

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Every Voice Action

ADDRESS (number and street) 1211 Connecticut Ave., NW
Washington DC 20036
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00566208 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 / 08 / 2016 in the State of DC

5. Covering Period 10 / 20 / 2016 through 11 / 28 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Donnelly, David, A, ,
Type or Print Name of Treasurer

Signature of Treasurer Donnelly, David, A, , [Electronically Filed] Date 12 / 06 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Every Voice Action

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text"/>	<input type="text" value="1459.61"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3450.27"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="6497.44"/>	<input type="text" value="21603.85"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="9947.71"/>	<input type="text" value="23063.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6397.80"/>	<input type="text" value="19513.55"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3549.91"/>	<input type="text" value="3549.91"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Every Voice Action

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	700.00	950.00
(ii) Unitemized	1326.00	3055.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2026.00	4005.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2026.00	4005.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	1209.91
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	4471.44	16388.94
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	6497.44	21603.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6497.44	21603.85

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	176.36	1374.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	176.36	1374.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	4373.61	8150.60
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1847.83	9988.34
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6397.80	19513.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6397.80	19513.55

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2026.00	4005.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2026.00	4005.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	176.36	1374.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1209.91
38. Net Operating Expenditures (subtract Line 37 from Line 36)	176.36	164.70

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

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

FOR LINE NUMBER: PAGE 6 OF 13
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Every Voice Action

A. Galleto, Beth, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 16th St NW
Apt 215

City Washington State DC Zip Code 20009-3112

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

Name of Employer (for Individual) N/A Occupation (for Individual) Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2016

Transaction ID : VN8AJF8QHT6

Amount of Each Receipt this Period
200.00

Memo Item

B. Simon, Daniel, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Columbus Ave
Apt 37C

City New York State NY Zip Code 10023-6933

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

Name of Employer (for Individual) N/A Occupation (for Individual) N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2016

Transaction ID : VN8AJFB6396

Amount of Each Receipt this Period
500.00

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	700.00

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

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

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NAME OF COMMITTEE (In Full)
Every Voice Action

A. Every Voice

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1211 Connecticut Ave NW
Ste 600

City Washington State DC Zip Code 20036-2705

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12447.39

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 26 / 2016

Transaction ID : VN8AJF8YTJ9

Amount of Each Receipt this Period
529.89

Memo Item

In-kind staff time & overhead 10/26/16-see transaction VN7BAA6ESA6

B. Every Voice

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1211 Connecticut Ave NW
Ste 600

City Washington State DC Zip Code 20036-2705

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13541.25

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2016

Transaction ID : VN8AJFAHY2

Amount of Each Receipt this Period
1093.86

Memo Item

In-kind staff time & overhead 11/3/16-see transaction # VN7BAA79G69

C. Every Voice

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1211 Connecticut Ave NW
Ste 600

City Washington State DC Zip Code 20036-2705

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16388.94

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 08 / 2016

Transaction ID : VN8AJFE5HW5

Amount of Each Receipt this Period
1462.94

Memo Item

In-kind staff time & associated overhead 11/8/16 see exp#VN&BAA7TX78

SUBTOTAL of Receipts This Page (optional).....	3086.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Every Voice Action

A. Every Voice

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1211 Connecticut Ave NW
Ste 600

City Washington State DC Zip Code 20036-2705

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16388.94

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : VN8AJFE5JJ6

Amount of Each Receipt this Period

384.89

 Memo Item

In-kind staff time & overhead 11/8/16-see transaction # VN7BAA7TX86

B. Every Voice

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1211 Connecticut Ave NW
Ste 600

City Washington State DC Zip Code 20036-2705

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16388.94

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : VN8AJFE5JQ6

Amount of Each Receipt this Period

999.86

 Memo Item

Social Media-In-kind contribution associated with transaction # VN7BAA7TQH3

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

--

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1384.75
TOTAL This Period (last page this line number only).....	4471.44

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Every Voice Action

A. Pivotal Payments

Full Name (Last, First, Middle Initial)

Mailing Address 5000 Legacy Dr
Ste 320

City Plano State TX Zip Code 75024-3112

Purpose of Disbursement Merchant Deposit Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 03 / 2016

FEC Identification Number: C

Transaction ID : VN7BAA796T

Amount of Each Disbursement this Period: 70.94

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	70.94
TOTAL This Period (last page this line number only).....▶	70.94

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Every Voice Action

A. Every Voice

Full Name (Last, First, Middle Initial)

Mailing Address 1211 Connecticut Ave NW
Ste 600

City Washington State DC Zip Code 20036-2705

Purpose of Disbursement
Staff time & assoc costs in-kind: MF821+FS133+BA130+TD26+CT88 &
C/H322-See contribution VN8A IFF5HW5

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C

Transaction ID : VN7BAA7TX7

Amount of Each Disbursement this Period: 1462.94

Memo Item

B. Every Voice

Full Name (Last, First, Middle Initial)

Mailing Address 1211 Connecticut Ave NW
Ste 600

City Washington State DC Zip Code 20036-2705

Purpose of Disbursement
in kind support-- staff \$218 + office costs 167. see contribution #VN8AJ

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C

Transaction ID : VN7BAA7TX8

Amount of Each Disbursement this Period: 384.89

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1847.83
TOTAL This Period (last page this line number only).....▶	1847.83

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Every Voice Action
FEC IDENTIFICATION NUMBER
C C00566208

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Every Voice
Mailing Address: 1211 Connecticut Ave NW, Ste 600, Washington, DC, 20036-2705
Purpose of Expenditure: Social Media Advertisement Costs
Category/Type: 004
Date of Public Distribution/Dissemination: 10/26/2016
Amount: 1000.00
Transaction ID: VN7BAA6BTJ9
Date of Disbursement or Obligation: 10/26/2016

Name of Federal Candidate: Trump, Donald, J.,
Support: [] Oppose: [x]
Office Sought: [x] President [] House [] Senate
Disbursement For: [] Primary [x] General 2016 [] Other (specify)

Full Name of Payee: Every Voice
social media advertising
Mailing Address: 1211 Connecticut Ave NW, Ste 600, Washington, DC, 20036-2705
Purpose of Expenditure: Staff time & assoc costs: in-kind:Faulkner 292 & Stovall 131 & O/H 107-See contribution VN8AJF8YTJ9
Category/Type: 001
Date of Public Distribution/Dissemination: 10/26/2016
Amount: 529.89
Transaction ID: VN7BAA6ESA6
Date of Disbursement or Obligation: 10/26/2016

Name of Federal Candidate: Trump, Donald, J.,
Support: [] Oppose: [x]
Office Sought: [x] President [] House [] Senate
Disbursement For: [] Primary [x] General 2016 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures: 1529.89
(a) SUBTOTAL of Unitemized Independent Expenditures:
(a) TOTAL Independent Expenditures:

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Donnelly, David, A.,

[Electronically Filed]

Date

12 / 06 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Every Voice Action	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00566208 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Every Voice	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2016
Mailing Address 1211 Connecticut Ave NW Ste 600	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">500.00</div> Transaction ID : VN7BAA73MV6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 03 / 2016
City Washington State DC Zip Code 20036-2705	
Purpose of Expenditure Social Media Advertisement Costs Category/Type 004	
Name of Federal Candidate: Trump, Donald, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 8150.60	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item Every Voice social media advertising	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2016
Mailing Address 1211 Connecticut Ave NW Ste 600	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1093.86</div> Transaction ID : VN7BAA79G69 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 03 / 2016
City Washington State DC Zip Code 20036-2705	
Purpose of Expenditure Staff time & assoc costs: in-kind:Faulkner 675 & Stovall 143 & O/H 276-See contribution VN8AJFAHY2 Category/Type 001	
Name of Federal Candidate: Trump, Donald, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 8150.60	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1593.86</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Donnelly, David, A.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 06 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Every Voice Action	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00566208 </div>
--	---

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Haight, Stuart, , ,	Date of Public Distribution/Dissemination 11 / 03 / 2016
Mailing Address 4012 Hallman St Apt 2	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div> Transaction ID : VN7BAA79VW6 Date of Disbursement or Obligation 11 / 04 / 2016
City State Zip Code Fairfax VA 22030-5264	
Purpose of Expenditure Video Production Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support Trump, Donald, J., , <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 8150.60	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item Every Voice	Date of Public Distribution/Dissemination 11 / 08 / 2016
Mailing Address 1211 Connecticut Ave NW Ste 600	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">999.86</div> Transaction ID : VN7BAA7TQH3 Date of Disbursement or Obligation 11 / 08 / 2016
City State Zip Code Washington DC 20036-2705	
Purpose of Expenditure Social Media Advt Costs-see contrib #VN8AJFE5JQ6 Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support Trump, Donald, J., , <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 8150.60	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1249.86</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">4373.61</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Donnelly, David, A.,

[Electronically Filed]

Date

12 / 06 / 2016

Signature