

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

PAGE 1 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>NextGen Committee</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 2em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="font-size: 1.2em; padding-left: 5px;">C00542779</span> </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">MM / DD / YYYY 03 / 27 / 2013</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Barnes Mosher Whitehurst Lauter &amp; Partners, Inc.</b>	Date <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">MM / DD / YYYY 03 / 25 / 2013</div>
Mailing Address 660 Mission St., 2nd Floor, Ste 200	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">3125.00</div>
City State Zip Code San Francisco CA 94105	<b>Transaction ID : PDT.E.27</b>
Purpose of Expenditure Consulting Services	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">70445.81</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special 2013

Full Name (Last, First, Middle Initial) of Payee <b>Tigercomm</b>	Date <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 5px;">MM / DD / YYYY 03 / 25 / 2013</div>
Mailing Address 1901 N. Fort Myer Drive, Suite 850	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">1600.00</div>
City State Zip Code Arlington VA 22209	<b>Transaction ID : PDT.E.36</b>
Purpose of Expenditure Consulting for Blog Piece	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">24A</div>
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">70445.81</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special 2013

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">4725.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </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.

*Thomas Adams*  
 Signature \_\_\_\_\_ [Electronically Filed] Date

MM / DD / YYYY  
06 / 24 / 2013

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) <b>NextGen Committee</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00542779       </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 03 / 27 / 2013</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Tigercomm</b>	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY 03 / 25 / 2013</div>
Mailing Address 1901 N. Fort Myer Drive, Suite 850	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">3200.00</div>
City State Zip Code Arlington VA 22209	<b>Transaction ID : PDT.E.40</b>
Purpose of Expenditure Open Letter	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F. Lynch	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">70445.81</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special 2013

Full Name (Last, First, Middle Initial) of Payee	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>
Mailing Address	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>
City State Zip Code	<b>Transaction ID :</b>
Purpose of Expenditure	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">3200.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">7925.00</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.

*Thomas Adams*  
 Signature \_\_\_\_\_ [Electronically Filed] Date 

MM / DD / YYYY  
06 / 24 / 2013