Image# 14952582918 PAGE 1 / 55

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

'	or other man An Au	monzed Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Women Speak Out PA	C		
ADDRESS (number and street)	1200 New Hampshire Ave I	NW	
Check if different	Suite 750		
than previously reported. (ACC)	Washington		DC 20036 -
2. FEC IDENTIFICATION NU	IMBER ▼ CI	TY▲	STATE ▲ ZIP CODE ▲
C C00530766		S THIS NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	o 20 (M2) May 20 (M r 20 (M3) X Jun 20 (M6	(Non-Election Year Only) Sep. 20 (M9) Dec. 20 (M12)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report (Q	1)		
July 15 Quarterly Report (Q	(c) 12-Day	Primary (12P) Convention (12C)	General (12G) Runoff (12R) Special (12S)
October 15 Quarterly Report (Q	·	(123)	(
January 31 Year-End Report (Y	E) Election	on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	on on	in the State of
5. Covering Period 05		through 05	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined thi	is Report and to the best of	f my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer	Ms. Emily Buchanan		
Signature of Treasurer Ms. E	mily Buchanan	[Electronically Filed]	Date 11 12 / 2014
NOTE: Submission of false, errone	eous, or incomplete informatio	on may subject the person signing	g this Report to the penalties of 2 U.S.C. §437g.
Office Use			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Women Speak Out PAC 05 2014 05 2014 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 1842.48 January 1, 2014 (b) Cash on Hand at 414481.22 Beginning of Reporting Period..... 447830 27620 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 442101.22 449672.48 6(a) and 6(c) for Column B)..... 91503.82 99075.08 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 350597.4 350597.4 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Report Covering the Period: From: 05	01 2014	To: 05 31 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		111100
(i) Itemized (use Schedule A)	24450.00	444450
(ii) Unitemized	3170	3380
(iii) TOTAL (add		447006
Lines 11(a)(i) and (ii)▶	27620	447830
/b) Delitical Douty Committees	0.00	0.00
(b) Political Party Committees	5.55	3.00
(such as PACs)	0	00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	27620	447830
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
-		
3. All Loans Received	0.00	0.00
4. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures	7	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0	
9. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	27620	447830
O. Total Federal Receipts	07000	44700
(subtract Line 18(c) from Line 19)▶	27620	447830

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: —— (a) Allocated Federal/Non-Federal		Calchaal Tour to Bute
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) New Federal Chaus	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
Expenditures	32041.66	32487.92
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b)) ▶	32041.66	32487.92
Transfers to Affiliated/Other Party	0.00	0.00
Committees Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0	0
Independent Expenditures		
(use Schedule E)	59462.16	66587.16
Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	
(use Schedule F)	0.00	0.00
Lean Panaymente Mada	0.00	0.00
Loan Repayments Made	3.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(646). 46 17 (65)		
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0	0
Other Disbursements	0.00	0.00
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely		
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0
Tatal Diahumaanaata (ad liliana 24/4), 22		
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	91503.82	00075 00
20, 27, 20, 21, 20(u), 28 dilu 30(c))	91003.62	99075.08
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	91503.82	99075.08

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

. 23 1 3111 3x (1101: 02/2000)		i ago 🐱
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	27620	447830
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27620	447830
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	32041.66	32487.92
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32041.66	32487.92

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 6 OF 55

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Women Speak Out PAC		
St. Joseph Hospital Receipt For: Primary General Other (specify)	•	Date of Receipt 05 23 2014 Transaction ID: BD-884D-6B2F0BF4D6A8 Amount of Each Receipt this Period 300.00
King & Spalding Lawye	77002 Dation	Date of Receipt 05 27 2014 Transaction ID: FA-86B3-BB4F0868BFF6 Amount of Each Receipt this Period 250.00
Dempsey Oil, Inc. Indep	te Zip Code 71082 pation endent Oil Producer egate Year-to-Date ▼ 1000.00	Date of Receipt 05 27 2014 Transaction ID: B6-B787-E4736305936E Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	······••••••••••••••••••••••••••••••••	1550.00

FOR LINE NUMBER: **PAGE** 7 OF 55 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Women Speak Out PAC Full Name (Last, First, Middle Initial) George Suter Date of Receipt Mailing Address 2580 Greenwood Acres Dr 2014 27 City State Zip Code Transaction ID: 87-ACA1-7D715D4A8A09 DeKalb IL 60115 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert Naegele Date of Receipt Mailing Address 7993 Via Vecchia 05 27 2014 City State Zip Code Transaction ID: 90-ADBF-9A8221A7EBDB FL Naples 34108 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Maricel Heeter Date of Receipt Mailing Address 1435 Oakview Dr 05 27 2014 City Zip Code State Transaction ID: C2-8428-D3E9A2908687 McLean VA 22101 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self-Employed Translator Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: **PAGE** 8 OF 55 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Women Speak Out PAC Full Name (Last, First, Middle Initial) Robert Crnkovich Date of Receipt Mailing Address 5907 Moss Wood Ln 2014 City Zip Code State Transaction ID: 2B-88E7-0599EE2D6BAF VA McLean 22101 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer Occupation U.S. Department of Treasury Accountant Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rose Papadopoulos Date of Receipt Mailing Address 445 West St 05 29 2014 City State Zip Code Transaction ID: 56-B568-0F0AA65E3737 NY Harrison 10528 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Izzo Electric Inc. Office Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Shelia Neugebauer Date of Receipt Mailing Address 586 Middleline Rd 05 29 2014 City Zip Code State Transaction ID: 9A-A059-ABF148FF7318 NY Ballston Spa 12020 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Homemaker Homemaker Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 5400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: **PAGE** 9 OF 55 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Women Speak Out PAC Full Name (Last, First, Middle Initial) John Naughton Date of Receipt Mailing Address 3569 S Leisure World Blvd 2014 29 City Zip Code State Transaction ID: 29-B236-EC26AF9621C7 MD Silver Spring 20906 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Patricia Scalia Date of Receipt Mailing Address 709 Potomac Knolls Dr 05 15 2014 City State Zip Code Transaction ID: BA-80FD-4667A30BB02C VA McLean 22102 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Homemaker Homemaker Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Marylane Burry Date of Receipt Mailing Address 305 Southwinds 05 19 2014 City Zip Code State Transaction ID: D8-B5D8-3213CBAA1351 NJ Tinton Falls 07753 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Homemaker/Volunteer Homemaker/Volunteer Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1800.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 10 OF 55 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Women Speak Out PAC Full Name (Last, First, Middle Initial) Carol Crossed Date of Receipt Mailing Address 1675 Clover St 19 2014 City Zip Code State Transaction ID: 95-9126-2B10363A79E7 NY Rochester 14618 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Seamless Garment Network President Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Timothy Perri Date of Receipt Mailing Address 4975 SW 65th Ave 05 19 2014 City State Zip Code Transaction ID: 32-BFBF-8C3821085059 OR Portland 97221 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Name of Employer Occupation Best Buy in Town, Inc. **Business Owner** Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Catherine Fiora Date of Receipt Mailing Address 5015 Battery Ln 05 19 2014 Apt 1101 City State Zip Code Transaction ID: E2-8F83-618DA5CC1BCA MD Bethesda 20814 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 2750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 11 OF 55 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Women Speak Out PAC Full Name (Last, First, Middle Initial) Joanne Kemp Date of Receipt Mailing Address 7904 Greentree Rd 20 2014 City Zip Code State Transaction ID: BB-929F-503683FE563A MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Homemaker Homemaker Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Richard Bruno Date of Receipt Mailing Address PO Box 11 05 21 2014 City State Zip Code Transaction ID: 86-9A14-D47DF677A8C0 NY Piermont 10968 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self-Employed Contractor Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mary Ellen Bork Date of Receipt Mailing Address 6520 Ridge St 05 21 2014 City Zip Code State Transaction ID: BB-B669-17B9A1665972 McLean VA 22101 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation American Enterprise Institute Free-Lance Writer Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 12 OF 55 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Women Speak Out PAC Full Name (Last, First, Middle Initial) Anne Morse Date of Receipt Mailing Address PO Box 11 2014 21 City Zip Code State Transaction ID: 60-B74D-33AF24CD7EFD MD Brookeville 20833 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Homemaker Homemaker Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Geraldine Novak Date of Receipt Mailing Address 801 Pennsylvania Ave NW Apt 1022 22 05 2014 City State Zip Code Transaction ID: BE-A769-DEA4DC7E0962 DC Washington 20004 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 1025.00 Other (specify) Full Name (Last, First, Middle Initial) c. Loren Jahn Date of Receipt Mailing Address 13149 N Country Club Ct 05 22 2014 City State Zip Code Transaction ID: 5C-94F5-FE287E6087FC IL Palos Heights 60463 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1800.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 13 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	Statements may not be sold or used by any per the name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Women Speak Out PAC		
Full Name (Last, First, Middle Initial) Nancy Koons Mailing Address 1207 Windrock Dr City McLean FEC ID number of contributing federal political committee. Name of Employer Homemaker Receipt For: Primary General Other (specify)	State Zip Code VA 22102 C Occupation Homemaker Aggregate Year-to-Date ▼ 500.00	Date of Receipt 05 22 2014 Transaction ID: 99-BBBE-7031F384F18E Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Patrick Rainey Mailing Address 3437 Cocard Ct City Windermere FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify)	State Zip Code FL 34786 C Occupation Retired Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Michael Burchell Mailing Address 28 Bryon Rd Apt 2 City Chestnut Hill FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify)	State Zip Code MA 02467 C Occupation Retired Aggregate Year-to-Date ▼	Date of Receipt 05
SUBTOTAL of Receipts This Page (optional).		2100.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 14 OF 55 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Women Speak Out PAC Full Name (Last, First, Middle Initial) Francis McDermott Date of Receipt Mailing Address 227 Courtyard Blvd Apt 107 2014 City State Zip Code Transaction ID: DB-9C4C-C6E71D7B5D7A FL Sun City Center 33573 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Donald Pins Date of Receipt Mailing Address 19W127 Avenue Latour 05 22 2014 City State Zip Code Transaction ID: 1D-B87D-33ED3159F5FC Hinsdale IL 60523 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. John Valerius Date of Receipt Mailing Address 1909 Canterbury St 05 22 2014 City State Zip Code Transaction ID: 0F-BE47-76F157C7DBC9 TX Irving 75062 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 15 OF

TEMIZED RECEIPTS			(check	(check only one)							
IEWILED NECEIPIS		for each category of the Detailed Summary Page	X 11	- F	-	11b	11c	12			
Any information copied from such Reports and				he p	urp						
or for commercial purposes, other than using	the name and a	ddress of any political committee	to solicit	cont	ribu	itions 1	rom suci	n commit	tee.		
NAME OF COMMITTEE (In Full) Women Speak Out PAC											
Full Name (Last, First, Middle Initial) Bridgett Wagner					Date of Receipt						
Mailing Address 410 Constitution Ave NE)5	/	22	/ Y	2014	Y		
City	State	Zip Code			ctic		0E-BC6I		014FCDB		
Washington	DC	20002	Amo	ount	of E	Each R	leceipt th	nis Period			
FEC ID number of contributing federal political committee.	C					,		500	0.00		
Name of Employer	Occupation										
QEV Analytics, Ltd	Business E	xecutive									
Receipt For: Primary General	Aggregate	Year-to-Date ▼	.								
Other (specify) ▼		500.00									
Full Name (Last, First, Middle Initial) Travis Rankin				e of	Rec	ceipt					
Mailing Address 425 Alcatraz Ave Apt 1	05 23 2014										
City Oakland	State CA	Zip Code 94609	Transaction ID: 36-AB0E-D Amount of Each Receipt this								
FEC ID number of contributing federal political committee.	С								0.00		
Name of Employer ABM Security Services	Occupation Security Gu										
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		1000.00									
Full Name (Last, First, Middle Initial) C. Mary Koessler			Date	e of	Rec	ceipt					
Mailing Address South-6122 Old Lake Shor	e Road			M)5	/	30		2014	Y		
City Lake View	State NY	Zip Code 14085						C-97938D			
FEC ID number of contributing federal political committee.	С		Amo	Juni	OI E	acii n	leceipt tr	nis Period 1000			
Name of Employer	Occupation										
Retired	Retired										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]								
SUBTOTAL of Receipts This Page (optional).				_				2500	.00		
TOTAL This Period (last page this line numb			. F	=			- 1				
(.ac. page and mic flamb	,,				_	7	- 1				

FOR LINE NUMBER: PAGE 16 OF 55 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Women Speak Out PAC Full Name (Last, First, Middle Initial) Carolyn Naughton Date of Receipt Mailing Address 3569 S Leisure World Blvd 2014 29 City Zip Code State Transaction ID: 90-8C1C-80C2B651BF72 MD Silver Spring 20906 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Steven Wagner Date of Receipt Mailing Address 410 Constitution Ave NE 05 22 2014 City State Zip Code Transaction ID: DC-8288-D0D5D45E7DAB DC Washington 20002 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation QEV Analytics, Ltd **Business Executive** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 800.00 SUBTOTAL of Receipts This Page (optional)..... 24450.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)		, FOR LINE	NUMBER:	PAGE 17 OF 55					
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	one)						
	Detailed Summary Page	X 21b 27	22 23 28b	24 25 26 28c 29 30b					
Any information copied from such Reports and State	I ments may not be sold or u								
or for commercial purposes, other than using the nar									
NAME OF COMMITTEE (In Full)									
│									
Full Name (Last, First, Middle Initial)									
A. Activist Manager			Date of Disburseme						
Mailing Address PO Box 601			05 13 2014						
City	State Zip Code		Transaction ID : I	ED713DF6-710B-44A7-B					
Great Falls Purpose of Disbursement	VA 22066								
IEFiler.com (FEC Software)		001	Amount of Each Di	sbursement this Period					
Candidate Name		Category/		5000.00					
Office Sought: House Disburse	ment For:	Type							
Senate	Primary General								
President State: District:	Other (specify) ▼								
Full Name (Last, First, Middle Initial) B. Authorize.Net			Date of Disburseme	ent					
			M M / D D	/ Y Y Y Y Y					
Mailing Address PO Box 947			05 02	2014					
City American Fork	State Zip Code UT 84003		Transaction ID : (02CCA36B-F359-4CB8-9					
Purpose of Disbursement	04003								
Online Fundraising Fees		003	Amount of Each Di	sbursement this Period					
Candidate Name		Category/ Type		30.70					
Office Sought: House Disburse	ment For:	71 7							
Senate	Primary General								
President State: District:	Other (specify) ▼								
Full Name (Last, First, Middle Initial)									
C. Authorize.Net			Date of Disburseme	ent					
Mailing Address PO Box 947			05 02	2014					
			02	2017					
City	State Zip Code UT 84003		Transaction ID : 8	8B8DFA1C-3B64-4E60-8					
American Fork Purpose of Disbursement	04003								
Online Fundraising Fees		003	Amount of Each Di	sbursement this Period					
Candidate Name		Category/		30.70					
Office Sought: House Disburse	ment For:	Туре	1						
Senate	Primary General								
President	Other (specify) ▼								
State: District:									
SUBTOTAL of Disbursements This Page (optional)				5061.40					
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TOTAL This Period (last page this line number only)								

SCHEDULE B (FEC Form 3X)	Lien concrete cohedule(s)	FOR LINE	PAGE 18 OF 55			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28 28b	24 25 26 28c 29 30		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full) Women Speak Out PAC	ine and dudress of any points	di committee to	Solicit Contributions	nom sash committee.		
Full Name (Last, First, Middle Initial)			Date of Disbursen			
A. Deluxe Business Productts	Deluxe Business Productts					
Mailing Address PO Box 1186			05 08			
City Lancaster	State Zip Code CA 93584		Transaction ID :	2B951FB7-EE51-46EB-9		
Purpose of Disbursement Office Supplies		001	Amount of Each C	Disbursement this Period		
Candidate Name		Category/	Amount of Each E			
		Type		164.17		
Senate President	ment For: Primary General Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial) B. PayChex			Date of Disbursen			
Mailing Address 911 Panorama Trail S			05 12			
City Rochester	State Zip Code NY 14625		Transaction ID :	43D065A4-54A8-4D5A-B		
Purpose of Disbursement Payroll Fees			Amount of Each D	Disbursement this Period		
Candidate Name		Category/ Type		249.79		
Office Sought: House Disburse	ment For: Primary General Other (specify)	,,				
Full Name (Last, First, Middle Initial) C. PayChex			Date of Disbursen			
Mailing Address 911 Panorama Trail S			05 12			
City Rochester	State Zip Code NY 14625		Transaction ID :	5F93DDB1-50F9-4045-9		
Purpose of Disbursement Payroll Fees Candidate Name		Amount of Each D	Disbursement this Period			
Candidate Name		Category/ Type		85.22		
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)					
SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only				499.18		

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 19 OF 55
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 27	one) 22 23 23 28a 28b	24 25 26 28c 29 36
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NAME OF COMMITTEE (In Full) Women Speak Out PAC	to and address of any point		Solicit Contributions 1	ioni sucii committee.
Full Name (Last, First, Middle Initial)			Data of Dialassa	
A. PayChex	Date of Disbursem			
Mailing Address 911 Panorama Trail S	05 30	2014		
,	State Zip Code		Transaction ID :	946FB25A-D16A-485F-9
Rochester Purpose of Disbursement	NY 14625			• 101 ==0.1 = 1011 1001 0
Payroll Fees			Amount of Each D	isbursement this Period
Candidate Name		Category/		4E 72
0/7		Type		45.73
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) B. Intuit			Date of Disbursem	nent
 			M M / D D	
Mailing Address 2632 Marine Way			05 22	2014
City S Mountain View	State Zip Code CA 94042		Transaction ID :	E8E0A93B-7C8D-408F-A
Purpose of Disbursement	94042			
Fundraising Expenses		003	Amount of Each D	isbursement this Period
Candidate Name		Category/ Type	, , ,	15.02
	nent For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) C. Intuit			Date of Disbursem	
Mailing Address 2632 Marine Way			05 22	2014
City S Mountain View	State Zip Code CA 94042		Transaction ID :	1C38B0F5-C014-43C7-A
Purpose of Disbursement	5404Z			
Fundraising Expenses Candidate Name		003 Category/	Amount of Each D	isbursement this Period
		Type		1.90
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)			
State: District:				
SUBTOTAL of Disbursements This Page (optional)		·····		62.65
TOTAL This Period (last page this line number only)				

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SCHEDULE B (FEC Form 3X)				NE NUMBER: PAGE 20 OF 55						
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	only one)					
			Summary Page	X 21b 27	22 28a	23 28b	24 28c	25	26 30b	
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	for commercial purposes, other than using the nam									
$\sqrt{}$	NAME OF COMMITTEE (In Full)									
$ \rangle$	Women Speak Out PAC									
<u></u>	Full Name (Last, First, Middle Initial)									
Α.	Intuit				Date of	f Disburs				
	Mailing Address 2632 Marine Way				05	/ D	22	2014	Y	
	City	State	Zip Code		T	IF	. 400000	005 0050	40C2 A	
	Mountain View	CA	94042		irans	action il) : 10CB8E	10E-3659	-4063-A	
	Purpose of Disbursement Fundraising Expenses			003	Amoun	t of Each	Disburser	nent this	Period	
	Candidate Name			Category/					2.03	
	Office Cought	T:		Type		7	7		2.03	
	Office Sought: House Disbursen Senate	nent For: Primary	General							
	President	Other (spe								
	State: District:									
_	Full Name (Last, First, Middle Initial)									
В.	Intuit					f Disburs				
	Mailing Address 2632 Marine Way				05	/ D	23	2014	Y	
	City S Mountain View	State CA	Zip Code 94042		Trans	saction II	D : 25105C	5F-5352-	4A53-B	
	Purpose of Disbursement Fundraising Expenses			'000			5		D	
	Candidate Name			003	Amoun	τ oτ E ach	Disburser	nent this	Period	
	Carrage Harris			Category/ Type				1	19.85	
	Office Sought: House Disbursen	nent For:		· · · · · · · · · · · · · · · · · · ·						
		Primary	General							
	President State: District:	Other (spe	ciry) 🔻							
_	Full Name (Last, First, Middle Initial)									
C.	Intuit				Date of	f Disburs	ement			
	Mailing Address Occasion				M M	/ D		2014	Y	
	Mailing Address 2632 Marine Way				05		27	2014		
	,	State	Zip Code		Trans	saction IF	D : D6508E	13-1812	4F1C-9	
	Mountain View Purpose of Disbursement	CA	94042		iians			.0 .0.2		
	Fundraising Expenses 003				Amoun	t of Fach	Disburser	nent this	Period	
	Candidate Name			Category/ Type	, anoun	. J. Lauli	210001001		9.80	
	Office Sought: House Disbursen	nent For:				7	7			
		Primary	General							
	State: District:	Other (spe	cify) 🔻							
	State: District:									
8	SUBTOTAL of Disbursements This Page (optional)					- 40		3	1.68	
H					-					
T	OTAL This Period (last page this line number only)					- 1				

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 21 OF					OF 5	5		
ITEMIZED DISBURSEMENTS		Use separate schedu for each category of	(check only	only one)					-		
		Detailed Summary Pa		X 21b 27	22 28a	23 28b		24 28c	25 29		26 80b
Λ-	ny information copied from such Reports and Staten	ente may not be cold	or used				of ac				<u> </u>
	for commercial purposes, other than using the name										
	NAME OF COMMITTEE (In Full)										
	Women Speak Out PAC										
_	Full Name (Last, First, Middle Initial)				Б.	(D: :					_
A.	Intuit				Date of	f Disburs			Y	V	
	Mailing Address 2632 Marine Way				05		27		2014	Y	
	,	State Zip Code			Trans	action ID	אם י ס	RANAAFO	1-72F3-	44F3-P	
	Mountain View Purpose of Disbursement	CA 94042			Trans	aotion iz		7-107(-120	, , , , ,		•
	Fundraising Expenses		- 17	003	Amoun	t of Each	Disk	ourseme	nt this	Period	
	Candidate Name			Category/					63	3.25	1
	Office Sought: House Disbursen	nent For:		Type		7	_	7			ı
		Primary Gene	ral								
		Other (specify) ▼									
_	State: District:										
В.	Full Name (Last, First, Middle Initial) Intuit				Date of	f Disburs	emer	nt			
					M = M		D		YY	Y	
	Mailing Address 2632 Marine Way				05		29	<u>L</u> .	2014		
	City S Mountain View	State Zip Code CA 94042			Trans	saction II) : E	60E81F4	-073D-	4AED-	Α
	Purpose of Disbursement Fundraising Expenses	- 19 1									
	Candidate Name		L	003	Amoun	t of Each	Disk	ourseme	nt this	Period	
	Calladate Harre			Category/ Type		,		,	2	5.30	
	Office Sought: House Disbursen										
		Primary Gene Other (specify)	ral								
	State: District:	ouler (specify) ▼									
_	Full Name (Last, First, Middle Initial)										_
C.	Intuit				Date of	f Disburs	emer				
	Mailing Address 2632 Marine Way				M M M	/ D	30		2014	Y	
		State Zip Code CA 94042			Trans	saction IE) : 6F	CE089E	E-6698-	4C1C- <i>A</i>	Ą
	Purpose of Disbursement										
	Fundraising Fee Candidate Name		L	003	Amoun	t of Each	Disk	ourseme	nt this	Period	
	Candidate Name			Category/ Type						1.80	1
Office Sought: House Disbursen		nent For:		76-		7		,			
		Primary Gene	ral								
		Other (specify) ▼									
	State: District:										_
5	SUBTOTAL of Disbursements This Page (optional)								90).35	
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Т	OTAL This Period (last page this line number only)					,		7			

SCHEDULE B (FEC Form 3X)	Lloo concrete cabadula (a)	FOR LINE NUMBER: PAGE 22 OF 55				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only				
	Detailed Summary Page	27	28a 28			
Any information copied from such Reports and State						
or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)						
Women Speak Out PAC						
Full Name (Last, First, Middle Initial)						
A. Chain Bridge Bank			Date of Disbu			
Mailing Address 1445-A Laughlin Avenue			05	27 2014		
City	State Zip Code		Transaction	ID : 1D2BA2E6-F3CF-4BCB-I		
McLean	VA 22101		Transaction	ID: IDZBAZEO-F3CF-4BCB-		
Purpose of Disbursement Wire Transfer Fee		001	Amount of Eac	ch Disbursement this Period		
Candidate Name		Category/				
		Туре		15.00		
Office Sought: House Disburse Senate	ment For:					
President	Primary General Other (specify)					
State: District:	Other (opcomy)					
Full Name (Last, First, Middle Initial)						
B. Chain Bridge Bank			Date of Disbu	rsement		
			M = M / E) D / Y Y Y Y		
Mailing Address 1445-A Laughlin Avenue			05	21 2014		
City	State Zip Code		Transaction	ID : 8919B40F-E467-463E-A		
McLean Purpose of Disbursement	VA 22101					
Wire Transfer Fee		001	Amount of Eac	ch Disbursement this Period		
Candidate Name		Category/				
		Type		15.00		
Office Sought: House Disburse	ment For:					
Senate	Primary General					
President State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
c. New Orleans RTL Educational Fo	undation		Date of Disbu	rsement		
Mailing Address 12430 Brookshire Ave		M M / D	27 2014			
C:4.	State Zip Code					
City Baton Rouge	LA 70815		Transaction	ID: 1490D2DD-0340-4272-A		
Purpose of Disbursement						
Event		007	Amount of Eac	ch Disbursement this Period		
Candidate Name		Category/		500.00		
Office Sought: House Disburse	ment For:	Туре				
Senate	Primary General					
President	Other (specify) ▼					
State: District:	· · · · · · · · · · · · · · · · · · ·					
SUBTOTAL of Disbursements This Page (optional).		·····•		530.00		
TOTAL This David (last see a big line see a	Δ.					
TOTAL This Period (last page this line number only	7					

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 23 OF 55
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	one)	
	Detailed Summary Page	21b	22 23 28a 28b	24 25 26 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	The state of the s			
Women Speak Out PAC				
Full Name (Last, First, Middle Initial)				
A. LA Department of Taxation			Date of Disburse	
Mailing Address PO Box 201			05 2	9 2014
City	State Zip Code		: ID	0750505050404050
Baton Rouge	LA 70802		I ransaction ID	: 97F056F8-F812-48BD-A
Purpose of Disbursement Taxes		001	Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		44.00
	nent For: Primary General Other (specify)	Турс		, , , , , , , , , , , , , , , , , , , ,
State: District:				
Full Name (Last, First, Middle Initial)			Data of Biological	
B. LA Department of Taxation			Date of Disburse	
Mailing Address PO Box 201			05 2	28 2014
•	State Zip Code LA 70802		Transaction ID	: C5A3F225-AF82-4F65-B
Purpose of Disbursement Taxes	70002			
		001	Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		92.00
Office Sought: House Disbursem	nent For:		•	
	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
c. NC Department of Revenue			Date of Disburse	
Mailing Address PO Box 25000			05 0	8 2014
City	State Zip Code		Transaction ID	: E2B0F7AD-D793-405A-B
	NC 27640		Transaction in	7: EZBUF/AD-D/93-403A-B
Purpose of Disbursement Taxes		004		
Candidate Name		O01 Category/	Amount of Each	Disbursement this Period 69.00
Office Sought: House Disbursem	nent For:	Type		
Senate	Primary General Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)			7	205.00
TOTAL This Period (last page this line number only).				

SCHEDULE B (FEC Form 3X)	Lloo concrete selectivity (-)	FOR LINE NUMBER: PAGE 24				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	X 21b	22 23	24 25 26		
		27	28a 28b	28c 29 30		
Any information copied from such Reports and State or for commercial purposes, other than using the nar						
NAME OF COMMITTEE (In Full)	and dadress of any point	<u> </u>				
Women Speak Out PAC						
Full Name (Last, First, Middle Initial)			5			
A. NC Department of Revenue			Date of Disburse			
Mailing Address PO Box 25000			05 28			
,	State Zip Code		Transaction ID	: 6A224665-40B6-4C41-8		
Raleigh Purpose of Disbursement	NC 27640		Transaction ib	. 0/224000-4000-4041-0		
Taxes		001	Amount of Each	Disbursement this Period		
Candidate Name		Category/		333.00		
Office Sought: House Disburse	ment For:	Type				
Senate	Primary General					
President	Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial) B. AR Department of Revenue			Date of Disburse	ment		
B. AR Department of Revenue			M M / D			
Mailing Address 1509 W. 7th Street			05 08			
,	State Zip Code		Transaction ID	: E9187428-4EBE-4B89-A		
Little Rock Purpose of Disbursement	AR 72201					
Taxes		001	Amount of Each	Disbursement this Period		
Candidate Name		Category/ Type		2.72		
Office Sought: House Disburse	ment For:					
Senate	Primary General					
State: District:	Other (specify)					
Full Name (Last, First, Middle Initial)						
C. AR Department of Revenue			Date of Disburse	ment		
NA 35 A 14 A 15 A 15 A 15 A 15 A 15 A 15 A 1	<u> </u>					
Mailing Address 1509 W. 7th Street			05 28	3 2014		
City	State Zip Code		Transaction ID	: 70D44DA9-A3D8-4330-9		
Little Rock	AR 72201		Transaction ib	. 10044070-7000-4000-0		
Purpose of Disbursement Taxes		001	Amount of Fools	Dialarma and this Devied		
Candidate Name		Category/	Amount of Each	Disbursement this Period		
		Type		249.90		
	ment For:					
Senate	Primary General					
State: President State:	Other (specify) ▼					
oldo. Diotilot.						
SUBTOTAL of Disbursements This Page (optional)				585.62		
				7		
TOTAL This Period (last page this line number only)			1 40 1 1 40 1		

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SCHEDULE B (FEC Form 3X)						PAGE 25 OF 55		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	conly one)					
	Detailed Summary Page	X 21b 27	22	23	24 28c	25	26	
			28a	28b		29	30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
Women Speak Out PAC								
Full Name (Last, First, Middle Initial)								
A. DC Unemployment Services			Date of D	isburseme		- Y - Y	V	
Mailing Address 501 C St. NW #501			05	08		14		
,	tate Zip Code		Transac	tion ID : 5	53A2916-C	CBA_4	B01_0	
. rusg.c	DC 20001		ITAIISAU		33A2910-C	CDA-4	.D31-3	
Purpose of Disbursement Taxes		001	Amount o	f Each Dis	bursement	this Pe	eriod	
Candidate Name		Category/ Type				45.5	50	
Office Sought: House Disbursem	ent For:	Турс		,	,			
Senate	Primary General							
	Other (specify) ▼							
State: District:								
Full Name (Last, First, Middle Initial)			D.4 (D	V-1	1			
B. DC Unemployment Services				isburseme				
Mailing Address 501 C St. NW #501			05	19)14		
	tate Zip Code		Transac	tion ID : C	A21D5FD-0	051F-4	 1007-В	
Washington Purpose of Disbursement	DC 20001							
Taxes		001	Amount o	f Each Dis	bursement	this Pe	eriod	
Candidate Name		Category/						
		Type		7	-	53.	54	
Office Sought: House Disbursem								
	Primary General							
State: District:	Other (specify) ▼							
Full Name (Last, First, Middle Initial)								
C. DC Unemployment Services			Date of D	isburseme	nt			
Mallian Address Total Co. Nov. 1974			M M	/ D D		4.4	Y	
Mailing Address 501 C St. NW #501			05	28	20	14	_	
City	tate Zip Code		Transa	tion ID . E	0DCCE7E /	0464 4	12D2 0	
	DC 20001		Transac	tion iD : E	0DCCE7F-	U46 I-4	.3D2-0	
Purpose of Disbursement Taxes		004						
Candidate Name		001	Amount o	f Each Dis	bursement	this Pe	eriod	
Sandidate Name		Category/ Type				554.4	42	
Office Sought: House Disbursem	ent For:	.,,,,		,	,			
Senate	Primary General							
	Other (specify) ▼							
State: District:								
CURTOTAL of Dishumanning This Days (as if)						653.4	46	
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TOTAL This Period (last page this line number only).				40			. 1	

SCHEDULE B (FEC Form 3X)		, FOR LINE	NUMBER:	PAGE 26 OF 55
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	y one)	
-	Detailed Summary Page		22 23	24 25 26
		27	28a 28b	28c 29 30b
Any information copied from such Reports and Stat or for commercial purposes, other than using the n				
NAME OF COMMITTEE (In Full)	ane and address of any pon	ilicai committee t	5 SOIICIT COTHITIDUTIONS 1	Tom such committee.
Women Speak Out PAC				
/ Women Speak Out PAC				
Full Name (Last, First, Middle Initial)				
A. DC Unemployment Services			Date of Disbursem	ient
			M M / D D	
Mailing Address 501 C St. NW #501			05 28	2014
City	State Zip Code			
Washington	DC 20001		Transaction ID :	81FE9625-40D0-4038-A
Purpose of Disbursement				
			Amount of Each D	isbursement this Period
Candidate Name		Category/		16.82
Office Sought: House Disburs	ement For:	Туре		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)				
B. DC Unemployment Services			Date of Disbursem	ient
M. W. Ald			M M / D D	
Mailing Address 501 C St. NW #501			05 29	2014
City	State Zip Code			
Washington	DC 20001		Transaction ID :	0AD9EA05-9FB1-422A-9
Purpose of Disbursement]	
Candidate Name			Amount of Each D	isbursement this Period
Candidate Name		Category/		16.82
Office Sought: House Disburs	ement For:	Type		
Senate	Primary General			
President	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)				
C. DC Unemployment Services			Date of Disbursem	ient
Mailing Address 504 O Ot NIM #504			05 29	2014
Mailing Address 501 C St. NW #501			05 29	2014
City	State Zip Code		Transaction ID	40004040 F0BC 400F 0
Washington	DC 20001	_	Transaction ID:	4982A2AC-F3BC-4325-9
Purpose of Disbursement				
Candidate Name			Amount of Each D	isbursement this Period
Candidate Name		Category/ Type		10.17
Office Sought: House Disburs	ement For:	Туре	7	7
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional))	·····		43.81
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TOTAL This Period (last page this line number on	ıy <i>)</i>		1 20 1	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	-	FOR LINE NUMBER: PAGE 27 OF (check only one)					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30				
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full) Women Speak Out PAC	o and dadrood of any point	<u> </u>						
Full Name (Last, First, Middle Initial) A. IRS			Date of Disburse					
Mailing Address IRS			05 19					
Cincinnati	State Zip Code OH 45999		Transaction ID	: 1A12EF90-1C63-4791-8				
Purpose of Disbursement Taxes Candidate Name		001	Amount of Each	Disbursement this Period				
Office Sought: House Disbursem	agent For	Category/ Type		504.53				
Senate President	Primary General Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial) B. IRS			Date of Disburse					
Mailing Address IRS			05 28					
Cincinnati	State Zip Code OH 45999		Transaction ID	: 6F6663FC-7A91-4992-9				
Purpose of Disbursement Taxes Candidate Name		001	Amount of Each	Disbursement this Period				
Calididate Name		Category/ Type		4430.02				
	nent For: Primary General Other (specify)							
Full Name (Last, First, Middle Initial) C. IRS			Date of Disburse					
Mailing Address IRS			05 08					
•	State Zip Code OH 45999		Transaction ID	: 0FDB2471-6E02-488E-8				
Taxes Candidate Name		001 Category/	Amount of Each	Disbursement this Period 392.63				
	nent For: Primary General Other (specify)	Type						
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				5327.18				

SCHEDULE B (FEC Form 3X)	11	FOR LINE	FOR LINE NUMBER: PAGE 2				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	, —			
-	Detailed Summary Page	X 21b 27	22 28a	23 28b		25 29	26 30b
Any information copied from such Reports and State	I ments may not be sold or use						
or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)							
Women Speak Out PAC							
Full Name (Last, First, Middle Initial)							
A. IRS			Date of Dis				
Mailing Address IRS			05	28	20	14	
City	State Zip Code		Transacti	ion ID : 034	10 A D16-40	C12_48	25_0
Cincinnati	OH 45999		Hansacu	IOII ID . US.	13AD 10-40	J 12-40	03-3
Purpose of Disbursement			Amount of	Each Disb	ursement ·	this Pe	eriod
Candidate Name		Category/	-		-		-
		Type		<i>y</i>	7	47.8	37
Office Sought: House Disburse Senate	ment For: Primary General						
President	Other (specify) ▼						
State: District:	· · · · · · · · · · · · · · · · · · ·						
Full Name (Last, First, Middle Initial)							
B. IRS			Date of Dis	sbursemen	1		
Mailing Address IRS			05	29	/	1 <i>1</i>	7
Mailing Address IRS			03	29	20	14	_
•	State Zip Code		Transact	ion ID : AC	7A6599-3	B1E-46	6EF-A
Cincinnati Purpose of Disbursement	OH 45999						
			Amount of	Each Disb	ursement	this Pe	eriod
Candidate Name		Category/				47.8	37
Office Sought: House Disburse	ment For:	Туре		,	7	17.0	
Senate Dispurse	Primary General						
President	Other (specify) ▼						
State: District:	•						
Full Name (Last, First, Middle Initial)			5				
C. IRS			Date of Dis				
Mailing Address IRS			05 /	29	20	14	
-							
City Cincinnati	State Zip Code OH 45999		Transact	ion ID : 85	9EC323-0/	A5A-4 1	78-8
Purpose of Disbursement	40000						
			Amount of	Each Disb	ursement	this Pe	eriod
Candidate Name		Category/				23.9	13
Office Sought: House Disburse	ment For:	Туре		7	7	20.0	
Senate Dispurse	Primary General						
President	Other (specify) ▼						
State: District:							
						110.6	7
SUBTOTAL of Disbursements This Page (optional)		·····•		,	7	119.6	-
TOTAL This Period (last page this line number only)				1:	3210.0	0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TE	EMIZED INDEPENDENT EXPENDITURES					PAGE 29 OF 55 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)				FEC IDI	ENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC				C	00530766
Ch	heck if 24-hour report 48-hour report	New repo	oort Amends rep	ort filed on	M = M /	D D / Y D Y D Y
	Full Name of Payee Ms. Kate-Lyne Hecker			Date	M = M /	Distribution/Dissemination
	Mailing Address 1200 Colony Road			Amo	05 ount	28 2014
	City	State	Zip Code	$ \Gamma$		10.00
	Metarie	LA	70503			: c795bc30-3018-4b11-a sement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001		M M /	28 / 2014
	Name of Federal Candidate		Support	Office Soug	nht:	House District:00
	Ms. Mary L Landrieu		Oppose	Presi		Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		264411.29	Disburseme 2014	ent For: Other (spe	Primary
	Full Name of Payee Victory Phones			Date	e of Public	Distribution/Dissemination 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 190 Monroe Ave, NW			Amo		20 2014
	5th Floor	Ctoto	7:n Codo			6085.00
	City Grand Rapids	State MI	Zip Code 49503			: 977e0279-8b93-4356-a rement or Obligation
	Purpose of Expenditure Phone Calls		Category/ Type 004	_	M M / 05	28 2014
	Name of Federal Candidate		Support	Office Sou	ght:	House District:00
	Ms. Mary L Landrieu		Oppose	Presi	ident X	
	Calendar Year-To-Date Per Election for Office Sought	<u> </u>	264411.29	Disburseme 2014	ent For: Other (spe	Primary X General ecify) ▶
_	(a) SUBTOTAL of Itemized Independent Expenditures	÷S		>	-	6095.00
	(b) SUBTOTAL of Unitemized Independent Expenditu	ures		.		7
	(c) TOTAL Independent Expenditures			··· \	7	7
	Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	ite or authorized				
	Ms. Emily Buchanan	[Electron	nically Filed] Date	te 11	12	2014
	Signature		_			

Signature

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	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		PAGE 30 OF 55
			FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
٧	Nomen Speak Out PAC		C C00530766
CI	heck if 24-hour report 48-hour report New report Amends re	eport file	d on
	Full Name of Payee The Stoneridge Group		Date of Public Distribution/Dissemination
	Mailing Address 4400 North Point Parkway		05 28 2014 Amount
	Suite 190		
	City State Zip Code		250.00
	Alpharetta GA 30022		Transaction ID : 8fb97a1f-3f70-4aaf-b Date of Disbursement or Obligation
	Purpose of Expenditure Website Design Category/ Type 00	004	05 28 7 2014
	Name of Federal Candidate Support	t Offic	ce Sought: House District:00
	Ms. Mary L Landrieu Oppose		President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought 264411.29	Disk 201	pursement For: Primary X General
	Full Name of Payee		
	Vivid Ink Previously Reported As \$283.29		Date of Public Distribution/Dissemination 05 / 28 / 2014
	Mailing Address 11710 Cloverland Ct.		Amount
	City State Zip Code		308.79
	Baton Rouge LA 70809		Transaction ID: 8970d790-fdfb-4345-a Date of Disbursement or Obligation
	Purpose of Expenditure Lapel Stickers Category/ Type OC	04	05 28 2014
	Name of Federal Candidate Support	rt Offi	ce Sought: House District: 00
	Ms. Mary L Landrieu Oppose		President State: LA
	Calendar Year-To-Date Per Election for Office Sought 264411.29	Disl 201	oursement For: Primary
	(a) SUBTOTAL of Itemized Independent Expenditures	····· >	558.79
	(b) SUBTOTAL of Unitemized Independent Expenditures	····· >	
	(c) TOTAL Independent Expenditures	······ >	1 1 7 1 1 7 1 1 7
	Under penalty of perjury I certify that the independent expenditures reported herein we with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.		
	Ms. Emily Buchanan	I IV	M / D D / Y Y Y Y

[Electronically Filed]

Date

2014

Signature

Ms. Emily Buchanan

SCHEDU ITEMIZED I

e of committee (In Full) omen Speak Out PAC		FOR LINE 24 OF FORM 33 FEC IDENTIFICATION NUMBER ▼
men Speak Out PAC		FEC IDENTIFICATION NOWIBER V
. If Dod hours around Ddo hours around Ddo		0 000500700
. if		C C00530766
k if 24-hour report 48-hour report New rep	port Amends repo	rt filed on
ull Name of Payee		Date of Public Distribution/Dissemination
The Stoneridge Group		05 28 Y 2104
lailing Address 4400 North Point Parkway		Amount
Suite 190		
ity State	Zip Code	2375.00
Ipharetta GA	30022	Transaction ID: 3c5e51df-30e1-465e-9 Date of Disbursement or Obligation
urpose of Expenditure Vebsite Design	Category/ Type 004	05 28 2014
ame of Federal Candidate	Support	Office Sought: House District: 00
/ls. Mary L Landrieu	X Oppose	President X Senate State:
Calendar Year-To-Date	22444 22	Disbursement For: Primary General
Per Election for Office Sought	264411.29	2014 Other (specify) ▶
ull Name of Payee		Date of Public Distribution/Dissemination
Personalized Marketing Communications Previously Reported As \$1675.20		05 / 13 / 2014
Mailing Address 85 Air Park Drive		Amount
Sity State	Zip Code	2008.43
_ynchburg VA	24502	Transaction ID: 82457858-bfa2-4ac7-b Date of Disbursement or Obligation
Purpose of Expenditure Fundraising Letter	Category/ Type 003	05 13 / 2014
lame of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President X Senate State: LA
Calendar Year-To-Date	264411.29	Disbursement For: Primary General
Per Election for Office Sought	204411.29	Other (specify) ▶
SUBTOTAL of Itemized Independent Expenditures		4383.43
SUBTOTAL of Unitemized Independent Expenditures		•
TOTAL Independent Expenditures		•

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Date

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	PAGE 32 OF 55
	FOR LINE 24 OF FORM 3X
i I C	DENTIFICATION NUMBER ▼
	C00530766
1	D = D / Y = Y = Y
bli	c Distribution/Dissemination
]	13 / 2014

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
	e of Public Distribution/Dissemination
Personalized Marketing Communications Previously Reported As \$2811.67	05 13 2014
Mailing Address 85 Air Park Drive Amo	ount
City State Zip Code	3973.29
Date	saction ID: 05745693-c72d-47f0-a e of Disbursement or Obligation
Purpose of Expenditure Fundraising Letter Category/ Type 003	M 05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office Sou	ght: House District: 00
Ms. Mary L Landrieu Pres	ident 🔀 Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbursement 264411.29	
To Estation to Other Octogram	Other (specify) -
Full Name of Payee Dat	e of Public Distribution/Dissemination
Mailing Address	05 21 2014
9945 Alfine HWV	ount
City State Zip Code	122.03
2 atom reage	saction ID: 6e73f573-11b9-45b9-b e of Disbursement or Obligation
Purpose of Expenditure Handout Printing Category/ Type 004	05 / 21 / 9 2014
Name of Federal Candidate Support Office Sou	ight: House District:00
Ms. Mary L Landrieu	sident X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbursem 2014	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures	4095.32
(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 with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed]	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature Date 11	12 2014

Signature

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CHEDULE E (FEC FORM 3X) FEMIZED INDEPENDENT EXPENDITURES		D.O
TEMIZED INDEPENDENT EXPENDITURES		PAGE 33 OF 55 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report	New report Amends report fi	iled on D / Y Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
FedEx		05 24 2014
Mailing Address 3815 Veterans Blvd		Amount
'	ate Zip Code	330.00
Metarie L	A 70002	Transaction ID: 9d70ceca-bb6c-4e28-9 Date of Disbursement or Obligation
Purpose of Expenditure Brochure Printing	Category/ Type 004	05
Name of Federal Candidate	Support Of	ffice Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary X General Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Ms. Laura Jean		05 24 2014
Mailing Address 821 Honeysuckle Pt.		Amount
City	tate Zip Code	60.00
	_A 70056	Transaction ID: 8cd3c7de-fe31-4a3c-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	05 / 24 / 2014
Name of Federal Candidate	Support O	ffice Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary X General 014 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·····	390.00
(b) SUBTOTAL of Unitemized Independent Expenditures	3	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent e with, or at the request or suggestion of, any candidate of party committee) any political party committee or its age	or authorized committee or agent of ei	
Ms. Emily Buchanan	[Electronically Filed] Date	11 12 2014

Date

S	CHEDULE E (FEC Form 3	3 X)				
TI	EMIZED INDEPENDENT EXPEN	DITURES			PAGE 34 FOR LINE	OF 55 24 OF FORM 3X
	AME OF COMMITTEE (In Full)				FEC IDENTIFICAT	ON NUMBER ▼
٧	Vomen Speak Out PAC				C C00530766	
Cł	neck if 24-hour report 48-hour	report New rep	oort Amends repo		M / D D	/ Y = Y = Y = Y
	Full Name of Payee			Date o	of Public Distribution	n/Dissemination
	Ms. Laura Jean				05 / D D D D 24	2014
	Mailing Address 821 Honeysuckle Pt.			Amour	nt	
	City	State	Zip Code	— I ['		2.70
	Gretna	LA	70056		ction ID : 6cfdfdbf- of Disbursement or	
	Purpose of Expenditure Mileage		Category/ Type 002	М	05 / 24	2014
	Name of Federal Candidate		Support	Office Sought	t: House	District: 00
	Ms. Mary L Landrieu		Oppose	Preside		State: LA
	Calendar Year-To-Date Per Election for Office Sought	7	264411.29	Disbursement 2014 Ot	t For: Primai	ry X General
	Full Name of Payee Ms. Laura Jean Mailing Address			Date o	of Public Distributio	n/Dissemination
	821 Honeysuckle Pt.			Amour	nt	
	City	State	Zip Code			45.00
	Gretna	LA	70056		ction ID : cacc934 of Disbursement or	
	Purpose of Expenditure Salary		Category/ Type 001	M	05 / ²³	2014
	Name of Federal Candidate		Support	Office Sough	t: House	District: 00
	Ms. Mary L Landrieu		Oppose	Preside		State: LA
	Calendar Year-To-Date Per Election for Office Sought		264411.29	Disbursement 2014 Of	t For: Prima ther (specify) ▶	ry X General
	(a) SUBTOTAL of Itemized Independent	Expenditures		. •		47.70
	(b) SUBTOTAL of Unitemized Independent	ent Expenditures		.	7 1 4	
	(c) TOTAL Independent Expenditures					
	Under penalty of perjury I certify that th with, or at the request or suggestion of, party committee) any political party committee.	any candidate or authorized				

Ms. Emily Buchanan	[Electronically Filed]	Date	11 /	12	2014
Signature					

Ms. Emily Buchanan

Signature

SCHEDULE E (FEC Form 3) TEMIZED INDEPENDENT EXPEND				PAGE 35 OF 55 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC	DENTIFICATION NUMBER ▼
Women Speak Out PAC			С	C00530766
Check if 24-hour report 48-hour	report New rep	ort Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee			Date of Pub	lic Distribution/Dissemination
Ms. Amanda Posey			05	24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 819 Lyons St.			Amount	
City	State	Zip Code		60.00
New Orleans	LA	70115		D : 87111fe2-9586-459b-8 pursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	M M 05	24 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		X Oppose		Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		264411.29	Disbursement For: 2014 Other (s	Primary X General specify) ▶
Full Name of Payee Ms. Ashlen Sandoz	-		Date of Pub	lic Distribution/Dissemination
Mailing Address 204 Ranger Place			Amount	
City	State	Zip Code		45.00
Slidell	LA	70458		ID: 6e856a0a-a293-4973-8 bursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	05	23 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7	264411.29	Disbursement For: 2014 Other (s	Primary
(a) SUBTOTAL of Itemized Independent	Expenditures			105.00
(b) SUBTOTAL of Unitemized Independe	nt Expenditures			
(c) TOTAL Independent Expenditures			>	7 1 2
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized			

[Electronically Filed]

Date

2014

NAME OF

Check if

Signature

Ms. Emily Buchanan

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HEDULE E (FEC Form 3X)		
MIZED INDEPENDENT EXPENDITURES		PAGE 36 OF 55 FOR LINE 24 OF FORM 3X
ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
omen Speak Out PAC		C C00530766
eck if 24-hour report 48-hour report New rep	port Amends repo	rt filed on
Full Name of Payee Ms. Ashlen Sandoz		Date of Public Distribution/Dissemination
AA 95 - A 44		05 24 2014
Mailing Address 204 Ranger Place		Amount
City State	Zip Code	60.00
Slidell LA	70458	Transaction ID: 1552d4c3-fd91-407a-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	05 24 7 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	264411.29	Disbursement For: Primary General General Other (specify) ►
Full Name of Payee Mr. Paul Sutphen		Date of Public Distribution/Dissemination 05 05 07 07 07 07 07 07 07 07
Mailing Address 9 Rhine Dr		Amount
City State	Zip Code	75.00
Kenner LA	70065	Transaction ID: 908c05b1-cbb2-41dd-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	264411.29	Disbursement For: Primary Genera 2014 Genera Other (specify) ▶
a) SUBTOTAL of Itemized Independent Expenditures		135.00
b) SUBTOTAL of Unitemized Independent Expenditures		·
c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 37 OF 55 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Am	nends report filed on Man / Dar / Yayayay
Full Name of Payee Mr. Paul Sutphen	Date of Public Distribution/Dissemination
Malling Adelysis	05 / D D / Y Y Y Y Y Y
Mailing Address 9 Rhine Dr	Amount
City State Zip Code	0.90
Kenner LA 70065	Transaction ID: c65ea4ad-f33d-4cae-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type	002 05 24 2014
Name of Federal Candidate	Support Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 264411.29	Disbursement For: Primary
Full Name of Payee Ms. Kate-Lyne Hecker	Date of Public Distribution/Dissemination M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1200 Colony Rd	Amount
City State Zip Code	25.00
Matairie LA 70003	Transaction ID : 5ab69973-60fc-43a7-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type	001 05 / 23 / 2014
	Support Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 264411.29	Disbursement For: Primary ☐ General Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	25.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported her with, or at the request or suggestion of, any candidate or authorized committee of party committee) any political party committee or its agent.	
Ms. Emily Buchanan	M M / D D / Y Y Y

[Electronically Filed]

Date

2014

TE	EMIZED INDEPENDENT EXPENDITURES	i			PAG FOR	E 38 OF 55 R LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)				FEC IDENT	IFICATION NUMBER ▼
٧	Nomen Speak Out PAC					30766
Ch	heck if 24-hour report 48-hour report	New repo	ort Amends repo		M / D	D / Y = Y = Y = Y
_	Full Name of Payee Mr. Francisco Gonzales				M / D	tribution/Dissemination
	Mailing Address 3461 Highway 39			Amou	05 nt	20 2014
	City	Ctoto	Zin Codo			30.00
	City Braithwaite	State LA	Zip Code 70040			bbb803-a396-4455-8 nent or Obligation
	Purpose of Expenditure Salary		Category/ Type 001		M / D	20 / 2014
	Name of Federal Candidate		Support	Office Sough	t: Ho	ouse District: 00
	Ms. Mary L Landrieu		Oppose	Preside		enate State: LA
	Calendar Year-To-Date Per Election for Office Sought		264411.29	Disbursemen 2014 O	t For: ther (specify)	Primary
	Full Name of Payee Mr. Francisco Gonzales Mailing Address 3461 Highway 39				05 D	tribution/Dissemination
				Amou	nt	
	City Braithwaite	State LA	Zip Code 70040			0.60 c0b5a9-7b5e-4f26-9 nent or Obligation
	Purpose of Expenditure Mileage		Category/ Type 001		1 M / D	20 / 2014
	Name of Federal Candidate		Support	Office Sough	it: H	ouse District:00
	Ms. Mary L Landrieu		X Oppose	Preside	ent X Se	enate State: LA
	Calendar Year-To-Date Per Election for Office Sought	7 7	264411.29	Disbursemen 2014	t For:	Primary
	(a) SUBTOTAL of Itemized Independent Expenditure	'es				30.60
	(b) SUBTOTAL of Unitemized Independent Expendit	itures		· • [42
	(c) TOTAL Independent Expenditures			· ·	7	
	Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized				
	Ms. Emily Buchanan	[Electron	ically Filed] Date	e 11	12 /	2014
	Signature		_			

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES					PAGE 39	OF 55 4 OF FORM 3X
N	AME OF COMMITTEE (In Full)				FFC I		N NUMBER ▼
٧	Vomen Speak Out PAC				C	C00530766	TO MODELLY
CI	neck if 24-hour report 48-hour report	New rep	ort Amends rep	ort filed on	М = М	/ D D /	Y Y Y Y
	Full Name of Payee Mr. Francisco Gonzales			D	ate of Publ	ic Distribution/	Dissemination
	WII. Francisco Gorizales				05 05	23	2014
	Mailing Address 3461 Highway 39			А	mount		
	City	State	Zip Code				25.00
	Braithwaite	LA	70040			D : 61cef962-1 oursement or C	
	Purpose of Expenditure Salary		Category/ Type 001		05 ^M	23	2014
	Name of Federal Candidate		Support	Office S	ought:	House	District: 00
	Ms. Mary L Landrieu		Oppose	Pr	esident	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought	,	264411.29	Disburse 2014	ement For:	Primary pecify) ▶	X General
	Mr. Alex Peyton Mailing Address 859 Hicks Rd.				05 Amount	20	2014
	City	State	Zip Code				30.00
	Washington	LA	70589	I		D: 51ad8bff-b oursement or C	
	Purpose of Expenditure Salary		Category/ Type 001		05	20	2014
	Name of Federal Candidate		Support	Office S	ought:	House	District: 00
	Ms. Mary L Landrieu		Oppose	Pr	resident	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		264411.29	Disburse 2014	ement For: Other (s	Primary	X General
	(a) SUBTOTAL of Itemized Independent Expenditures			. [7	55.00
	(b) SUBTOTAL of Unitemized Independent Expenditure	es		··· >		7	
	(c) TOTAL Independent Expenditures			··· •			
	Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its age	or authorized					

[Electronically Filed]

Date

2014

TI	EMIZED INDEPENDENT EXPENDITURES		PAGE 40 OF 55 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Nomen Speak Out PAC		C C00530766
Cł	heck if 24-hour report 48-hour report New report	Amends report file	led on Man / Dad / Yayayay
	Full Name of Payee		Date of Public Distribution/Dissemination
	M.r Michael Vidrine Mailing Address 450 Herbert Bd		05 20 / Y Y Y Y Y
	458 Herbery Rd.		Amount
	City State Zip Co	ode	30.00
	Palmatto LA 71358	}	Transaction ID: c32918c4-9ba1-4046-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary Category	gory/ Type 001	05 / 20 / 2014
	Name of Federal Candidate	Support Off	ffice Sought: House District:00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought 2644		sbursement For: Primary
	Full Name of Payee		Date of Public Distribution/Dissemination
	Ms. Mehan Cleland		05 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 78320 HWY 437		Amount
	City State Zip Co	ode	30.00
	Covington LA 70435	5	Transaction ID: 10c1e10f-38e5-40ad-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary Category	gory/ Type 001	05 / 20 / 2014
	Name of Federal Candidate	Support Off	ffice Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought 2644		isbursement For: Primary X General Other (specify) ▶
			Carlot (openity)
	(a) SUBTOTAL of Itemized Independent Expenditures	·····	60.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
	(c) TOTAL Independent Expenditures	······	
	Under penalty of perjury I certify that the independent expenditures reporte with, or at the request or suggestion of, any candidate or authorized commit party committee) any political party committee or its agent.		
	Ms. Emily Buchanan [Electronically Fi	iled] Data	11 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature	Date	

TE	EMIZED INDEPENDENT EXPENDITURES				PAGE FOR	41 OF 55 LINE 24 OF FORM 3X
NΑ	AME OF COMMITTEE (In Full)					FICATION NUMBER ▼
٧	Nomen Speak Out PAC				C C0053	
Ch	heck if 24-hour report 48-hour report	New repo	port Amends repo		M / D =	D / Y = Y = Y = Y
	Full Name of Payee			Date	of Public Distr	ibution/Dissemination
	Mr. Evan Nohra					2014
	Mailing Address 42656 Spanish Oak Dr			Amou	nt	
	City	State	Zip Code	$ $ Γ		30.00
	Ponchatoula	LA	70545			a9369-ed16-4d2a-8 ent or Obligation
	Purpose of Expenditure Salary		Category/ Type 001		/ M / D	
	Name of Federal Candidate		Support	Office Sough	nt: Hou	use District: 00
	Ms. Mary L Landrieu		X Oppose	Preside		nate State: LA
	Calendar Year-To-Date Per Election for Office Sought	7	264411.29	Disbursemen 2014	ot For: F	Primary ⊠ General
	Full Name of Payee			Date	of Public Distr	ibution/Dissemination
	Mr. Evan Nohra			T P		20 / Y Y Y Y Y Y Y 2014
	Mailing Address 42656 Spanish Oak Dr			Amou		
	City	State	Zip Code	<u> </u>		0.60
	Ponchatoula	LA	70545			17f48-815c-402a-8 ent or Obligation
	Purpose of Expenditure Mlleage		Category/ Type 002		M M / D	
	Name of Federal Candidate		Support	Office Sough	nt: Ho	use District:00
	Ms. Mary L Landrieu		X Oppose	Presid	ent X Ser	nate State: LA
	Calendar Year-To-Date Per Election for Office Sought		264411.29	Disbursemer 2014	nt For: Forther (specify)	Primary General
	(a) SUBTOTAL of Itemized Independent Expenditure	000				30.60
	(a) SUBTOTAL OF REHIEZED HUSSPORDOR EXPONDITURE	;5		•	7	30.00
	(b) SUBTOTAL of Unitemized Independent Expendit	tures		· •	4	4
	(c) TOTAL Independent Expenditures					7
	Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized				
	Ms. Emily Buchanan	[Electron	nically Filed] Date	M M /	12 /	2014
	Signature					

	CHEDULE E (FEC Form 3 EMIZED INDEPENDENT EXPEN					PAGE 42 FOR LINE 24	OF 55 4 OF FORM 3X
	AME OF COMMITTEE (In Full)				FEC	IDENTIFICATIO	N NUMBER ▼
١	Nomen Speak Out PAC				С	C00530766	
С	heck if 24-hour report 48-hour	r report New repo	ort Amends repo	ort filed on	/ = М	/ D D /	Y W Y W Y
	Full Name of Payee Ms. Alexandria Doucet				VI I M	olic Distribution/E	Y Y Y Y Y
	Mailing Address 73 Catalpa Trace			Amou	05 unt	20	2014
	City	State	Zip Code		-		30.00
	Covington	LA	70433			ID: 66dfc09a-8 bursement or O	9e6-4f6f-a
	Purpose of Expenditure Salary		Category/ Type 001		05	20	2014
	Name of Federal Candidate		Support	Office Sough	nt·	House [District: 00
	Ms. Mary L Landrieu		X Oppose	Presid		X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		264411.29	Disbursemer 2014		Primary specify) ▶	X General
	Full Name of Payee Ms. Alexandria Doucet				of Pub	olic Distribution/I	Dissemination 2014
	Mailing Address 73 Catalpa Trace			Amou	unt		
	City	State	Zip Code	$-\Gamma$			10.00
	Covington	LA	70433			ID: 1c878124-c	
	Purpose of Expenditure Salary		Category/ Type 001		05	27	2014
	Name of Federal Candidate		Support	Office Sough	ht:	House [District: 00
	Ms. Mary L Landrieu		X Oppose	Presid	lent	Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		264411.29	Disbursemen 2014		Primary specify) ▶	X General
	(a) SUBTOTAL of Itemized Independent	t Expenditures		· [F 1 1 -7F	40.00
	(b) SUBTOTAL of Unitemized Independ	ent Expenditures		· •		7- 1 - 7-	
	(c) TOTAL Independent Expenditures			•		7-	
	Under penalty of perjury I certify that th with, or at the request or suggestion of, party committee) any political party committee	any candidate or authorized					
	Ms. Emily Buchanan			M M /	D	D / Y Y	Y

[Electronically Filed]

Date

2014

TEMIZED INDEPENDEN	IT EXPENDITURES		PAGE 43 OF 55 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Fi	•		FEC IDENTIFICATION NUMBER ▼
Women Speak Out F	PAC		C C00530766
Check if 24-hour report	48-hour report New rep	port Amends repo	ort filed on
Full Name of Payee Ms. Jacqueline Douc	cet		Date of Public Distribution/Dissemination
Moiling Address			05 27 2014
73 Catal	pa Trace		Amount
City	State	Zip Code	10.00
Covington	LA	70433	Transaction ID: c379a48f-dafe-4f4d-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidat	te	Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Support Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office		264411.29	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee Ms. Madeline Dou	cet		Date of Public Distribution/Dissemination 05 Date of Public Distribution/Dissemination 27 2014
Mailing Address 73 Catal	pa Trace		Amount
City	State	Zip Code	10.00
Covington	LA	70433	Transaction ID : 27a87b0a-b707-482b-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	05 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candida	te	Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office		264411.29	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized	I Independent Expenditures		> 20.00
(b) SUBTOTAL of Unitemiz	zed Independent Expenditures		
(c) TOTAL Independent Ex	xpenditures		·
with, or at the request or su			not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Ms. Emily Buch		nically Filed]	11 12 2014
Signature		Date	, 11 12 2014

NAME OF COMMITTEE (In Full)

PAGE 44 OF 55 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
M / D D / Y Y Y Y Y
of Public Distribution/Dissemination
05 / 29 / 2014
nt
40.00
ction ID : bb054e22-18d2-4544-a of Disbursement or Obligation
05 / 29 / 2014
t: House District: 00
ent X Senate State: LA
t For: Primary X General
ther (specify)
of Public Distribution/Dissemination
05 29 2014
nt
18.00
ction ID : 433442bb-f659-4e32-b of Disbursement or Obligation
05 / 29 / 2014
it: House District: 00
ent X Senate State: LA
t For: Primary X General
other (specify)

Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Mr. Alex Peyton	05 29 2014
Mailing Address 859 Hicks Rd	Amount
City State Zip Code	40.00
Washington LA 70589	Transaction ID : bb054e22-18d2-4544-a Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	05 29 7 2014
Name of Federal Candidate Support Office	e Sought: House District:00
Ms. Mary L Landrieu Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 264411.29 Disbut 2014	
	Other (specify) ▶
Full Name of Payee Mr. Alex Peyton	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 859 Hicks Rd	05 29 2014 Amount
City State Zip Code	18.00
Washington LA 70589	Transaction ID : 433442bb-f659-4e32-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	05 29 / 2014
Name of Federal Candidate Support Offic	e Sought: House District: 00
Ms. Mary L Landrieu Ms. Mary L Landrieu Oppose	President X Senate State: LA
	ursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought 264411.29 Disb 2014	
(a) SUBTOTAL of Itemized Independent Expenditures	58.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mwith, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	1 12 2014
Signature	

S IT

Ms. Emily Buchanan

Signature

SCHEDULE E (FEC Form 3X)			
TEMIZED INDEPENDENT EXPENDIT	URES		PAGE 45 OF 55 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			
			C C00530766
Check if 24-hour report 48-hour report	ort New rep	oort Amends repo	ort filed on
Full Name of Payee Personalized Marketing Communic	ations		Date of Public Distribution/Dissemination
Previously Repor			05 13 2014
Mailing Address 85 Air Park Drive			Amount
City	State	Zip Code	2008.43
Lynchburg	VA	24502	Transaction ID : bbf68cc8-7662-46e2-8 Date of Disbursement or Obligation
Purpose of Expenditure Fundraising Letter		Category/ Type 003	05 / 13 / 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Mr. Mark L Pryor		Oppose	President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought		283336.30	Disbursement For: Primary General 2014 Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
	rted As \$2811.67		05 13 7 2014
Mailing Address 85 Air Park Drive			Amount
City	State	Zip Code	3973.29
Lynchburg	VA	24502	Transaction ID : fbdd1903-6087-4507-a Date of Disbursement or Obligation
Purpose of Expenditure Fundraising Letter		Category/ 003	05 13 / Y Y Y Y Y Y
Tanalaising Estat		Type 003	00 10 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Mr. Mark L Pryor		Oppose	President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought		283336.30	Disbursement For: Primary General 2014
	, ,		Other (specify) ►
(a) SUBTOTAL of Itemized Independent Exp	enditures		> 5981.72
(1) OUDTO-11 (11)			
(b) SUBTOTAL of Unitemized Independent E	expenditures		.)
(c) TOTAL Independent Expenditures			•
. , , , , ,	candidate or authorized	•	not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

[Electronically Filed]

Date

2014

SCHEI ITEMIZE

MIZED INDEPENDENT EXPEND	III UKES			AGE 46 OF 55 OR LINE 24 OF FORM 3X
IE OF COMMITTEE (In Full)			FEC IDE	NTIFICATION NUMBER ▼
omen Speak Out PAC				00530766
ck if 24-hour report 48-hour I	report New r	eport Amends repo	ort filed on	D D / Y Y Y Y
Full Name of Payee Personalized Marketing Commu			_M/	Distribution/Dissemination
Mailing Address 85 Air Park Drive	eported As \$1675.20		05 Amount	13 2014
City	State	Zip Code		2008.43
Lynchburg	VA	24502		d31ae219-4e32-4750-a ement or Obligation
Purpose of Expenditure Fundraising Letter		Category/ Type 003	M M /	13 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Kay Hagan		Oppose		Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		1096873.27	Disbursement For: 2014 Other (spec	Primary Genera
Personalized Marketing Com Previously R Mailing Address 85 Air Park Drive	eported As \$2811.67		M 05 /	13 / 2014
City	State	Zip Code		3973.29
Lynchburg	VA	24502		d97da449-680f-4f26-b sement or Obligation
Purpose of Expenditure Fundraising Letter		Category/ Type 003	05 	13 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Kay Hagan		Oppose	President X	Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		1096873.27	Disbursement For: 2014 Other (spec	Primary Genera
a) SUBTOTAL of Itemized Independent I	Expenditures			5981.72
o) SUBTOTAL of Unitemized Independen	nt Expenditures			
c) TOTAL Independent Expenditures			•	

Ms. Emily Buchanan [Electronically Filed] 12 2014 11 Date Signature

TEMIZED INDEPENDENT EXPENDITURES	PAGE 47 OF 55 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
The Stoneridge Group	05 28 2014
Mailing Address 4400 North Point Parkway	Amount
Suite 190	
City State Zip Code	250.00
Alpharetta GA 30022	Transaction ID: 741ac834-20c8-4ef9-8 Date of Disbursement or Obligation
Purpose of Expenditure Website Design Category/ Type 004	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: House District: 00
Mr. Mark L Pryor Oppose	President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought Disb. 283336.30	ursement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
The Stoneridge Group	M M / D D / Y Y Y Y
Mailing Address 4400 North Point Parkway	05 28 2014
Suite 190	Amount
City State Zip Code	2375.00
Alpharetta GA 30022	Transaction ID : d7039a93-6ddf-4840-8 Date of Disbursement or Obligation
Purpose of Expenditure Website Design Category/ Type 004	05 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ee Sought: House District:00
Mr. Mark L Pryor Oppose	President State: AR
Calcillati Teal To Bate	oursement For: Primary X General
Per Election for Office Sought 283336.30	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	2625.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed]	11 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature Date	12 2014

CHEDULE E (FEC FORM 3X) EMIZED INDEPENDENT EXPENDITURES		DAGE 49 OF 55
EMIZED INDEPENDENT EXPENDITURES		PAGE 48 OF 55 FOR LINE 24 OF FORM 3X
IAME OF COMMITTEE (In Full)	FI	EC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C00530766
Check if 24-hour report 48-hour report New report	Amends report filed on	M / D = D / Y = Y = Y
Full Name of Payee The Stoneridge Group Mailing Address 400 North Paint Parkura	Date of	
4400 North Point Parkway Suite 190	Amount	
City State Zip	Code	250.00
1		on ID: 9b597f3b-244b-418f-9 Disbursement or Obligation
Purpose of Expenditure Website Design	ategory/ Type 004 05	
Name of Federal Candidate	Support Office Sought:	House District: 00
Ms. Kay Hagan	Oppose President	
Calendar Year-To-Date Per Election for Office Sought	Disbursement F 2014 Othe	or: Primary X General or (specify) ▶
Full Name of Payee The Stoneridge Group Mailing Address 4400 North Point Parkway	O	Public Distribution/Dissemination M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Suite 190	Amount	
City State Zip	Code 022 Transacti	2375.00 on ID : 28f1260e-559d-4865-b
Purpose of Expenditure	Date of	Disbursement or Obligation
vvebsite Design	Type 004 0	
Name of Federal Candidate Ms. Kay Hagan	Support Office Sought: Oppose President	House District: 00 Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	Disbursement F 2014 Other	For: Primary General er (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		2625.00
(b) SUBTOTAL of Unitemized Independent Expenditures		7 1 7 1 7
(c) TOTAL Independent Expenditures	······································	7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reposition, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronically	y Filed] Date 11	12 / 2014

TEMIZED INDEPENDENT EXPENDITURES				PAGE 49 OF 55 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee			Date	e of Public Distribution/Dissemination
Victory Phones			[05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 190 Monroe Ave, NW			Amo	ount
5th Floor City St	State	Zip Code	$ \Gamma$	6735.18
•	MI	49503		saction ID: b577d535-dddf-4b6a-9 e of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004		05 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Soug	ght: House District: 00
Ms. Kay Hagan		X Oppose	Presid	N
Calendar Year-To-Date Per Election for Office Sought		1096873.27	Disburseme 2014	ent For: Primary
Full Name of Payee			Date	e of Public Distribution/Dissemination
Pound Feinstein				05 / 20 / 2014
Mailing Address 1620 I St., NW Suite 925			Amo	ount
	State	Zip Code	$ \Gamma$	2706.00
Washington	DC	20006		saction ID : 102cfa1d-1279-45b5-a e of Disbursement or Obligation
Purpose of Expenditure Brochures		Category/ Type 004] [05 / 20 / 2014
Name of Federal Candidate		Support	Office Soug	ght: House District: 00
Mr. Mark L Pryor		X Oppose	Presi	
Calendar Year-To-Date Per Election for Office Sought		283336.30	Disburseme 2014	ent For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures			· •	9441.18
(b) SUBTOTAL of Unitemized Independent Expenditures	·s		· • [
(c) TOTAL Independent Expenditures			· [7 7 7
Under penalty of perjury I certify that the independent exwith, or at the request or suggestion of, any candidate of party committee) any political party committee or its age	or authorized			
Ms. Emily Buchanan	[Electroni	ically Filed] Date	M M /	12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Buto		

TE	EMIZED INDEPENDENT EXPENDITURES			PAGE 50 OF 55 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
W	Vomen Speak Out PAC			C C00530766
Che	neck if 24-hour report 48-hour report New report	ort Amends repo		M / D D / Y Y Y Y Y
I	Full Name of Payee United States Treasury			of Public Distribution/Dissemination
	Mailing Address PO Box 804522		Amou	05 30 2014 nt
	City State	Zip Code	— Г	22.93
	Cincinatti OH	45280		ction ID : 9c00cc2a-36f0-4369-9 of Disbursement or Obligation
	Purpose of Expenditure Taxes	Category/ Type 001		05
	Name of Federal Candidate	Support	Office Sough	t: House District:00
	Ms. Mary L Landrieu	X Oppose	Preside	ent Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	264411.29	Disbursemen 2014 O	nt For:
	Full Name of Payee		Date	of Public Distribution/Dissemination
	Department Of Employment Services		N	05
	Mailing Address 4058 Minnesota Ave, NE		Amou	int
	City State	Zip Code		8.43
	Washington DC	20019		oction ID: 1f089523-315e-4efb-a of Disbursement or Obligation
	Purpose of Expenditure Taxes	Category/ Type 001		05 / 30 / 2014
	Name of Federal Candidate	Support	Office Sough	nt: House District: 00
	Ms. Mary L Landrieu	X Oppose	Preside	
	Calendar Year-To-Date Per Election for Office Sought	264411.29	Disbursemen 2014 C	nt For: Primary
((a) SUBTOTAL of Itemized Independent Expenditures		. •	31.36
((b) SUBTOTAL of Unitemized Independent Expenditures		· •	7 1 7 1 7
	(c) TOTAL Independent Expenditures		· .	7 7 7
١	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.			
	Ms. Emily Buchanan [Electroni	nically Filed] Date	M = M /	12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature			

	CHEDULE E (FEC Form 3X)		
11	EMIZED INDEPENDENT EXPENDITURES		PAGE 51 OF 55 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New rep	port Amends repor	t filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Design 4 Marketing Communications		05 29 2014
	Mailing Address 106 N Collins St		Amount
	City State	Zip Code	550.00
	Plant City FL	33565	Transaction ID: c202b0b9-9cc1-4b76-9 Date of Disbursement or Obligation
	Purpose of Expenditure Banner	Category/ Type 004	05 29 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President State: LA
	Calendar Year-To-Date Per Election for Office Sought	264411.29	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	Full Name of Payee		Date of Public Distribution/Dissemination
	The Lukens Company Previously Reported As \$8000.00		05 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2800 Shirlington Road		Amount
	9th Floor		
	City State	Zip Code	7358.00
	Arlington VA	22206	Transaction ID: e8909805-53ea-4650-8 Date of Disbursement or Obligation
	Purpose of Expenditure Door Hangers	Category/ Type 004	05 30 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	264411.29	Disbursement For: Primary
	(a) SUBTOTAL of Itemized Independent Expenditures		7908.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		>
	(c) TOTAL Independent Expenditures		·
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y Y

[Electronically Filed]

Date

П

	CHEDULE E (FEC Form :			
TΕ	EMIZED INDEPENDENT EXPEN	IDITURES		PAGE 52 OF 55 FOR LINE 24 OF FORM 3X
VΑ	AME OF COMMITTEE (In Full)			
	Vomen Speak Out PAC			FEC IDENTIFICATION NUMBER ▼ C C00530766
Ch	neck if 24-hour report 48-hou	r report New report	ort Amends repo	rt filed on
	Full Name of Payee The Lukens Company Previously	Reported As \$8000.00		Date of Public Distribution/Dissemination 05 05 07 08 08 08 08 08 08 08 08 08
	Mailing Address 2800 Shirlington Road	b		Amount
	City	State	Zip Code	4270.75
	Arlington	VA	22206	Transaction ID : 73b69a2b-fed1-4e55-b Date of Disbursement or Obligation
	Purpose of Expenditure Door Hangers		Category/ Type 004	05 30 / Y Y Y Y Y Y
	Name of Federal Candidate		Cupport	Office Sought: House District: 00
	Ms. Kay Hagan		Support Oppose	President Senate State: NC
	Calendar Year-To-Date Per Election for Office Sought	7	1096873.27	Disbursement For: Primary General 2014 Other (specify) ▶
	Full Name of Payee			Data of Dublic Distribution/Dissemination
	Mr. Francisco Gonzales			Date of Public Distribution/Dissemination 05 / 31 / 2014
	Mailing Address 3461 NWY 39			Amount
	City	State	Zip Code	90.00
	Braithwaite	LA	70040	Transaction ID : c9e3e3fc-e8f1-463c-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001	05
	Name of Federal Candidate		Support	Office Sought: House District: 00
	Ms. Mary L Landrieu		X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		264411.29	Disbursement For: Primary General 2014 General Other (specify) ▶
	(a) SUBTOTAL of Itemized Independen	it Expenditures		4360.75
	(b) SUBTOTAL of Unitemized Independ	dent Expenditures		•
	(c) TOTAL Independent Expenditures			·
	Under penalty of perjury I certify that the	ne 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]		M = M	/ 12	2014
Signature					

ΤEI	MIZED INDEPENDENT EXPENDITURES						PAGE 53 FOR LINE 2	OF 55 24 OF FORM 3X
	ME OF COMMITTEE (In Full)					FEC	IDENTIFICATI	ON NUMBER ▼
W	omen Speak Out PAC					С	C00530766	
Che	eck if 24-hour report 48-hour report	New repo	ort Am	nends repc	ort filed on	M = M	/ D D /	Y Y Y Y Y
Т	Full Name of Payee				Da	te of Pub	lic Distribution	/Dissemination
	Mr. Francisco Gonzales					M M M	/ D D /	2014
ľ	Mailing Address 3461 NWY 39				Am	nount		201.
ŀ	City S	State	Zip Code					6.60
		LA	70040				ID: ee50d351	-0d79-426c-9
	Purpose of Expenditure Mileage		Category/ Type	002		05	/ Dan /	2014
ŀ	Name of Federal Candidate		<u> </u>	Support	Office Sou	ıaht:	House	District: 00
	Ms. Mary L Landrieu			Oppose		•	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		264411.29	9	Disbursem 2014	1	Primary	/ Seneral
	Full Name of Payee Mr. Alex Peyton				Da	te of Pub	olic Distribution	n/Dissemination
ľ	Mailing Address 859 Hicks Rd				An	nount		
-	C14 (State	Zin Code		— Г			150.00
	,	LA	Zip Code 70589				ID: f2d4ba4f- bursement or	f926-4339-b
	Purpose of Expenditure Salary		Category/ Type	001		05	31	2014
	Name of Federal Candidate		·	Support	Office Sor	ught:	House	District:00
	Ms. Mary L Landrieu			Oppose	Pre	sident	Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		264411.29	9	Disbursen 2014	1	Primary	y X General
((a) SUBTOTAL of Itemized Independent Expenditures				•		1 1 - 3-	156.60
((b) SUBTOTAL of Unitemized Independent Expenditures)S			. •		- 1 - 7	1 1 40 1
((c) TOTAL Independent Expenditures				· -			
W	Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate of party committee) any political party committee or its age	or authorized						
	Ms. Emily Buchanan	[Electron	ically Filed]	Data	M M	/ 12	D / Y Y Y 20°	Y Y
	Signature		_	Date	, '''	12	20	

party committee) any political party committee or its agent.

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDIT			PAGE 54 OF 55 FOR LINE 24 OF FORM 33
IAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report 48-hour rep	port New	report Amends rep	ort filed on
Full Name of Payee Mr. Alex Peyton			Date of Public Distribution/Dissemination 05 31 2014
Mailing Address 859 Hicks Rd			Amount
City	State	Zip Code	96.30
Washington	LA	70589	Transaction ID: ddcda6fe-72ef-4b42-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	05 31 / Y 2014
Name of Federal Candidate Ms. Mary L Landrieu		Support Oppose	Office Sought: House District: 00 President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		264411.29	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee Mr. Michael Vidrine Mailing Address 458 Hebert Rd			Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	147.00
Palmetto	LA	71358	Transaction ID: 023c29c5-54fa-49f3-a Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	05 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		264411.29	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Ex	penditures		> 243.30
(b) SUBTOTAL of Unitemized Independent	Expenditures		
(c) TOTAL Independent Expenditures			

Ms. Emily Buchanan [Electronically Filed] 2014 Date Signature

		FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
VV	omen Speak Out PAC	C C00530766
Che	eck if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y
П	Full Name of Payee Mr. Michael Vidrine	Date of Public Distribution/Dissemination
	ivii. iviichaer viunne	05 / 31 / 2014
	Mailing Address 458 Hebert Rd	Amount
ŀ	City State Zip Code	3.90
	Palmetto LA 71358	Transaction ID : 5dded79f-beab-4762-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage Category/ Type 002	05 31 Y 2014
ı	Name of Federal Candidate Support Office	e Sought: House District: 00
	Ms. Mary L Landrieu Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought Disbut 2014	orsement For: Primary
ŀ	Full Name of Payee	Date of Public Distribution/Dissemination
	Personalized Marketing Communications	M - M / D - D / Y - Y - Y
	Mailing Address 85 Air Park Drive	05 13 2014 Amount
ŀ	City State Zip Code	3973.29
	Lynchburg VA 24502	Transaction ID : 0023b3a3-78fc-4195-8
-	Purpose of Expenditure Category/ Category/	Date of Disbursement or Obligation
	Fundraising Letter Type 003	05 13 2014
ľ	Name of Federal Candidate Support Office	e Sought:
	Ms. Mia Love Oppose	President Senate State: UT
	Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	3977.19
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	59462.16
٧	Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe arty committee) any political party committee or its agent.	
	Ms. Emily Buchanan [Electronically Filed] Date	1 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature	

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