3c0f7b35-2c9f-4009-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
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 Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 30.00
Transaction ID : 8de2c473-287b-49f9-b
Date of Disbursement or Obligation 11 / 01 / 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 39.90
(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 11 / 03 / 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 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 6.60
Transaction ID : 55cb3e8b-2ab7-4736-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Gary W Fuhrmann
Mailing Address 9425 Jessica Drive
City Shreveport State LA Zip Code 71106
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 62.50
Transaction ID : 0328df31-8868-4b9b-9
Date of Disbursement or Obligation 11 / 01 / 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 69.10
(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 11 / 03 / 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 Gary W Fuhrmann
Mailing Address 9425 Jessica Drive
City Shreveport State LA Zip Code 71106
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 9.30
Transaction ID : d7d039a5-8708-42a9-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Alice K Salazar
Mailing Address 605 W Houston St
City Marshall State TX Zip Code 75633
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 100.00
Transaction ID : 66c2aaa8-d67f-4519-b
Date of Disbursement or Obligation 11 / 01 / 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 109.30
(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 11 / 03 / 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 Alice K Salazar
Mailing Address 605 W Houston St
City Marshall State TX Zip Code 75633
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 67.20
Transaction ID : 1f46841a-d852-4dd9-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Mattie Harris
Mailing Address 3654 Tara St
City springdale State AR Zip Code 72762
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 60.00
Transaction ID : 76e374c8-20e8-4ccd-9
Date of Disbursement or Obligation 11 / 01 / 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 127.20
(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 11 / 03 / 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 Mattie Harris
Mailing Address 3654 Tara St
City springdale State AR Zip Code 72762
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 5.10
Transaction ID : 546948a6-63b1-4a94-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Carol L Walters
Mailing Address 1900 Glen West Way
City Fort Smith State AR Zip Code 72916
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : a16c2042-1606-47d7-8
Date of Disbursement or Obligation 11 / 01 / 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 85.10
(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 11 / 03 / 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 Carol L Walters
Mailing Address 1900 Glen West Way
City Fort Smith State AR Zip Code 72916
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 23.10
Transaction ID : 6d2a21f7-26cc-4074-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Antoinette Franklin
Mailing Address 8822 Apple St
City New Orleans State LA Zip Code 70188
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 60.00
Transaction ID : 1c991e58-7994-41af-9
Date of Disbursement or Obligation 11 / 01 / 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 83.10
(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 11 / 03 / 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 Antoinette Franklin
Mailing Address 8822 Apple St
City New Orleans State LA Zip Code 70188
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 12.00
Transaction ID : 92e6d424-cf79-4ab2-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Tammy Williams
Mailing Address 924 N. Prieur St
City New Orleans State LA Zip Code 70116
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 60.00
Transaction ID : ea2bb71b-3ae7-42c1-a
Date of Disbursement or Obligation 11 / 01 / 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 72.00
(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 11 / 03 / 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 Tammay Williams
Mailing Address 924 N. Prieur St
City New Orleans State LA Zip Code 70116
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 12.00
Transaction ID : bd4492d6-aad1-4f9d-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Thomas A Gawdun
Mailing Address 2207 SE 64th St
City Topeka State KS Zip Code 66605
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 60.00
Transaction ID : 81d1e50a-654e-48ab-b
Date of Disbursement or Obligation 11 / 01 / 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 72.00
(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 11 / 03 / 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 Thomas A Gawdun
Mailing Address 2207 SE 64th St
City Topeka State KS Zip Code 66605
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 17.49
Transaction ID : d1489214-92c9-457d-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Bethlehem R Romm
Mailing Address 2609 Bluestrem Dr
City Lawrence State KS Zip Code 66047
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 63.00
Transaction ID : 60f1506e-36bc-432f-b
Date of Disbursement or Obligation 11 / 01 / 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 80.49
(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 11 / 03 / 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 Bethlehem R Romm
Mailing Address 2609 Bluestrem Dr
City Lawrence State KS Zip Code 66047
Purpose of Expenditure Mileage Category/Type 002

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 20.70
Transaction ID : 327987d0-cdf2-4228-8
Date of Disbursement or Obligation 11 / 01 / 2014

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

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

Full Name of Payee Kenny Wallis
Mailing Address 6412 Osage Dr
City North Little rock State AR Zip Code 72116
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 75.00
Transaction ID : 5d8b3f8a-c4c3-4d82-b
Date of Disbursement or Obligation 11 / 01 / 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 95.70
(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 11 / 03 / 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 Kenny Wallis
Mailing Address 6412 Osage Dr
City North Little rock State AR Zip Code 72116
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 15.21
Transaction ID : 3da95bda-8c0f-4a49-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
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 Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : bfa8e2fa-44c6-4310-8
Date of Disbursement or Obligation 11 / 01 / 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 65.21
(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 11 / 03 / 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 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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 2.25
Transaction ID : a1acb901-6fd1-4ccf-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Phillip Williams
Mailing Address 3007 Darden Rd
City Greensboro State NC Zip Code 27407
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : 3c7ae088-6681-4b6b-9
Date of Disbursement or Obligation 11 / 01 / 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 52.25
(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 11 / 03 / 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 Phillip Williams
Mailing Address 3007 Darden Rd
City Greensboro State NC Zip Code 27407
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 18.00
Transaction ID : a3f7bbc3-d6b6-4c0d-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Beverly Williams
Mailing Address 3007 Darden Rd
City Greensboro State NC Zip Code 27407
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : f9944b76-6874-40c8-a
Date of Disbursement or Obligation 11 / 01 / 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 68.00
(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 11 / 03 / 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 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 Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 70.00
Transaction ID : fc3534b6-83e6-4663-b
Date of Disbursement or Obligation 11 / 01 / 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 Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 19.50
Transaction ID : b387a5ab-09c1-4756-9
Date of Disbursement or Obligation 11 / 01 / 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 89.50
(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 11 / 03 / 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

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : 0d4cfbfa-730c-4a4c-b
Date of Disbursement or Obligation 11 / 01 / 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)

Calendar Year-To-Date Per Election for Office Sought 228584.65

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

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 47.10
Transaction ID : 08a5fc5b-c16b-439f-b
Date of Disbursement or Obligation 11 / 01 / 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)

Calendar Year-To-Date Per Election for Office Sought 228584.65

(a) SUBTOTAL of Itemized Independent Expenditures 127.10
(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

Signature

[Electronically Filed]

Date

11 / 03 / 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 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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : be325cd2-fa2e-4d93-9
Date of Disbursement or Obligation 11 / 01 / 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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 88.20
Transaction ID : 7f148f1b-c714-4250-b
Date of Disbursement or Obligation 11 / 01 / 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 168.20
(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 11 / 03 / 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 D Meens
Mailing Address 5724 SW Arrowhead Ct
City Topeka State KS Zip Code 66614
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 25.00
Transaction ID : 06ab4427-b9d2-4b1a-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Mary D Meens
Mailing Address 5724 SW Arrowhead Ct
City Topeka State KS Zip Code 66614
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 11.40
Transaction ID : dcc82378-2f52-48cd-a
Date of Disbursement or Obligation 11 / 01 / 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 36.40
(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 11 / 03 / 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 Ryan Drake
Mailing Address 29637 Park St
City Walker State LA Zip Code 70785
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 32.50
Transaction ID : 1d33ac0f-9f9e-4f7b-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Ryan Drake
Mailing Address 29637 Park St
City Walker State LA Zip Code 70785
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 3.60
Transaction ID : 6837868f-ce97-4581-8
Date of Disbursement or Obligation 11 / 01 / 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 36.10
(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 11 / 03 / 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
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 90.00
Transaction ID : 8a54cc18-69fd-49fe-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
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
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 48.60
Transaction ID : e2cc7d3c-1739-42ff-b
Date of Disbursement or Obligation 11 / 01 / 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 138.60
(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 11 / 03 / 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 Julie M Gentry
Mailing Address 314 S Main St
City Roxboro State NC Zip Code 27573
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 75.00
Transaction ID : e7da4801-e9cc-4d71-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Julie M Gentry
Mailing Address 314 S Main St
City Roxboro State NC Zip Code 27573
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 12.93
Transaction ID : f765da81-df60-4902-9
Date of Disbursement or Obligation 11 / 01 / 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 87.93
(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 11 / 03 / 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 Josh R Arnold
Mailing Address 1531 N Ridgewood Dr
City Wichita State KS Zip Code 67208
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 105.00
Transaction ID : 48c968e8-635f-4691-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Josh R Arnold
Mailing Address 1531 N Ridgewood Dr
City Wichita State KS Zip Code 67208
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 41.34
Transaction ID : 7591f5de-c69b-4888-b
Date of Disbursement or Obligation 11 / 01 / 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 146.34
(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 11 / 03 / 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 James W Blevins
Mailing Address 108 East Clinton St PO Box 410
City Salemburg State NC Zip Code 28385
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 30.00
Transaction ID : f0bbc7e4-0691-46d0-b
Date of Disbursement or Obligation 11 / 01 / 2014

Name of Federal Candidate Ms. Kay Hagan
[] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1084824.67

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

Full Name of Payee James W Blevins
Mailing Address 108 East Clinton St PO Box 410
City Salemburg State NC Zip Code 28385
Purpose of Expenditure Mileage Category/Type 002

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 8.52
Transaction ID : 895b7093-f713-411d-a
Date of Disbursement or Obligation 11 / 01 / 2014

Name of Federal Candidate Ms. Kay Hagan
[] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1084824.67

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

(a) SUBTOTAL of Itemized Independent Expenditures 38.52
(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 11 / 03 / 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 K Billington
Mailing Address 437 Roberson Creek Rd
City Pittsboro State NC Zip Code 27312
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 35.00
Transaction ID : bfc3a449-90e9-4e85-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Brenda K Billington
Mailing Address 437 Roberson Creek Rd
City Pittsboro State NC Zip Code 27312
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 11.40
Transaction ID : e07525ab-e6ba-4f3a-b
Date of Disbursement or Obligation 11 / 01 / 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 46.40
(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
Signature

[Electronically Filed]

Date 11 / 03 / 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 Michael D English
Mailing Address F4 Benton Ave Apt 4
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 70.00
Transaction ID : 693f532b-d0c3-4d60-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Michael D English
Mailing Address F4 Benton Ave Apt 4
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 30.90
Transaction ID : d3f50b50-32d1-44bc-9
Date of Disbursement or Obligation 11 / 01 / 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 100.90
(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 11 / 03 / 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 Sue G Walker
Mailing Address 3 Girard
City Fort Smith State AR Zip Code 72901
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 60.00
Transaction ID : fc8e4379-d2c0-4727-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Edward N Walker
Mailing Address 3 Girard St
City Ft Smith State AR Zip Code 72901
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 40.00
Transaction ID : cb34d3ae-3a37-4177-a
Date of Disbursement or Obligation 11 / 01 / 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 100.00
(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 11 / 03 / 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 Edward N Walker
Mailing Address 3 Girard St
City Ft Smith State AR Zip Code 72901
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 25.20
Transaction ID : f2dc1e0d-e462-4845-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Logan B Piper
Mailing Address 3205 Pebble Beach Rd
City Conway State AR Zip Code 72034
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 18.00
Transaction ID : 5229ab6e-6458-48ff-9
Date of Disbursement or Obligation 11 / 01 / 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 43.20
(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 11 / 03 / 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 Logan B Piper
Mailing Address 3205 Pebble Beach Rd
City Conway State AR Zip Code 72034
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 26.19
Transaction ID : 66edeb92-cd61-4d4d-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
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 Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 40.00
Transaction ID : 65ed998b-07a1-4eeb-9
Date of Disbursement or Obligation 11 / 01 / 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 66.19
(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
Signature

[Electronically Filed]

Date 11 / 03 / 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 Francis Richardson
Mailing Address 220 Doucet Rd
City Lafayette State LA Zip Code 70503
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 4.32
Transaction ID : 2f4f432a-a845-4cd4-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Melissa D Turner
Mailing Address 9653 Nations Dr
City Springdale State AR Zip Code 72762
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : 801ad53d-567b-4e5a-8
Date of Disbursement or Obligation 11 / 01 / 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 54.32
(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 11 / 03 / 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 Luke S Buren
Mailing Address 415 E Carroll
City Macomb State IL Zip Code 61455
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : ebe27772-aaef-414e-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Nathan D Stevens
Mailing Address 9653 Nations Dr
City Springdale State AR Zip Code 72762
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : 73bac5ee-827b-4a64-9
Date of Disbursement or Obligation 11 / 01 / 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 100.00
(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 11 / 03 / 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 Nathan D Stevens
Mailing Address 9653 Nations Dr
City Springdale State AR Zip Code 72762
Purpose of Expenditure Mileage Category/Type 002
Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 38.40
Transaction ID : a44c99d9-30a8-4c6f-8
Date of Disbursement or Obligation 11 / 01 / 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 226127.16
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Kristen Clapper
Mailing Address 924 French Street
City New Orleans State LA Zip Code 70124
Purpose of Expenditure Salary Category/Type 001
Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 70.00
Transaction ID : c2e70235-d462-4803-8
Date of Disbursement or Obligation 11 / 01 / 2014
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 228584.65
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 108.40
(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 11 / 03 / 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 Kristen Clapper
Mailing Address 924 French Street
City New Orleans State LA Zip Code 70124
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 6.00
Transaction ID : 79be83d1-b6a1-42e4-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee John MacDonald
Mailing Address 1926 Edgewater Dr
City Charolette State NC Zip Code 28210
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 72.50
Transaction ID : f3779c92-7828-4a27-8
Date of Disbursement or Obligation 11 / 01 / 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 78.50
(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 11 / 03 / 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 John MacDonald
Mailing Address 1926 Edgewater Dr
City Charolette State NC Zip Code 28210
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 15.30
Transaction ID : 5695551a-4dfe-45d4-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : 584cabfe-f856-4679-9
Date of Disbursement or Obligation 11 / 01 / 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 65.30
(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 11 / 03 / 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 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 6.60
Transaction ID : 3ef0c9e2-c309-460a-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Cynthia N Schmit
Mailing Address 2226 Taft Circle Apt 1
City Winchester State VA Zip Code 22601
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 32.50
Transaction ID : 4ead6235-37e6-4b00-b
Date of Disbursement or Obligation 11 / 01 / 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 39.10
(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 11 / 03 / 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 Dustin Swanigan
Mailing Address 11345 Country Rd 385
City Holts Summit State MO Zip Code 65043
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 110.00
Transaction ID : 6b4f8354-7c31-44a0-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

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
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 65.00
Transaction ID : bcbc56d8-e6fb-4e83-8
Date of Disbursement or Obligation 11 / 01 / 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 175.00
(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 11 / 03 / 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 Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 31.50
Transaction ID : 0f42e9c5-a4cc-4665-a
Date of Disbursement or Obligation 11 / 01 / 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 Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 110.00
Transaction ID : 0cec7c5e-bdb5-4087-b
Date of Disbursement or Obligation 11 / 01 / 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 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 11 / 03 / 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 City 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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 110.70
Transaction ID : 16f6cfcc-f58f-4a4f-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 60.00
Transaction ID : d123bdcf-d5bb-4ba6-a
Date of Disbursement or Obligation 11 / 01 / 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 170.70
(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 11 / 03 / 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
Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 25.20
Transaction ID : 12ea24ab-e0f3-4459-b
Date of Disbursement or Obligation 11 / 01 / 2014
Name of Federal Candidate Mr. Mark L Pryor
Office Sought: [] House District: 00 [X] Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 226127.16
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

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
Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 90.00
Transaction ID : 5348777c-c079-4d37-b
Date of Disbursement or Obligation 11 / 01 / 2014
Name of Federal Candidate Ms. Mary L Landrieu
Office Sought: [] House District: 00 [X] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 228584.65
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 115.20
(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 11 / 03 / 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 Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 2.40
Transaction ID : 4812117e-8531-4280-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
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 Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : 2131a575-d252-41bb-9
Date of Disbursement or Obligation 11 / 01 / 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 52.40
(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 11 / 03 / 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 Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 13.20
Transaction ID : d13cb01b-76a5-4d09-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
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 Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : 51f72f2e-7564-4270-8
Date of Disbursement or Obligation 11 / 01 / 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 63.20
(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
Signature

[Electronically Filed]

Date 11 / 03 / 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 Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 35.10
Transaction ID : 88a12fcb-d72a-4805-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Robert B Johnson
Mailing Address 804 Worthington Way
City Wilmington State NC Zip Code 28411
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : aa2259ad-9bd5-4fce-9
Date of Disbursement or Obligation 11 / 01 / 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 85.10
(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 11 / 03 / 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 Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : 1060c1e6-a352-45f5-b
Date of Disbursement or Obligation 11 / 01 / 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 Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 45.60
Transaction ID : 1f4751d3-5883-48e2-8
Date of Disbursement or Obligation 11 / 01 / 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 125.60
(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 11 / 03 / 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 Cynthia J Christmas
Mailing Address 1731 Frenchmen St
City New Orleans State LA Zip Code 70116
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 70.00
Transaction ID : 2981afdd-dd04-4251-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Cynthia J Christmas
Mailing Address 1731 Frenchmen St
City New Orleans State LA Zip Code 70116
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 11.10
Transaction ID : a7a6bd5c-6f9c-4889-9
Date of Disbursement or Obligation 11 / 01 / 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 81.10
(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 11 / 03 / 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 Sheri J Peace
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 100.00
Transaction ID : 0385a9a5-3c75-4fa0-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Sheri J Peace
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 47.40
Transaction ID : 9f65e64a-a50b-44bc-b
Date of Disbursement or Obligation 11 / 01 / 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 147.40
(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 11 / 03 / 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 100.00
Transaction ID : 02896ef4-3000-4bbb-8
Date of Disbursement or Obligation 11 / 01 / 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 23.40
Transaction ID : 8fb208b3-f21f-4a8e-a
Date of Disbursement or Obligation 11 / 01 / 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 123.40
(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 11 / 03 / 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 Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : 00013bb3-5c34-4ceb-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
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 Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 36.00
Transaction ID : 5d66d938-c240-47a7-a
Date of Disbursement or Obligation 11 / 01 / 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 116.00
(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 11 / 03 / 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 Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 65.00
Transaction ID : 749725e9-cbfa-413d-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
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 Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 26.10
Transaction ID : 023f219a-a705-4026-9
Date of Disbursement or Obligation 11 / 01 / 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 91.10
(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 11 / 03 / 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 Aaron L Watson
Mailing Address 30217 Crook Rd
City Cleveland State MO Zip Code 64734
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 60.00
Transaction ID : 2635deb6-e8f0-462e-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Aaron L Watson
Mailing Address 30217 Crook Rd
City Cleveland State MO Zip Code 64734
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 25.50
Transaction ID : db66c369-1b15-4dd3-b
Date of Disbursement or Obligation 11 / 01 / 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 85.50
(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 11 / 03 / 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 Ainsworth
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 100.00
Transaction ID : 64ff8b04-7598-4f0d-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Heather Ainsworth
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 43.50
Transaction ID : a4e12253-944d-4d79-b
Date of Disbursement or Obligation 11 / 01 / 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 143.50
(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 11 / 03 / 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 Avery Watson
Mailing Address 30217 Crook Rd
City Cleveland State MO Zip Code 64734
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : fce2e71c-c720-4e2e-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Greg Meens
Mailing Address 5724 SW Arrowhead Ct
City Topeka State KS Zip Code 66614
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 15.00
Transaction ID : 0e355ac0-3b73-4c26-b
Date of Disbursement or Obligation 11 / 01 / 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 65.00
(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 11 / 03 / 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 April A Watson
Mailing Address 30217 Crook Rd
City Cleveland State MO Zip Code 64734
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : 2074a53e-f363-49d2-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee April A Watson
Mailing Address 30217 Crook Rd
City Cleveland State MO Zip Code 64734
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 30.90
Transaction ID : a8bf8306-66e9-448c-9
Date of Disbursement or Obligation 11 / 01 / 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 80.90
(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 11 / 03 / 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
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 55.00
Transaction ID : d49b71f9-ba3d-4429-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

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
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 7.32
Transaction ID : be0bb31f-541c-49ef-b
Date of Disbursement or Obligation 11 / 01 / 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 62.32
(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 11 / 03 / 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 Theresa a Youngblood
Mailing Address 102 S Main Street Apt A2
City Berryville State VA Zip Code 22611
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 110.00
Transaction ID : 424f1dcd-3536-415c-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Ashley n Thompson
Mailing Address 272 Westgate Ct Apt 6
City Lexington State NC Zip Code 27295
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 65.00
Transaction ID : 11fb338f-7c68-4a74-a
Date of Disbursement or Obligation 11 / 01 / 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 175.00
(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 11 / 03 / 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 n Thompson
Mailing Address 272 Westgate Ct Apt 6
City Lexington State NC Zip Code 27295
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 22.50
Transaction ID : a1e2691e-4d3d-41ad-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
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 Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 105.00
Transaction ID : 4c13f622-06ba-4fc3-9
Date of Disbursement or Obligation 11 / 01 / 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 127.50
(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 11 / 03 / 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 Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 59.40
Transaction ID : d3787227-5749-4550-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Randy G Lookabill
Mailing Address 200 Carawood Lane
City Lexington State NC Zip Code 27295
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 65.00
Transaction ID : be552cd9-6922-440f-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 124.40, (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 11 / 03 / 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 G Lookabill
Mailing Address 200 Carawood Lane
City Lexington State NC Zip Code 27295
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 15.00
Transaction ID : f05059ed-f007-483a-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
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 Salary Category/Type 001
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : 4e335c6a-7d83-4beb-8
Date of Disbursement or Obligation 11 / 01 / 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 65.00
(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 11 / 03 / 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 Mileage Category/Type 002
Name of Federal Candidate Ms. Mary L Landrieu [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 3.90
Transaction ID : 5812d840-a091-4d54-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Timothy Foley
Mailing Address 20679 Glenbrook Terrace
City Sterling State VA Zip Code 20165
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : 3fe1ff80-938e-4e2f-8
Date of Disbursement or Obligation 11 / 01 / 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 83.90
(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 11 / 03 / 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 M Harris
Mailing Address 3654 Tara St
City Springdale State AR Zip Code 72762
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 55.00
Transaction ID : dec12004-b6b6-4960-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Jonathan M Harris
Mailing Address 3654 Tara St
City Springdale State AR Zip Code 72762
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 8.70
Transaction ID : f0e201c5-7a2c-4648-8
Date of Disbursement or Obligation 11 / 01 / 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 63.70
(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 11 / 03 / 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 Talia J DeGisi
Mailing Address 9513 Beverly Dr
City Overland Park State KS Zip Code 66207
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 60.00
Transaction ID : 3ca41f52-26bc-4458-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Talia J DeGisi
Mailing Address 9513 Beverly Dr
City Overland Park State KS Zip Code 66207
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 7.50
Transaction ID : 3255ab19-f4b8-40ac-9
Date of Disbursement or Obligation 11 / 01 / 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 67.50
(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 11 / 03 / 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 Lydia H DeGisi
Mailing Address 9513 Beverly Dr
City Overland Park State KS Zip Code 66207
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 67.50
Transaction ID : 5e4417dc-d3fa-4c79-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Lydia H DeGisi
Mailing Address 9513 Beverly Dr
City Overland Park State KS Zip Code 66207
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 10.50
Transaction ID : c69fd50-ecb3-4095-a
Date of Disbursement or Obligation 11 / 01 / 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 78.00
(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 11 / 03 / 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 Joe Dockers
Mailing Address 419 W Ford St Apt C
City Pittsburg State KS Zip Code 66762
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 70.00
Transaction ID : c2562ab1-93b7-4f92-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee John P Hilkert
Mailing Address 7 Bards Lane
City Fletcher State NC Zip Code 28732
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 85.00
Transaction ID : 3d964c79-a1f9-4ccc-a
Date of Disbursement or Obligation 11 / 01 / 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 155.00
(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 11 / 03 / 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 John P Hilkert
Mailing Address 7 Bards Lane
City Fletcher State NC Zip Code 28732
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 14.70
Transaction ID : 5eaa615a-a171-43ef-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Andrew Sricklin
Mailing Address 2026 West Nettleton Avenue Apt 2
City Jonesboro State AR Zip Code 72401
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 25.00
Transaction ID : a1746e88-8bed-4989-b
Date of Disbursement or Obligation 11 / 01 / 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 39.70
(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 11 / 03 / 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 Andrew Stricklin
Mailing Address 2026 West Nettleton Avenue Apt 2
City Jonesboro State AR Zip Code 72401
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 39.54
Transaction ID : 80fb9e08-5760-40ce-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Ashlee G Anderson
Mailing Address 2226 Enloe St
City Fayetteville State NC Zip Code 28306
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 11.50
Transaction ID : ba238442-afe7-4939-b
Date of Disbursement or Obligation 11 / 01 / 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 51.04
(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 11 / 03 / 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 Ashlee G Anderson
Mailing Address 2226 Enloe St
City Fayetteville State NC Zip Code 28306
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 3.60
Transaction ID : 3307bdc2-0626-4801-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Leslie D Moore
Mailing Address 1903 Swan Dr
City Lenoir State NC Zip Code 28645
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 100.00
Transaction ID : b0d735de-d4a6-4c6c-8
Date of Disbursement or Obligation 11 / 01 / 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 103.60
(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 11 / 03 / 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 Leslie D Moore
Mailing Address 1903 Swan Dr
City Lenoir State NC Zip Code 28645
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 12.30
Transaction ID : c735cc17-f15d-483d-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Karen R Myers
Mailing Address 14566 NW 110th St
City Whitewater State KS Zip Code 67154
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 110.00
Transaction ID : a624c6e2-4ec4-4799-9
Date of Disbursement or Obligation 11 / 01 / 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 122.30
(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 11 / 03 / 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 Karen R Myers
Mailing Address 14566 NW 110th St
City Whitewater State KS Zip Code 67154
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 24.00
Transaction ID : 413336fd-d849-4eb4-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
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 Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 125.00
Transaction ID : f2e72fb1-1e32-40ef-8
Date of Disbursement or Obligation 11 / 01 / 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 149.00
(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 11 / 03 / 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 Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 52.20
Transaction ID : 7c679bcb-841b-41bc-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
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 Salary Category/Type 001
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 51.00
Transaction ID : 55aea92c-57ce-40a0-9
Date of Disbursement or Obligation 11 / 01 / 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 103.20
(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 11 / 03 / 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 Mileage Category/Type 002
Name of Federal Candidate Mr. Greg Orman [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 7.65
Transaction ID : 7d45d8a1-09e4-4cec-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Julia Perry
Mailing Address 2046 Perrin St Apt C
City Shreveport State LA Zip Code 71101
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 100.00
Transaction ID : 6981129c-5a56-4149-8
Date of Disbursement or Obligation 11 / 01 / 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 107.65
(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 11 / 03 / 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
Name of Federal Candidate: Mr. Mark L Pryor, [X] Oppose
Calendar Year-To-Date Per Election for Office Sought: 226127.16

Date of Public Distribution/Dissemination: 11/01/2014
Amount: 150.00
Transaction ID: d0a28b0a-6bb6-459a-8
Date of Disbursement or Obligation: 11/01/2014
Office Sought: [] House, [X] Senate, District: 00, 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: Salary, Category/Type: 001
Name of Federal Candidate: Mr. Mark L Pryor, [X] Oppose
Calendar Year-To-Date Per Election for Office Sought: 226127.16

Date of Public Distribution/Dissemination: 11/01/2014
Amount: 150.00
Transaction ID: 7cf6c4b5-2e30-4805-a
Date of Disbursement or Obligation: 11/01/2014
Office Sought: [] House, [X] Senate, District: 00, State: AR
Disbursement For: [] Primary, [X] General 2014, [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures: 300.00
(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 11/03/2014
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 Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 88.92
Transaction ID : 10082de2-f8ae-4062-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Christine Stevens
Mailing Address 100 Asbury Ct
City Winchester State VA Zip Code 22602
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 90.00
Transaction ID : 325d5709-7896-45ae-9
Date of Disbursement or Obligation 11 / 01 / 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 178.92
(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 11 / 03 / 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 Kristina M Jinkens
Mailing Address 2138 N 1000 Rd
City Eudora State KS Zip Code 66025
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 10.00
Transaction ID : 2ae4e0d2-8a1b-4ca9-a
Date of Disbursement or Obligation 11 / 01 / 2014

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

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

Full Name of Payee Jazmine d Conner
Mailing Address 100 ASBURY CT
City WINCHESTER State VA Zip Code 22602
Purpose of Expenditure Salary Category/Type 001

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 90.00
Transaction ID : b106a687-7542-415b-9
Date of Disbursement or Obligation 11 / 01 / 2014

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

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

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 100.00; (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 11 / 03 / 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 Jon E Conner
Mailing Address 100 Asbury Ct
City Winchester State VA Zip Code 22602
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 90.00
Transaction ID : e0e3ebe0-100f-46a4-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Rodney O Culbreath
Mailing Address 100 Asbury Ct
City Winchester State VA Zip Code 22602
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 90.00
Transaction ID : 172e8763-1532-4e75-8
Date of Disbursement or Obligation 11 / 01 / 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 180.00
(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 11 / 03 / 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 Rodney D Culbreth
Mailing Address 100 Asbury CT, 3200 Dam Neck Rd
City Winchester, State VA, Zip Code 22602
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 90.00
Transaction ID : 7655dec1-1a3a-4ccd-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00, [] President, [X] Senate State: KS
Disbursement For: [] Primary, [X] General 2014, [] Other (specify)

Full Name of Payee Rze Culbreath
Mailing Address 100 Asbury Ct
City Winchester, State VA, Zip Code 22602
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 90.00
Transaction ID : 13881b43-1270-48dd-9
Date of Disbursement or Obligation 11 / 01 / 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 180.00
(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 11 / 03 / 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 Carl Brent
Mailing Address 6718 Lake Willow Dr
City New Orleans State LA Zip Code 70126
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : 9cc19421-4d05-4f87-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: LA
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Carl Brent
Mailing Address 6718 Lake Willow Dr
City New Orleans State LA Zip Code 70126
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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 20.40
Transaction ID : e2bbae1a-813f-4502-b
Date of Disbursement or Obligation 11 / 01 / 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 100.40
(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 11 / 03 / 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 Brian A Sherwood
Mailing Address 1003 W 5th St
City Coffeyville State KS Zip Code 67337
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 20.00
Transaction ID : cf3f7afc-b1d3-4426-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Brieshauna M Stevens
Mailing Address 1703 Torrey Pines Ct
City Reston State VA Zip Code 20190
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 50.00
Transaction ID : 990e3e4f-1560-47f1-a
Date of Disbursement or Obligation 11 / 01 / 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 70.00
(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 11 / 03 / 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 Salary Category/Type 001
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 105.00
Transaction ID : c315d683-23b6-486a-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
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 Mileage Category/Type 002
Name of Federal Candidate Ms. Kay Hagan [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 26.10
Transaction ID : 6ca17910-10b6-44a8-a
Date of Disbursement or Obligation 11 / 01 / 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 131.10
(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 11 / 03 / 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 Danielle 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 102.50
Transaction ID : 3608471f-c628-43be-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Danielle 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 25.50
Transaction ID : 89a3ed58-2234-4677-a
Date of Disbursement or Obligation 11 / 01 / 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 128.00
(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 11 / 03 / 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 Eleanor McCoy
Mailing Address 4902 Catawba Dr
City Greensboro State NC Zip Code 27407
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 105.00
Transaction ID : d72d3715-3db8-4303-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Eleanor McCoy
Mailing Address 4902 Catawba Dr
City Greensboro State NC Zip Code 27407
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 27.60
Transaction ID : 9868dcbe-1f6c-499f-9
Date of Disbursement or Obligation 11 / 01 / 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 132.60
(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 11 / 03 / 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 Mry S Everly
Mailing Address 787 N 1851 Diagonal Rd
City Lecompton State KS Zip Code 66050
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 15.00
Transaction ID : 7ca68f2d-ebbb-4085-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Mry S Everly
Mailing Address 787 N 1851 Diagonal Rd
City Lecompton State KS Zip Code 66050
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 12.00
Transaction ID : 4b8f2c22-fcbb-4ac5-a
Date of Disbursement or Obligation 11 / 01 / 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 27.00
(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 11 / 03 / 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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 90.00
Transaction ID : 26171e45-a5a3-4ef2-8
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 95.00
Transaction ID : 23384240-064d-4550-b
Date of Disbursement or Obligation 11 / 01 / 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 185.00
(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 11 / 03 / 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 161.10
Transaction ID : 7ae53b1c-506f-4d1b-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
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 Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 70.00
Transaction ID : 399d6a2a-7f84-46ea-a
Date of Disbursement or Obligation 11 / 01 / 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 231.10
(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 11 / 03 / 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 Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 31.50
Transaction ID : cf548d57-f3b5-40a4-a
Date of Disbursement or Obligation 11 / 01 / 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 Salary Category/Type 001
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 90.00
Transaction ID : 77299666-1316-4fa4-8
Date of Disbursement or Obligation 11 / 01 / 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 121.50
(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 11 / 03 / 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 Mileage Category/Type 002
Name of Federal Candidate Mr. Mark L Pryor [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 22.20
Transaction ID : 2323ba72-3805-4e29-8
Date of Disbursement or Obligation 11 / 01 / 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : 557bb6bc-98cd-43f3-9
Date of Disbursement or Obligation 11 / 01 / 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 102.20
(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 11 / 03 / 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 19.20
Transaction ID : 78cc7248-09ea-4949-a
Date of Disbursement or Obligation 11 / 01 / 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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : 7df89618-de97-49ca-9
Date of Disbursement or Obligation 11 / 01 / 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 99.20
(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 11 / 03 / 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 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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 80.00
Transaction ID : 0ac5e924-27f1-423f-9
Date of Disbursement or Obligation 11 / 01 / 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 228584.65

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 8.40
Transaction ID : 389460e5-2446-43bc-8
Date of Disbursement or Obligation 11 / 01 / 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 88.40
(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 11 / 03 / 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 Caleb Craig
Mailing Address 1410 Bushville drive
City Lenoir State NC Zip Code 28645
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 1084824.67

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 100.00
Transaction ID : 0969dc99-d667-4ed1-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: NC
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Shelby J Davis
Mailing Address 6414 The Divide Pkwy Apt 204
City Little Rock State AR Zip Code 72223
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 25.00
Transaction ID : 00970311-8357-4b3e-9
Date of Disbursement or Obligation 11 / 01 / 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 125.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Ms. Emily Buchanan [Electronically Filed] Date 11 / 03 / 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 Landon R Boyles
Mailing Address 211 Hidden Meadows Dr
City Benton State AR Zip Code 72015
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 25.00
Transaction ID : e370f6df-3be1-4333-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Landon R Boyles
Mailing Address 211 Hidden Meadows Dr
City Benton State AR Zip Code 72015
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 6.30
Transaction ID : ce49c443-7768-4bb8-b
Date of Disbursement or Obligation 11 / 01 / 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 31.30
(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 11 / 03 / 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 Heidi R Robinson
Mailing Address 3722 SE Evans Dr
City Topeka State KS Zip Code 66609
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 30.00
Transaction ID : 58daa990-8991-494e-b
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Heidi R Robinson
Mailing Address 3722 SE Evans Dr
City Topeka State KS Zip Code 66609
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 5.70
Transaction ID : 7bd3a84a-cb19-46eb-8
Date of Disbursement or Obligation 11 / 01 / 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 35.70
(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 11 / 03 / 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 Corban L Barnett
Mailing Address 1001 N Prospect
City Liberal State KS Zip Code 67901
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 60.00
Transaction ID : 1329e5f5-e6c7-4b99-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Corban L Barnett
Mailing Address 1001 N Prospect
City Liberal State KS Zip Code 67901
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 1.20
Transaction ID : 63e8ef75-1592-4992-b
Date of Disbursement or Obligation 11 / 01 / 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 61.20
(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 11 / 03 / 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 Chance B Ross
Mailing Address 920 W Gracewood Apt 106
City Fayetteville State AR Zip Code 72701
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 20.00
Transaction ID : 0d58246b-bded-4305-9
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: AR
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Chance B Ross
Mailing Address 920 W Gracewood Apt 106
City Fayetteville State AR Zip Code 72701
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 226127.16

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 13.20
Transaction ID : 0f88c567-23e3-48d9-a
Date of Disbursement or Obligation 11 / 01 / 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 33.20
(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 11 / 03 / 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 Marilyn Galliardt
Mailing Address 410 Wedgewood Ct
City Hesston State KS Zip Code 67062
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 95.00
Transaction ID : 74069acf-cc57-4453-a
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [] House District: 00 [] President [X] Senate State: KS
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Marilyn Galliardt
Mailing Address 410 Wedgewood Ct
City Hesston State KS Zip Code 67062
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 206128.45

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 48.00
Transaction ID : 40deacdc-7302-4544-8
Date of Disbursement or Obligation 11 / 01 / 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 143.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 11998.77

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 11 / 03 / 2014
Signature