Image# 14953133968			_	PAGE 1 / 50
	PORT OF F D DISBURS	SEMENTS	;	Office Use Only
1. NAME OF TYP COMMITTEE (in full)	e or print 🔻	Example: If typing over the lines.	, type 12FE4M	15
Every Voice Action				
ADDRESS (number and street)	33 19th St			
Check if different	h Floor			
than previously w reported. (ACC)	/ashington			20036
2. FEC IDENTIFICATION NUMB		▲	STATE 🔺	ZIP CODE
C C00566208	3. IS RE	THIS X NE		AMENDED A)
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: 	Report Due On:	0 (M3)	n 20 (M6)	ug 20 (M8) Nov 20 (M11) (Non-Election Year Only) up 20 (M9) Dec 20 (M12) (Non-Election Year Only) up 20 (M10) Jan 31 (YE)
Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)	(c) 12-Day PRE -Election Report for the:	Primary (12P) Convention (12		Al (12G) Runoff (12R) I (12S)
January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY)			Runoff	State of
Termination Report (TER)	Report for the:	on 11 /	04 / Y Y Y 2014	Y in the State of DC
5. Covering Period	16 / Y Y Y Y Y 16 2014	through	11 / D D D 24	/ Y Y Y Y 2014
I certify that I have examined this Re	-	ly knowledge and be	lief it is true, correct a	and complete.
Type or Print Name of Treasurer D Signature of Treasurer David Don	avid Donnelly nelly	[Electronically F	Filed] Date 12	M / D D / Y Y Y Y Y 04 2014
NOTE: Submission of false, erroneous,	or incomplete information	nay subject the perso	n signing this Report to	the penalties of 2 U.S.C. 8437a
Office Use Only				FEC FORM 3X Rev. 12/2004

12/04/2014 21 : 11

iiiia	ge# 14000100000		
Γ	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
٧	Vrite or Type Committee Name		
I	Every Voice Action		
R	Report Covering the Period: From:	10 / D D / Y Y Y Y 16 2014 7	o: 11 24 2014
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		0.00
	(b) Cash on Hand at Beginning of Reporting Period	835064.03	
	(c) Total Receipts (from Line 19)	817628.85	3107879.19
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	1652692.88	3107879.19
7.	Total Disbursements (from Line 31)	1626539.25	3081725.56
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	26153.63	26153.63
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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. 06/2004)

Write or Type Committee Name Every Voice Action

Report Covering the Period: From: 10		11 24 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	250.00	6250.00
(i) itemized (use Schedule A)	7 7	
(ii) Unitemized	876.00	3026.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	1126.00	9276.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	1126.00	9276.00
Totals to Line 33, page 5)	1120.00	
Party Committees	0.00	0.00
Tarty Committees		
3. All Loans Received	110000.00	110000.00
4. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	3124.02	3124.02
Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	703378.83	2985479.17
3. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	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
		0.00
0. Total Receipts (add Lines 11(d),	017000.05	0407070 40
12, 13, 14, 15, 16, 17, and 18(c))►	817628.85	3107879.19
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)►	817628.85	3107879.19
	017020.00	3107073.13

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. 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	21344.57	266772.18
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))► Transfers to Affiliated/Other Party	21344.57	266772.18
Committees Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures	1263490.35	2240765.18
(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d))	0.00	
(use Schedule F)		0.00
Loan Repayments Made	11000.00	110000.00
Loans Made	0.00	0.00
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	0.00	0.00
(add Lines 28(a), (b), and (c))►		
Other Disbursements	231704.33	464188.20
Federal Election Activity (2 U.S.C. §431(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	0.0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ►	0.00	0.00
Total Disbursements (add Lines 21(c), 22,	, , , , , , , , , , , , , , , , , , , ,	
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1626539.25	3081725.50
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)►	1626539.25	3081725.56
	7 7	7 7

L

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	1126.00	9276.00
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	1126.00	9276.00
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	21344.57	266772.18
 Offsets to Operating Expenditures (from Line 15, page 3) 	3124.02	3124.02
 Net Operating Expenditures (subtract Line 37 from Line 36) 	18220.55	263648.16

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	11a 13		11b 14		11c 15	12	17										
Any information copied from such Reports or for commercial purposes, other than us	and Statements ma sing the name and a	y not be sold or used by any p ddress of any political committee	erson for erson	or the	purp ntrib	pose	of so s fro	oliciting	g contribu	utions										
NAME OF COMMITTEE (In Full)																				
Full Name (Last, First, Middle Initial) A. Alice C. Swift										Date of Receipt										
Mailing Address 36 Pondview Dr	0			м м 10	/	2	D 28		у у 2014	Y										
City Amherst	State MA	Zip Code 01002-3229	-			-			<u>EV3B0</u>											
FEC ID number of contributing federal political committee.	С			Amount	OT	Each	Rec	ceipt th	nis Perioo 25	0.00										
Name of Employer none	Occupation not employe																			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00] *	Earmar	ked	l Coni	tribut	tion: Se	e Below											
Full Name (Last, First, Middle Initial) B. ActBlue				Date of	Re	eceipt														
Mailing Address PO Box 382110				м м 10	/		D 28	/ Y	2014	Y										
City Cambridge	State MA	Zip Code 02238-2110							EV3B0E											
FEC ID number of contributing federal political committee.	C coo	401224				7	Ξ	7	250	0.00										
Name of Employer	Occupation Conduit tota	l listed in Agg. field																		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1026.00	Ň	IEMO I ote: Ab ganizat	ove	Cont	ributi	ion ear	marked t	hrough thi										
Full Name (Last, First, Middle Initial)				Date of	Re	ceipt														
Mailing Address				M M	/	D	D	/ Y	YY	Y										
City	State	Zip Code	A	Amount	t of	Each	n Red	ceipt th	nis Perioo	d										
FEC ID number of contributing federal political committee.	С					7														
Name of Employer	Occupation																			
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼																		
SUBTOTAL of Receipts This Page (optic	nal)					7	Ξ	7	250	0.00										
TOTAL This Period (last page this line n	umber only)					7		7	250	0.00										

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 7 OF

		Detailed Summary Page		11a		11	b	11c	12											
			X	13		14		15	16	17										
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements ma g the name and a	ay not be sold or used by any poddress of any political committee	erson fo e to sol	or the icit cor	purp ntrib	pos	se of sons fro	soliciting om sucl	contribut	tions ee.										
NAME OF COMMITTEE (In Full)																				
> Every Voice Action																				
Full Name (Last, First, Middle Initial)										Date of Receipt										
Mailing Address 1133 19th St NW			1.1	M M	/	Р	D D	/ Y	Y Y	Y										
FI 9			44	10		L	28		2014											
City	State DC	Zip Code 20036-3612							F0MV0											
Washington	DC	20030-3012	A	mount	t of	Ea	ch Re	eceipt th	is Period											
FEC ID number of contributing federal political committee.	C					,		7	110000											
Name of Employer	Occupation																			
Receipt For: 2014 Primary X General	Aggregate	Year-to-Date ▼																		
Other (specify) ▼		110000.00																		
Full Name (Last, First, Middle Initial)	I			Date of	Re	ecei	ipt													
Mailing Address				M = M	/	_	DDD	/ Y	- Y - Y -	Y										
City	State	Zip Code		mount	t of	Fa	ch Be	ceipt th	is Period											
FEC ID number of contributing federal political committee.	С					1														
Name of Employer	Occupation																			
Receipt For:	Aggregate	Year-to-Date ▼																		
Other (specify)		<u></u>																		
Full Name (Last, First, Middle Initial)				Date of	Re	ecei	ipt													
Mailing Address				M M	/	Γ	D D	/ Y	YY	Y										
City	State	Zip Code		mount	of	Fa	ch Be	coint th	is Period											
FEC ID number of contributing federal political committee.	C			inoun		La														
Name of Employer	Occupation																			
Receipt For:	Aggregate	Year-to-Date ▼																		
Primary General	riggregate																			
Other (specify)		y																		
SUBTOTAL of Receipts This Page (optiona	al)					-		A.	110000.	00										
TOTAL This Period (last page this line num	nber only)	······				-			110000.	00										

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 8 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$
or for commercial purposes, other than using	I Statements may not be sold or used by any per the name and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Every Voice Action		
A. Full Name (Last, First, Middle Initial) Murphy Vogel Askew Reilly LLC Mailing Address 1199 N Fairfax St Ste 220 City	State Zip Code	Date of Receipt
Alexandria	VA 22314-1437	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	3124.02
Name of Employer	Occupation	_
Receipt For: 2014 Primary X General Other (specify) ▼	Aggregate Year-to-Date ▼ 3124.02	Refund of overpayment
Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional).	·····	3124.02
TOTAL This Period (last page this line number	ər only)	3124.02

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

 (check only one)

 PAGE 9 OF

	Detailed Summary Page	$11a$ $11b$ $11c$ 12 12 14 15 16 \mathbf{V}_{12}
	d Statements may not be sold or used by any per	
or for commercial purposes, other than using	the name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
Full Name (Last, First, Middle Initial) A. Ian Simmons		Date of Receipt
Mailing Address PO Box 380310		10 16 2014
City	State Zip Code	Transaction ID : VN8AJD9Y0W1
Cambridge	MA 02238-0310	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150000.00
Name of Employer	Occupation	_
Self	Investor	
Receipt For: 2014 Primary X General Other (specify)	Aggregate Year-to-Date ▼ 155786.71	
Full Name (Last, First, Middle Initial) 3. Clay Kirk		Date of Receipt
Mailing Address 320 E 72nd St Apt 5C		10 17 2014
City	State Zip Code	Transaction ID : VN8AJDAKWD8
New York	NY 10021-5251	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	4000.00
Name of Employer Self Employed	Occupation Investor	-
Receipt For: 2014 Primary X General Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 1625 L St NW		10 20 _2014 _
City	State Zip Code	Transaction ID : VN8AJDBK4F1
Washington	DC 20036-5665	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50000.00
Name of Employer	Occupation	-
Receipt For: 2014	Aggregate Year-to-Date ▼	1
Primary X General		
Other (specify)	50000.00	
SUBTOTAL of Receipts This Page (optional)	·	204000.00
TOTAL This Period (last page this line numb	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 10 OF

	Detailed Summary Page	11a 11b 11c 12
		13 14 15 16 X
		by person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
Every Voice Action		
Full Name (Last, First, Middle Initial) Friends of Democracy IE		Date of Receipt
Mailing Address PO Box 33691		M M / D D / Y Y Y Y Y 10 20 _ 2014 _
City	State Zip Code	Transaction ID : VN8AJDBEB33
Washington	DC 20033-0691	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45000.00
Name of Employer	Occupation	
Receipt For: 2014	Aggregate Year-to-Date ▼	
Primary X General		
Other (specify)	1195000.00	
Full Name (Last, First, Middle Initial) Irene Kaufman		Date of Receipt
Mailing Address 40 Perry St		10 21 2014
City	State Zip Code	Transaction ID : VN8AJDC7EZ8
New York	NY 10014-2704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	10000.00
Name of Employer	Occupation	
self employed	self employed	
Receipt For: 2014 Primary ∑ General Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	
Full Name (Last, First, Middle Initial) HOUSE MAJORITY PAC		Date of Receipt
Mailing Address 700 13th St NW Ste 600		10 22 2014
City	State Zip Code	Transaction ID : VN8AJDF2B54
Washington	DC 20005-3960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	7000.00
Name of Employer	Occupation	
Receipt For: 2014	Aggregate Year-to-Date ▼	
Primary 🔀 General		* In-Kind: *In-kind: Public Opinion Research
Other (specify)	26616.09	

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 11 OF

		Detailed Summary Page		11a		11b	11c	12						
				13		14	15	16	X 17					
Any information copied from such Reports a or for commercial purposes, other than usin														
NAME OF COMMITTEE (In Full) Every Voice Action														
Full Name (Last, First, Middle Initial) A. Mayday PAC				Date of	Re	ceipt								
Mailing Address PO Box 380444				10 22 _ 2014 _										
City	State	Zip Code			acti		VN8AJD							
Cambridge	MA	02238-0444	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C coo	0562587				5		7000	0.00					
Name of Employer	Occupation	1												
Receipt For: 2014 Primary X General Other (specify) ▼	Aggregate	Year-to-Date ▼ 528000.00	1											
Full Name (Last, First, Middle Initial) B. MoveOn PAC				Date of	Re	ceipt								
Mailing Address PO Box 9218				м м 10	1	22		2014	Y					
City	State	Zip Code			acti		VN8AJD							
Berkeley	CA	94709-0218					Receipt th		1					
FEC ID number of contributing federal political committee.	С			40000.00										
Name of Employer	Occupation	1												
Receipt For: 2014 Primary ∑ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 40000.00	1											
Full Name (Last, First, Middle Initial) C. CWA Working Voices	I		Г	Date of	Re	ceipt								
Mailing Address 501 3rd St NW				M M 10] ′	24		2014	Y					
City Washington	State DC	Zip Code 20001-2760					VN8AJD Receipt th		1					
FEC ID number of contributing federal political committee.	С				_			5000	_					
Name of Employer	Occupation	I												
Receipt For: 2014 Primary X General Other (specify) ▼	Aggregate	Year-to-Date ▼ 150000.00	1											
SUBTOTAL of Receipts This Page (option	al)				-			160000	.00					
					-	7	7							
TOTAL This Period (last page this line num	mber only)	••••••	<u>،</u>	_	_	7								

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 12 OF

		Detailed Summary Page		11a		111	b	11c	12	
				13		14		15	16	X 17
Any information copied from such Reports and S or for commercial purposes, other than using the	statements ma e name and a	y not be sold or used by any poddress of any political committee	erson f e to so	or the icit cor	purp ntrib	oos utic	e of sons fr	soliciting om such) contribu n commit	tions tee.
NAME OF COMMITTEE (In Full) Every Voice Action										
Full Name (Last, First, Middle Initial) A. Fair Share Action			[Date of	Re	ceij	pt			
Mailing Address 3845 Tennyson St # 150				м м 10	/		27	/ Y	ү ү 2014	Y
City	State CO	Zip Code 80212-2107				-		/N8AJD	-	
Denver FEC ID number of contributing		00212-2107	_ /	Amount	of	Ead	ch Re	eceipt th	is Period	
federal political committee.	C coo	0526673				7		7	10000	0.00
Name of Employer	Occupation									
Receipt For: 2014	Aggregate	Year-to-Date ▼								
Primary X General Other (specify) ▼		10000.00								
Full Name (Last, First, Middle Initial) 3. Friends of Democracy IE				Date of	Re	ceij	pt			
Mailing Address PO Box 33691				M M 10	/		27	/ Y	2014	Y
City	State	Zip Code			actio	on		/N8AJD		
Washington	DC	20033-0691		Amount	of	Ead	ch Re	eceipt th	is Period	
FEC ID number of contributing federal political committee.	С					7		_	25000	.00
Name of Employer	Occupation									
Receipt For: 2014 Primary X General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1220000.00								
Full Name (Last, First, Middle Initial)	ictory Fund	Ł		Date of	Re	ceij	pt			
Mailing Address 1920 L St NW Ste 800				м м 10	/		27	/ Y	y y 2014	Y
City Washington	State DC	Zip Code 20036-5045							DN2P5 is Period	
FEC ID number of contributing federal political committee.	С					1		, ooipt in	25000	
Name of Employer	Occupation									
Receipt For: 2014	Aggregate	Year-to-Date ▼	_							
Primary X General Other (specify) ▼		25000.00								
SUBTOTAL of Receipts This Page (optional)					-		-		60000	.00
TOTAL This Period (last page this line number						7		- 7		

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 13 OF

		Detailed Summary Page		11a		11b	11c	12	
				13		14	15	16	X 17
Any information copied from such Repo or for commercial purposes, other than									
NAME OF COMMITTEE (In Full) Every Voice Action									
Full Name (Last, First, Middle Initial) A. Every Voice				Date of	Re	eceipt			
Mailing Address 1133 19th St NW FI 9				м м 10	/	29	/ Y	y y 2014	Y
City	State	Zip Code					VN8AJD		
Washington	DC	20036-3612	A	Amount	of	Each R	eceipt th	is Period	d
FEC ID number of contributing federal political committee.	C					,	3	600	0.00
Name of Employer	Occupation	I							
Receipt For: 2014 Primary X General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220697.54		Paymen ontributi		Anthon	y Whittak	er as an	In-kind
Full Name (Last, First, Middle Initial) B. Vin Ryan	1			Date of	Re	eceipt			
Mailing Address 745 Atlantic Ave FI 11				м м 10	/	29	/ Y	2014	Y
City	State	Zip Code					VN8AJD		
Boston	MA	02111-2709	/	Amount	of	Each R	eceipt th	is Period	b
FEC ID number of contributing federal political committee.	C					,	7	14000	0.00
Name of Employer CEO	Occupation Schooner C								
Receipt For: 2014 Primary X General Other (specify) ▼	Aggregate	Year-to-Date ▼ 154000.00]						
Full Name (Last, First, Middle Initial) C. DRIVE - International Broth	nerhood of Team	sters		Date of	Re	eceipt			
Mailing Address 25 Louisiana Ave N	V			м м 10	/	30	/ Y	y y 2014	Y
City	State	Zip Code		Trans	acti	ion ID :	VN8AJD	DTY75	
Washington	DC	20001-2130	/	Amount	of	Each R	eceipt th	is Period	d
FEC ID number of contributing federal political committee.	C co	0032979				,	7	2500	0.00
Name of Employer	Occupation	I							
Receipt For: 2014	Aggregate	Year-to-Date ▼							
Other (specify)		25000.00							
SUBTOTAL of Receipts This Page (op	tional)					5	7	171000	0.00
TOTAL This Period (last page this line	number only)								

:97 A = G79 @ G5 B9CIG H9LH F9 @ 5 H98 HC 5 F9DCFH 2G7 < 98 I @ CF + H9A = N5 H= CB

Form/Schedule: SA17 Transaction ID : VN8AJDH22P2

see transaction VN7BA9Y1VB8

Form/Schedule: Transaction ID:

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 15 OF

50

		Detailed Sun				11a 13	\square	11b 14		11c		12 16	X	17
Any information copied from such Reports and or for commercial purposes, other than using t	I Statements mather the name and a	ay not be sold o uddress of any p	r used by any political committe	perso e to	n fo	r the	purp ntribu	ose c utions	of so	liciti	ng coi ich co	ntribut	tions	
NAME OF COMMITTEE (In Full)														
Full Name (Last, First, Middle Initial) Every Voice					Da	ate of	Red	ceipt						
Mailing Address 1133 19th St NW Fl 9					Ľ	M M	/	D 04		/		014	Y	
City	State	Zip Code	.	-	1	Trans	actio	on ID	: VN	I8AJ	JDH22	2C3		
Washington	DC	20036-3612	2		Ar	nount	of I	Each	Rece	eipt	this P	eriod		
FEC ID number of contributing federal political committee.	С							,		7	2	24566	i.33	
Name of Employer	Occupation	1												
Receipt For: 2014	Aggregate	Year-to-Date ▼												
Other (specify)		T	260263.87]	* In	-Kind:	: in-k	kind st	aff ti	ime a	& asso	ociate	ed ove	erhea
Full Name (Last, First, Middle Initial) Every Voice					Da	ate of	Red	ceipt						
Mailing Address 1133 19th St NW FI 9						M M	/	D 04		/) 14	Y	
City	State	Zip Code				Transa	actio	on ID	: VN	18AJ	JDH22	:F7		
Washington	DC	20036-3612	2	Amount of Each Receipt this Peri						eriod				
FEC ID number of contributing federal political committee.	С							7		7	1	5000	.00	
Name of Employer	Occupation	1												
Receipt For: 2014 Primary X General Other (specify) ▼	Aggregate	Year-to-Date ▼	260263.87]		ymen tributi		vendo	r-Lui	is Na	avarro	as ar	n In-k	ind
Full Name (Last, First, Middle Initial) Every Voice					Da	ate of	Red	ceipt						
Mailing Address 1133 19th St NW FI 9						м м 11	/	D 1		/	Y Y 20)14	Y	
City	State	Zip Code	-		-	Trans	acti	on ID	: VN	18A .	JDH22	2Q0		
Washington	DC	20036-3612	2		Ar	nount	of I	Each	Rece	eipt	this P	'eriod		
FEC ID number of contributing federal political committee.	С							7		7		6812	2.50	
Name of Employer	Occupation	1												
Receipt For: 2014 Primary X General Other (specify) ▼	Aggregate	Year-to-Date ▼	267076.37		*Pa	aymen	nt to	vendo	or-Ca	atalis	st as a	ın In-k	kind c	ontrik
SUBTOTAL of Receipts This Page (optional).				▶				,			4	6378.	.83	7
OTAL This Period (last page this line number	er only)			•				,		-1	70	3378.	.83	

:97 A = G79 @ G5 B9CIG H9LH F9 @ 5 H98 HC 5 F9DCFH 2G7 < 98 I @ CF + H9A = N5 H= CB

Form/Schedule: SA17 Transaction ID : VN8AJDH22F7

see transaction VN7BA9Y1V84

Form/Schedule: SA17 Transaction ID: VN8AJDH22Q0 see transaction VN7BA9Y1VB8

S	CHEDULE B (FEC Form 3X)					NUMBEF				DAGE	17	OF 50									
	EMIZED DISBURSEMENTS						{:		L	FAGE	. 17	UF 30									
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	.		21b 27	22 28a		23 28b		24 28c	25 29	26 30b									
	y information copied from such Reports and State for commercial purposes, other than using the nar																				
$\left \right\rangle$	NAME OF COMMITTEE (In Full)																				
	Every Voice Action																				
٨	Full Name (Last, First, Middle Initial)					Date of	of Di	churc	omont												
А.	Amalgamated Bank							D			Y Y										
	Mailing Address 275 7th Ave					10	a /		16		2014										
	City	State Zip Code				Trop		ion IF		DAOV	วนเงง										
	New York	NY 10001-6708				ITan	Saci) : VN7	БАЭЛ	2010										
	Purpose of Disbursement Bank fee			001		Amou	nt of	Each	Disbu	rseme	nt this	Period									
	Candidate Name			tego Type		5.00															
	Office Sought: House Disburse Senate President	ment For: 2014 Primary X General Other (specify) ▼																			
	State: District:																				
В.	Full Name (Last, First, Middle Initial) Amalgamated Bank					Date of	of Di	sburs	ement												
						M		D	D /	Y	Y Y	Y									
	Mailing Address 275 7th Ave	State Zip Code				10			17	<u> </u>	2014										
	New York			Tran	sact	tion II	D : VN7	ВА9Х	2HW6												
	Purpose of Disbursement Bank fee			001		Amou	at of	Each	Diebu	reomo	nt thic	Period									
	Candidate Name			tego Type				Each	DISDU	ISCIIIC		0.00									
	Office Sought: House Disburse Senate President State: District:	ment For: 2014 Primary X General Other (specify) ▼		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,					,											
	Full Name (Last, First, Middle Initial)																				
C.	Amalgamated Bank											Date of Disbursement									
	Mailing Address 275 7th Ave				10			20		2014											
	City New York	State Zip Code NY 10001-6708				Tran	sact	tion II) : VN7	BA9X	2HX4										
	Purpose of Disbursement			_																	
	Bank fee Candidate Name			001 tego		Amour	nt of	Each	Disbu	rseme		Period 5.00									
	Office Sought: House Disburse	ment For: 2014		Туре	•		-	7		7		•									
	Senate President	Primary \sum General Other (specify) \checkmark																			
	State: District:																				
⊢	UBTOTAL of Disbursements This Page (optional).					Ľ.		7		7	21	0.00									
ΓŤ	OTAL This Period (last page this line number only)			• 🕨	- L				7	_										

S	CHEDULE B (FEC Form 3X)					NUME					P	AGF	18	OF 50
	EMIZED DISBURSEMENTS	Use separate schedule(s)		hec	k onl	/ one)		•	_				-	
_		for each category of the Detailed Summary Page		×	21b 27		2 8a		23 28b)	24 280	;	25 29	26 30b
	ny information copied from such Reports and States for commercial purposes, other than using the nar													
	NAME OF COMMITTEE (In Full)													
	Every Voice Action													
Δ	Full Name (Last, First, Middle Initial)					De	te o	f Di	sburs	:en	nent			
л.	Amalgamated Bank						M	_			_	Y	Y Y	Y
	Mailing Address 275 7th Ave					1	10	Í		21			014	
	City	State Zip Code				т	rang	act	ion II	л •	VN7B	Δαγλ	G۵۹	
	New York	NY 10001-6708					ana	au		υ.		-374	GAJ	
	Purpose of Disbursement Bank fee		C	001		Am	oun	t of	Each	h [Disburs	emen	it this	Period
	Candidate Name		Cate T	egoi ype	ry/								8	0.00
	Office Sought: House Disburse Senate President Image: Constraint of the senate of the s	ment For: 2014 Primary X General Other (specify) ▼												
	State: District:													
	Full Name (Last, First, Middle Initial)													
В.	Amalgamated Bank						te o	_	sburs	sen	_	Y	Y Y	Y
	Mailing Address 275 7th Ave						10		-	22		2	2014	
	New York	State Zip Code NY 10001-6708				т	rans	sact	tion I	D :	VN7B	A9X4	GB6	
	Purpose of Disbursement Bank fee		C	001	٦	Am	oun	t of	Each	h E	Disburs	emen	it this	Period
	Candidate Name		Cate T	egoi ype					,	l	,		7	0.00
	Senate President	ment For: 2014 Primary X General Other (specify) ▼												
_	State: District:													
C.	Full Name (Last, First, Middle Initial) Harmon, Curran, Speilberg + Eiser	nberg LLP						_	sburs		_		(Y	
	Mailing Address 1726 M St NW Ste 600					1	10 ^M	ĺ		22			014	Y
	City Washington	State Zip Code DC 20036-4523				т	rans	sact	tion I	D:	VN7B	A9X4	НК0	
	Purpose of Disbursement Legal Fees													
	Candidate Name		Cate)01 egoi ype		Am	oun	t of	Each	h [Disburs	emen		Period 1.00
	Senate	ment For: 2014 Primary X General		ype					5		7			
	State: District:	Other (specify)												
s	CUBTOTAL of Disbursements This Page (optional)								3	_	,	_	98	1.00
т	OTAL This Period (last page this line number only)							,					

S	CHEDULE B (FEC Form 3X)			F	OR	LINE 1	UMBER	:		PA	GE 19	OF 50		
IT	EMIZED DISBURSEMENTS		parate schedule(s) n category of the		hec	k only	one)		1.00					
			d Summary Page		×	21b 27	22 28a		23 28b	24 28c	25 29	26 30b		
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the name	ments may me and ad	v not be sold or use dress of any politic	ed by al con	any nmit	v perso ttee to	n for the solicit co	pur ntrib	pose o outions	of solicitin	g contrib h commi	utions ttee.		
\square	NAME OF COMMITTEE (In Full)													
$ \rangle$	Every Voice Action													
Ľ	Full Name (Last, First, Middle Initial)													
Α.	American Express Establishment	Service	S				Date o	_						
	Mailing Address PO Box 53852						10	/	2		2014	Y		
	City	State	Zip Code				Trans	acti	ion ID	: VN7BA	9X88G0			
	Phoenix Purpose of Disbursement	AZ	85072-3852											
	Merchant Deposit Fee			C	03		Amoun	t of	Each	Disburser	nent this	Period		
	Candidate Name			Cate	egor ype				,		28	9.15		
	Office Sought: House Disburse Senate President Image: Senate	ment For: Primary Other (sp	X General											
	State: District:	1												
B	Full Name (Last, First, Middle Initial)						Date o	f Dia	burec	mont				
υ.	Amalgamated Bank							_	D		Y Y	Y		
	Mailing Address 275 7th Ave						10 24 2014							
	City New York	State NY	Zip Code 10001-6708				Trans	sact	ion ID	: VN7BA	9XDPE4			
	Purpose of Disbursement Bank fee			(001		Amoun	t of	Fach	Disburser	nent this	Period		
	Candidate Name			Cate		ry/			,			60.00		
	Office Sought: House Disburse Senate President	ment For: Primary Other (sp	2014 General ecify)		<u> </u>									
_	State: District:	1												
C.	Full Name (Last, First, Middle Initial) Amalgamated Bank						Date o	f Dis	sburse	ement				
	Mailing Address 275 7th Ave						м м 10	/	2		2014	Y		
	City	State	Zip Code				Trans	sact	ion ID	: VN7BA				
	New York Purpose of Disbursement Park for	NY	10001-6708	_	_	_	indik							
	Bank fee Candidate Name			Cate	01 egor ype		Amoun	t of	Each	Disburser		Period 25.00		
	Office Sought: House Disburse Senate President District:	ment For: Primary Other (sp	X General		<u>, , , , , , , , , , , , , , , , , , , </u>							<u>n</u>		
								_						
⊢	CUBTOTAL of Disbursements This Page (optional).							-	<u>,</u>		47	4.15		
ΙT	OTAL This Period (last page this line number only	()					1		7					

SCHEDULE B (FEC Form 3X)			NUMBER: PAGE 20 OF 50								
ITEMIZED DISBURSEMENTS	Use separate schedule(s)) FOR LINE (check only									
ITEWIZED DISBURSEWIENIS	for each category of the Detailed Summary Page	21b	$ \begin{array}{c c} 22 \\ 28a \\ 28b \\ 28c \\ 28c \\ 28c \\ 29 \\ 30b $								
Any information copied from such Reports and or for commercial purposes, other than using t											
NAME OF COMMITTEE (In Full)											
Every Voice Action											
Full Name (Last, First, Middle Initial)			Date of Disbursement								
A. Amalgamated Bank											
Mailing Address 275 7th Ave			10 28 2014								
City	State Zip Code		Transaction ID : VN7BA9XJQR4								
New York	NY 10001-6708	1									
Purpose of Disbursement Bank fee		001	Amount of Each Disbursement this Period								
Candidate Name		Category/ Type	15.00								
Office Sought: House Dis Senate President	bursement For: 2014 Primary X General Other (specify) ▼										
State: District:											
Full Name (Last, First, Middle Initial)											
B. Amalgamated Bank			Date of Disbursement								
Mailing Address 275 7th Ave			10 29 2014								
City New York	StateZip CodeNY10001-6708		Transaction ID : VN7BA9XJQQ6								
Purpose of Disbursement Bank fee		001	Amount of Each Disbursement this Period								
Candidate Name		Category/ Type	95.00								
Senate President	oursement For: 2014 Primary X General Other (specify) ▼										
State: District:											
Full Name (Last, First, Middle Initial) C. Amalgamated Bank			Date of Disbursement								
Mailing Address 275 7th Ave			10 / D D / Y Y Y Y 2014								
City New York	State Zip Code NY 10001-6708		Transaction ID : VN7BA9XP8D7								
Purpose of Disbursement Bank fee		001									
Candidate Name		Category/ Type	Amount of Each Disbursement this Period								
Senate President	bursement For: 2014 Primary X General Other (specify) ▼										
State: District:											
SUBTOTAL of Disbursements This Page (opti	onal)	•••••••	210.00								
TOTAL This Period (last page this line number	only)	•••••• •									

	CHEDULE B (FEC Form 3X)	Use ser	parate schedule(s)	chedule(s) FOR LINE NUMBER: PAGE 2 (check only one)						21	OF	50					
IT	EMIZED DISBURSEMENTS	for each	a category of the I Summary Page	(C		21b 27		22 28a		23 28b		24 28c		25 29	F	26 30b	
	ny information copied from such Reports and State for commercial purposes, other than using the na															3	
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Every Voice Action																
A .	Full Name (Last, First, Middle Initial) Amalgamated Bank						Da	ate c	of Di	isburse	en	nent					
	Mailing Address 275 7th Ave						7	11	/	D	03			014	Y		
	City New York	State NY	Zip Code 10001-6708				٦	ran	sact	tion ID):	VN7BA	9XR	RFR3			
	Purpose of Disbursement Bank fee			C	01		Ar	nour	nt of	Each		Disbursei	men	it this	Peric	bd	
	Candidate Name			Cate	egoi ype	ry/	//20							0.00			
	Office Sought: House Disburse Senate President Image: Senate	ement For: Primary Other (spe	X General														
	State: District:																
В.	Pivotal Payments	-							Date of Disbursement								
	Mailing Address 5000 Legacy Dr Ste 320							11			03		2	2014			
	City Plano	State TX	Zip Code 75024-3112				-	[ran	sact	tion IE):	VN7BA	9XS	SET5			
	Purpose of Disbursement Merchant Deposit Fees			C	003		Ar	nour	nt of	Each	D	Disbursei	men	it this	Peric	bd	
	Candidate Name			Cate T	egoi ype			1		,				16	8.32		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	2014 X General ecify) ▼														
С.	Full Name (Last, First, Middle Initial) Judy Maslen								_	isburse							
	Mailing Address 128 Augusta National Dr							11		C	04			014	Ŷ		
	City Yarmouth Port	State MA	Zip Code 02675-1602					ran	sact	tion ID):	VN7BA	9XS	SFR2			
	Purpose of Disbursement Accounting Consulting Candidate Name			Cate	egoi ype	Amount of Each Disbu					Disbursei	men		Peric 0.00	bd		
	Senate President	ement For: Primary Other (spe	X General		,												
Г	State: District:						-	-	-	_				_	_		
s	UBTOTAL of Disbursements This Page (optional).							-	-	9			-	260	3.32	4	
т	OTAL This Period (last page this line number only	/)									4						

S	CHEDULE B (FEC Form 3X)														22	OE 50	
	EMIZED DISBURSEMENTS	Use separate s						UMBI one)	ER:				P	AGE	22	OF 50	
		for each catego Detailed Summ				21 27	b [22			23 28b		24 280	;	25 29	26 30b	
	y information copied from such Reports and State for commercial purposes, other than using the nar																
\backslash	NAME OF COMMITTEE (In Full)																
	Every Voice Action																
٨	Full Name (Last, First, Middle Initial)							Det	o of	Die	sburs	~m	ant				
А.	The Other 98% Action										DUIS		_		Y Y	N.	
	Mailing Address 13324 SW 220th St								1	ľ		07			2014		
	City	State Zip	Code					-					1/1170		(O)/7		
	Vashon	WA 980	70-6306					Ira	ans	acti	on IL):	VN7B	49X V	GY/		
	Purpose of Disbursement Social Media Consulting			0	01			Δmc	hunt	of	Fach		lichure	amor	nt this	Period	
	Candidate Name			_				AIIIC	Juni	01	Lach		isbuis	SILICI	11 1113	T enou	
				Cate Ty	egoi ype				_		7		7	_	1000	0.00	
		ment For: 2014															
	Senate President	Primary	General														
	State: District:	Other (specify)	•														
_	Full Name (Last, First, Middle Initial)																
В.	Catalist									Dis	sburs				Y Y	- V	
	Mailing Address 1090 Vermont Ave NW Ste 300								11	<i>'</i>	D	11			2014	= Y	
	Washington	'	Code 05-4966					Tr	ans	acti	ion IE	D :	VN7B	A9Y1	VB8		
	Purpose of Disbursement voter file			0	005	٦		Amo	ount	of	Each	D	isburs	emer	nt this	Period	
	Candidate Name			Cate Ty	egoi ype						,		,		681	2.50	
	Office Sought: House Disburse Senate President District:	ment For: 2014 Primary X Other (specify)	General					pd b VN8				ce a	as an i	n-kino	d cont	ribution se	
_	Full Name (Last, First, Middle Initial)																
C.	American Express Establishment	Services								Dis	sburs						
	Mailing Address PO Box 53852								■ 1	/	D	14	/		2014	Y	
	,		Code					Tra	ans	acti	ion IC) :	VN7B	A9Y1	NK8		
	Phoenix Purpose of Disbursement	AZ 850	72-3852														
	Merchant Deposit Fee			0	03			Amo	nunt	of	Each	D)ishurs	emer	nt this	Period	
	Candidate Name			Cate T	egoi ype				June		Luon			-		7.95	
	Senate President	ment For: 2014 Primary X Other (specify)	General		<u>, , , , , , , , , , , , , , , , , , , </u>						,						
_	State: District:																
s	UBTOTAL of Disbursements This Page (optional)					• 🕨					7		,		1682	0.45	
Т	OTAL This Period (last page this line number only)				•					,	2	,		2130	3.92	

S	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 23 C						
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(cheo	ck only ∏21b					
		Detailed Summary Page		27	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$				
Ar or	ny information copied from such Reports and Stater for commercial purposes, other than using the nar	ments may not be sold or use ne and address of any politica	ed by any al commi	y perso ittee to	on for the purpose of soliciting contributions o solicit contributions from such committee.				
\backslash	NAME OF COMMITTEE (In Full)								
	Every Voice Action								
~	Full Name (Last, First, Middle Initial)				Date of Disbursement				
Π.	Every Voice								
	Mailing Address 1133 19th St NW FI 9				11 05 2014				
	City Washington	State Zip Code DC 20036-3612			Transaction ID : VN7BA9XVBQ3				
	Purpose of Disbursement		_						
	Repay Oct 28 Ioan Candidate Name		009	_	Amount of Each Disbursement this Period				
			Catego Type		110000.00				
		ment For: 2014							
	Senate President	Primary General Other (specify)							
	State: District:	··· ·· ·							
В.	Full Name (Last, First, Middle Initial)				Date of Disbursement				
	Mailing Address								
	City	State Zip Code							
	Purpose of Disbursement								
	Candidate Name			_	Amount of Each Disbursement this Period				
			Catego Type						
	Office Sought: House Disburser Senate	ment For: Primary General							
	President	Other (specify)							
	State: District:								
C.	Full Name (Last, First, Middle Initial)				Date of Disbursement				
					M M / D D / Y Y Y Y				
	Mailing Address								
	City	State Zip Code							
	Purpose of Disbursement								
	Candidate Name		Catego Type		Amount of Each Disbursement this Period				
	Senate President	ment For: Primary General Other (specify) ▼			7				
_	State: District:								
s	UBTOTAL of Disbursements This Page (optional)			• •	110000.00				
T-	OTAL This Period (last page this line number only))			110000.00				
1 '	• Inter the second the number only	,		• 🕨					

SCHEDULE B	(FEC Form	3X)			FOR LINE NUMBER: PAGE 24 OF							F 50							
ITEMIZED DISE	BURSEMENT	S		parate schedule(s) a category of the			k only		e)			—							
				Summary Page			21b 27	<u> </u>	22 28a		23 28b		24 28c		25 29	26 30b			
Any information copies or for commercial purp							perso		or the		pose		solicitin	g con	tributi	ons			
	· ·																		
Every Voice																			
Full Name (Last, F A. Many True C									Date of	f Di	sburse	eme	ent						
Mailing Address 10	08 Fairview Ave								10	/	2	20	/ Y	201	14	Ŷ			
City Lead			State SD	Zip Code 57754-1524					Trans	act	ion ID) : V	/N7BA	9X0CI	N6				
Purpose of Disburs Contribution	sement				C)12		А	Amoun	t of	Each	Dis	sbursei	ment 1	this P	eriod			
Candidate Name	opeoryotiyoo				Cat			60000.00											
Many True C Office Sought:	House	Disbursen	nent For:	2014	ľ	ype		1			7	-	7	-					
	Senate President		Primary Other (spe	K General															
State:	District:																		
Full Name (Last, F B. HOUSE MA	,							0	Date of	_			ent			_			
Mailing Address 7	00 13th St NW te 600							10 D D / Y Y 22 20						14	Ŷ				
City Washington			State DC	Zip Code 20005-3960				Transaction ID : VN8AJDF2B54I											
Purpose of Disburs *In-kind: Public Op								А	Amoun	t of	Each	Dis	sburse	ment 1	this P	eriod			
Candidate Name					Cate T	egor ype	ry/				,				7000.	00			
Office Sought: State:	House Senate President District:		nent For: Primary Other (spe	X General				*	In-Kin	d Re	eceive	ed							
Full Name (Last, F C. Stones' Phor								0	Date of	f Dis	sburse	eme	ent						
Mailing Address 13									м м 10	/	D 2	22	/ Y	201	14	Y			
City	ie 200		State	Zip Code 20004-1183					Trans	sact	ion ID) : V	/N7BA	9X4C	76				
Washington Purpose of Disburs Get out the vote ca				20004-1183		001													
Candidate Name					Cat			Α	Amoun	t of	Each	Dis	sbursei		this P 5101.				
Office Sought:	House Senate President		nent For: Primary Other (spe	K General		<u>, , , , , , , , , , , , , , , , , , , </u>					3								
State:	District:							-	_	-	-	_			0404	-0			
SUBTOTAL of Disbu	rsements This Page	(optional)							-	-	7	-	- 7	72	2101.	52			
TOTAL This Period (last page this line nu	umber only)									7	_	7			_			

S	CHEDULE B (FEC Form 3X)		Hule (c) FOR LINE NUMBER: PAGE 2						GE 25	OF 50				
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(c	heck	c only 21b 27	one) 22 28a		23 28b	24 28c	25 X 29	26 30b			
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the nar	ments may not be sold or us ne and address of any politi	sed by cal con	any nmitt	perso tee to	n for the	e pur	pose	of solicitin	ig contrib	utions ittee.			
\land	NAME OF COMMITTEE (In Full)													
	Every Voice Action													
<u>ــــــــــــــــــــــــــــــــــــ</u>	Full Name (Last, First, Middle Initial)					Data								
А.	Many True Conservatives					Date		sburse		(YYY	- V			
	Mailing Address 108 Fairview Ave					10		2	4	2014	- 1			
	City Lead	State Zip Code SD 57754-1524				Tran	sact	ion ID	: VN7BA	9XADT6				
	Purpose of Disbursement Contribution	011011021	0)12		Amou	nt of	Fach	Disburse	ment this	Period			
	Candidate Name		Cate					Luon	Biobaroo		1 onlou			
	Many True Conservatives			ype	y/			7		500	00.00			
	Office Sought: House Disburse Senate President Image: Senate	ment For: 2014 Primary X General Other (specify) ▼												
	State: District:													
в.	Full Name (Last, First, Middle Initial) Many True Conservatives					Date	of Di	sburse						
	Mailing Address 108 Fairview Ave					10		2	27	2014	Y			
	Lead	State Zip Code SD 57754-1524				Trar	Transaction ID : VN7BA9XDQC8							
	Purpose of Disbursement Contribution		C)12		Amou	nt of	Each	Disburse	ment this	Period			
	Candidate Name		Cate		y/					4300	00.00			
	Many True Conservatives Office Sought: House Disburse	ment For: 2014	l'	уре				7	7					
	State: District:	Primary General Other (specify)												
_	Full Name (Last, First, Middle Initial)					Data	of Di	sburse	mont					
0.	Mission Control, Inc.					M	_	D		Y Y	Y			
	Mailing Address 114 Mansfield Hollow Rd # A					10			9	2014				
	Mansfield Center	State Zip Code CT 06250-1316				Trar	sact	ion ID	: VN7BA	9XH1W1				
	Purpose of Disbursement GOTV Mail													
	Candidate Name		Cate	01 egor ype	y/	Amou	nt of	Each	Disburse		Period 04.00			
	Senate President	ment For: 2014 Primary X General Other (specify) ▼						7						
_	State: District:													
⊢	UBTOTAL of Disbursements This Page (optional)					E		7	7	10050	4.00			
Т	OTAL This Period (last page this line number only)						7						

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 26 OF 50
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and Stat or for commercial purposes, other than using the na		d by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
> Every Voice Action			
Full Name (Last, First, Middle Initial)			
A. Murphy Vogel Askew Reilly LLC			Date of Disbursement
Mailing Address 1199 N Fairfax St Ste 220			10 29 2014
City	State Zip Code		Transaction ID : VN7BA9XH2J4
Alexandria Purpose of Disbursement	VA 22314-1437		
Production Costs		001	Amount of Each Disbursement this Period
Candidate Name		Category/	9156.79
Office Sought: House Disburs	ement For: 2014	Туре	3130.73
Senate Sought.	Primary X General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial)			Date of Disbursement
B. Anthony Whittaker			
Mailing Address 1020 Fairmont St NW Apt 9			10 29 2014
City Washington	StateZip CodeDC20001-3948		Transaction ID : VN7BA9Y1V68
Purpose of Disbursement analysis & targeting services		001	Amount of Each Disbursement this Period
Candidate Name		Category/	
		Туре	6000.00
Senate President	ement For: 2014 Primary X General Other (specify) ▼		paid by Every Voice-as an in-kind contribution se VN8AJDH22P2
State: District: Full Name (Last, First, Middle Initial)			
C. Many True Conservatives			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 108 Fairview Ave			10 31 2014
City Lead	StateZip CodeSD57754-1524		Transaction ID : VN7BA9XMHK0
Purpose of Disbursement Contribution		040	
Candidate Name		012	Amount of Each Disbursement this Period
Many True Conservatives		Category/ Type	200.00
•	ement For: 2014		
Senate	Primary X General		
State: District:	Other (specify)		
SUBTOTAL of Disbursements This Page (optional)		••••••	15356.79
TOTAL This Period (last page this line number on	y)	••••••	

SCHEDULE B (FEC Form 3X)				DR LINI	NUMBER: PAGE 27 OF 50				
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the) (cl	heck only one)					
		Detailed Summary Page		27	28a 28b 28c X 29 30b				
	ny information copied from such Reports and State for commercial purposes, other than using the na								
$\left \right\rangle$	NAME OF COMMITTEE (In Full)								
	Every Voice Action								
A.	Full Name (Last, First, Middle Initial) Stones' Phones				Date of Disbursement				
					M M / D D / Y Y Y Y				
	Mailing Address 1309 F St NW Ste 200				10 31 2014				
	City	State Zip Code DC 20004-1183			Transaction ID : VN7BA9XMHN3				
	Washington Purpose of Disbursement	20004-1183			-				
	GOTV Phone Calls		0	01	Amount of Each Disbursement this Period				
	Candidate Name			egory/ /pe	2929.16				
	Office Sought: House Disburse	ement For: 2014 Primary X General							
	President	Other (specify)							
	State: District:								
_	Full Name (Last, First, Middle Initial)								
В.	Every Voice				Date of Disbursement				
	Mailing Address 1133 19th St NW FI 9				11 04 2014				
	City Washington	StateZip CodeDC20036-3612			Transaction ID : VN8AJDH22C3I				
	Purpose of Disbursement in-kind staff time & associated overhead			-	Amount of Each Disbursement this Period				
	andidate Name			Category/					
			Туре		24566.33				
		ement For: 2014							
	Senate President	Primary General Other (specify)			* In-Kind Received				
	State: District:								
_	Full Name (Last, First, Middle Initial)								
C.	Luis Navarro				Date of Disbursement				
	Mailing Address 19121 Treadway Rd		11 04 Y Y Y Y Y 11 04						
	City	State Zip Code			Transaction ID : VN7BA9Y1V84				
	Brookeville Purpose of Disbursement	MD 20833-2736			_				
	Consulting				Amount of Each Disbursement this Period				
	Candidate Name			egory/ /pe	15000.00				
	Office Sought: House Disburse	ement For: 2014							
	Senate	Primary General			pd by Every Voice as an in-kind contribution set				
	State: District:	Other (specify)			VN8AJDH22F7				
s	SUBTOTAL of Disbursements This Page (optional).			🕨	42495.49				
ΙT	OTAL This Period (last page this line number only	/)		••••• ►	7				

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER PAGE 28 OF 50				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	NOMBER:				
	Detailed Summary Page	21b	22 23 24 25 26 28a 28b 28c X 29 30b				
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar		by any perso	on for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
> Every Voice Action							
Full Name (Last, First, Middle Initial)							
A. Cinctus Analytics LLC			Date of Disbursement				
Mailing Address 1626 Beekman PI NW Apt B			11 21 2014				
,	State Zip Code		Transaction ID : VN7BA9XYXJ5				
Washington Purpose of Disbursement	DC 20009-4083						
GOTV Phone Calls		001	Amount of Each Disbursement this Period				
Candidate Name		Category/ Type	1246.53				
Office Sought: House Disburser Senate President	nent For: 2014 Primary X General Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial) B.			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address							
City	State Zip Code						
Purpose of Disbursement			Amount of Each Disbursement this Period				
Candidate Name		Catagory	Amount of Each Disbursement this Period				
		Category/ Type					
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial)			Date of Disbursement				
Mailing Address							
City	State Zip Code						
Purpose of Disbursement							
Candidate Name		Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disburset Senate President District:	nent For: Primary General Other (specify) ▼						
SUBTOTAL of Disbursements This Page (optional)		····· ►	1246.53				
TOTAL This Period (last page this line number only))	•••••• •	231704.33				

SCHEDULE C (FEC Form 3X) 5

LO	A	٧S
----	---	----

Use separate schedule(s)	PAGE	29	OF	50
for each category of the Detailed Summary Page	FOR	LINE	13 OF	FORM 3X

OF 50

NAME OF COMMITTEE (In Full) Every Voice Action	Transaction ID : VN8AJDF0MV0L						
LOAN SOURCE Full Name (Last, First, Middle Initial) Every Voice Mailing Address 1133 19th St NW Fl 9	Election: 2014 Primary General Other (specify)						
	code 20036-3612						
Original Amount of Loan Cumulative Payment T							
110000.00	110000.00 0.00						
TERMS Date Incurred Date Dute	e Interest Rate Secured:						
	none % (apr) Yes X No						
List All Endorsers or Guarantors (if any) to Loan Source							
1. Full Name (Last, First, Middle Initial)	Name of Employer						
Mailing Address	Occupation						
City State ZIP Code	Amount Guaranteed Outstanding:						
2. Full Name (Last, First, Middle Initial)	Name of Employer						
Mailing Address	Occupation						
City State ZIP Code	Amount Guaranteed Outstanding:						
3. Full Name (Last, First, Middle Initial)	Name of Employer						
Mailing Address	Occupation						
City State ZIP Code	Amount Guaranteed Outstanding:						
4. Full Name (Last, First, Middle Initial)	Name of Employer						
Mailing Address	Occupation						
City State ZIP Code	Amount Guaranteed Outstanding:						
SUBTOTALS This Period This Page (optional)	SUBTOTALS This Period This Page (optional)						
TOTALS This Period (last page in this line only)							
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.							

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 30 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Every Voice Action		C C00566208
Check if 24-hour report 48-hour report Ne	w report Amends report file	d on
Full Name of Payee		Date of Public Distribution/Dissemination
The New Media Firm		10 17 2014
Mailing Address 1730 Rhode Island Ave NW		Amount
Ste 213		Amount
City State	Zip Code	40000.00
Washington DC	20036-3118	Transaction ID : VN7BA9WTPZ7 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising	Category/ Type 004	10 / D D / Y Y Y Y 10 16 / 2014
Name of Federal Candidate	Support Offic	ze Sought: X House District: 26
Carlos Curbelo	X Oppose	President Senate State: FL
Calendar Year-To-Date	Disk 125446.25 2014	oursement For: Primary X General
Per Election for Office Sought	123440.23	Other (specify)
Full Name of Payee The New Media Firm		Date of Public Distribution/Dissemination
		10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1730 Rhode Island Ave NW		Amount
Ste 213		
City State	Zip Code	48300.00
Washington DC	20036-3118	Transaction ID : VN7BA9WTQ13 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising	Category/ Type 004	10 / 16 / Y Y Y Y 2014
Name of Federal Candidate	Support Offic	ce Sought: X House District: 02
Marilinda Garcia	X Oppose	President Senate State:
Calendar Year-To-Date		pursement For: Primary X General
Per Election for Office Sought	147976.11 201	⁴ Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	•••••	88300.00
(b) SUBTOTAL of Unitemized Independent Expenditures	\	
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expend with, or at the request or suggestion of, any candidate or auth party committee) any political party committee or its agent.		
David Donnelly [El	ectronically Filed] Date	12 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 31 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
Every Voice Action		C C00566208
Check if 24-hour report 48-hour report New	report Amends repor	t filed on
Full Name of Payee Mack Sumner Communications		Date of Public Distribution/Dissemination
Mack Summer Communications		10 / D D / Y Y Y Y 10 21 2014
Mailing Address 2001 N Beauregard St		Amount
Ste 420		
City State	Zip Code	42091.14
Alexandria VA	22311-1750	Transaction ID : VN7BA9WTPS0 Date of Disbursement or Obligation
Purpose of Expenditure Mail	Category/ Type 004	10 / D D / Y Y Y Y Y 10 17 2014
Name of Federal Candidate	Support	Office Sought: House District:
Mitch McConnell		President X Senate State: KY
Calendar Year-To-Date	258749.50	Disbursement For: Primary X General
Per Election for Office Sought	238749.30	Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
Mack Sumner Communications		10 / Y Y Y Y 10 20 2014
Mailing Address 2001 N Beauregard St		
Ste 420		Amount
City State	Zip Code	600.00
Alexandria VA	22311-1750	Transaction ID : VN7BA9WX8X6 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising	Category/ Type 004	10 / D D / Y Y Y Y 10 17 2014
Name of Federal Candidate	Support	Office Sought: X House District: 02
Marilinda Garcia	X Oppose	President Senate State: <u>NH</u>
Calendar Year-To-Date	147076 11	Disbursement For: Primary X General
Per Election for Office Sought	147976.11	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		▶ 42691.14
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
(-,		
Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or author party committee) any political party committee or its agent.		
David Donnelly	tunning II. Ett. 11	M.M./D.D./YYYYY
Signature	tronically Filed] Date	12 04 2014
Ŭ		

ITEMIZED INDEPENDENT EXPEND	TURES				PAGE 32 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC ID	DENTIFICATION NUMBER V
Every Voice Action				С	C00566208
Check if 24-hour report 48-hour re	eport New rep	ort Amends repo		M /	
Full Name of Payee			Date of	of Public	c Distribution/Dissemination
New Partners Consulting			M	10	20 / Y Y Y Y 20 2014
Mailing Address 1250 St NW				-	
Ste 200			Amou	nt	
City	State	Zip Code			40000.00
Washington	DC	20005-5994			D: VN7BA9WX704 ursement or Obligation
Purpose of Expenditure Online Advertising		Category/ Type 004		10	/ D D / Y Y Y Y 17 / 2014
Name of Federal Candidate		Support	Office Sough	ıt:	House District:
Mitch McConnell		X Oppose	Preside		Senate State: KY
Calendar Year-To-Date Per Election for Office Sought		258749.50	Disbursemen 2014		Primary X General
					pecify) ►
Full Name of Payee Revolution Messaging				Л М .	c Distribution/Dissemination
Mailing Address 1730 Rhode Island Ave	NW		L	10	20 2014
Ste 301			Amou	int	
City	State	Zip Code			31218.96
Washington	DC	20036-3120			D: VN7BA9WX6M1 ursement or Obligation
Purpose of Expenditure Online Advertising		Category/ Type 004		10	/ ^D 17 / ^Y 2014
Name of Federal Candidate		Support	Office Sough	nt:	K House District: 07
Doug Ose		X Oppose	Preside	ent	Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought		151223.78	Disbursemen 2014		Primary X General
				other (sp	pecify) ►
(a) SUBTOTAL of Itemized Independent E	xpenditures				71218.96
	, portanti co			-7-	
(b) SUBTOTAL of Unitemized Independen	t Expenditures		• •		
			_		
(c) TOTAL Independent Expenditures			•		1 1 495 1 1 495 1
Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commi	ny candidate or authorized				
David Donnelly	[F]octron	ically Filed]	10 /		/ 2014
Signature	Election	Date	, 12	04	2014

ITEMIZED INDEPENDENT EXPENDIT	URES			PAGE 33 OF FOR LINE 24 OF F	50 FORM 3X
NAME OF COMMITTEE (In Full)			6	FEC IDENTIFICATION NUM	/BER ▼
Every Voice Action				C C00566208	
Check if 24-hour report 48-hour rep	port New repo	ort Amends repo		M / D D / Y Y	YY
Full Name of Payee			Date of	f Public Distribution/Dissemi	ination
Revolution Messaging) 14
Mailing Address 1730 Rhode Island Ave N	 W				
Ste 301			Amoun	t	
City	State	Zip Code		400	00.00
Washington	DC	20036-3120		tion ID : VN7BA9WX6S9 f Disbursement or Obligatio	n
Purpose of Expenditure Online Advertising		Category/ Type 004	M	- M / D D / Y Y)14
Name of Federal Candidate		Support	Office Sought:	: X House District:	18
NAN HAYWORTH		X Oppose	Presider		
Calendar Year-To-Date Per Election for Office Sought		126876.79	Disbursement	For: Primary X	General
Full Name of Payee				f Public Distribution/Dissem	ination
Buying Time			М	M / D D / Y Y	Y Y
Mailing Address 650 Massachusetts Ave N			_ L	10 28 20	014
Ste 210	IVV		Amoun	it	
City	State	Zip Code		4204	47.00
Washington	DC	20001-3728		tion ID : VN7BA9X08Q2 f Disbursement or Obligatio	n
Purpose of Expenditure Radio Advertising		Category/ Type 004	М	M / D D / Y Y	2014
Name of Federal Candidate		Support	Office Sought	: X House District:	07
Doug Ose		X Oppose	Presider		CA
Calendar Year-To-Date		151223.78	Disbursement	For: Primary X	General
Per Election for Office Sought	TTTTTTT			her (specify) ►	
(a) SUBTOTAL of Itemized Independent Ex	penditures		•	82047	.00
(b) SUBTOTAL of Unitemized Independent	Expenditures		•		
(c) TOTAL Independent Expenditures			•		-
Under penalty of perjury I certify that the ir with, or at the request or suggestion of, any party committee) any political party committe	v candidate or authorized				
David Donnelly	[Electron	ically Filed]	12	04 / Y Y Y Y Y 04 2014	
Signature		Date		2014	

ITE	MIZED INDEPENDENT EXPEND	TURES				PAGE 34 FOR LINE 2	OF 50 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC I		ON NUMBER V
E	very Voice Action				С	C00566208	
Ch	eck if 24-hour report 48-hour re	eport New repo	ort Amends repo	ort filed on	M = M	/ D D /	Y Y Y Y Y
	Full Name of Payee			Date	of Publi	ic Distribution/	Dissemination
	Mack Sumner Communications				^M 10	/ D D / 21	2014
	Mailing Address 2001 N Beauregard St			Amo	ount		
	Ste 420		7: 0 1				00007.44
	City Alexandria	State VA	Zip Code 22311-1750			D : VN7BA9X	
	Purpose of Expenditure Mail		Category/ Type 004		^M 10	ursement or C	2014
	Name of Federal Candidate		Support	Office Sou	aht:	X House	District: 02
	Marilinda Garcia		X Oppose	Presi		Senate	State: NH
	Calendar Year-To-Date Per Election for Office Sought	7 7 7	147976.11	Disburseme 2014		Primary	General
	Full Name of Payee			Date	e of Publ	ic Distribution	/Dissemination
	Mack Sumner Communication	IS			^M 10	/ D D / 21	2014
	Mailing Address 2001 N Beauregard St			Amo			
	Ste 420			And	burn		
	City	State	Zip Code				23991.18
	Alexandria	VA	22311-1750			D: VN7BA9X	
	Purpose of Expenditure Mail		Category/ Type 004		^M 10	/ <u>21</u> /	2014 Y
	Name of Federal Candidate		Support	Office Sou	ght:	X House	District: 24
	John Katko		X Oppose	Presi	dent	Senate	State: <u>NY</u>
	Calendar Year-To-Date Per Election for Office Sought		87130.86	Disburseme 2014		Primary	r 🗙 General
	(a) SUBTOTAL of Itemized Independent E	xpenditures		▶			50628.62
	(b) SUBTOTAL of Unitemized Independen	t Expenditures		·· •			
	(c) TOTAL Independent Expenditures			··· •			
	Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commit	ny candidate or authorized					
	David Donnelly	(11) ·	ioglla Fil-JI	M		/ Y Y	
	Signature	[Electron	<i>ically Filed]</i> Date	e 12	04	201	4

ITEMIZED INDEPENDENT EXPEND	DITURES			PAGE 35 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Every Voice Action				C00566208
			C	00000208
Check if24-hour report48-hour	report New rep	ort Amends repo	ort filed on	
Full Name of Payee			Date of Pub	lic Distribution/Dissemination
Mission Control, Inc.			^M 10	/ D D / Y Y Y Y 22 2014
Mailing Address 114 Mansfield Hollow F	₹d		Amount	
# A	01-1-	7. 0. 4.		05440.04
City Mansfield Center	State CT	Zip Code 06250-1316	Transaction	25442.84 ID : VN7BA9X2C49
		00200-1010		oursement or Obligation
Purpose of Expenditure Mail		Category/ Type 004	10 ^M	/ D D / Y Y Y Y 21 / 2014
Name of Federal Candidate		Support	Office Sought:	K House District: 07
Doug Ose		X Oppose	President	Senate State: CA
Calendar Year-To-Date		151223.78	Disbursement For: 2014	Primary X General
Per Election for Office Sought		151223.78		specify) ►
Full Name of Payee			Date of Pub	olic Distribution/Dissemination
Mission Control, Inc.			M M 10	/ D D / Y Y Y Y 22 2014
Mailing Address 114 Mansfield Hollow F	sq.			
# A			Amount	
City	State	Zip Code		26300.00
Mansfield Center	СТ	06250-1316		ID: VN7BA9X2C80 bursement or Obligation
Purpose of Expenditure Mail		Category/ Type 004	10 ^M	/ D D / Y Y Y Y 21 2014
Name of Federal Candidate		Support	Office Sought:	House District: 26
Carlos Curbelo		X Oppose	President	Senate State: FL
Calendar Year-To-Date			Disbursement For:	Primary X General
Per Election for Office Sought		125446.25	2014 Other (specify) ►
(a) SUBTOTAL of Itemized Independent	Expenditures		•	51742.84
(b) SUBTOTAL of Unitemized Independe	nt Expenditures		•	
(c) TOTAL Independent Expenditures				
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			
David Donnelly	[Electron	ically Filed]	40 04	2014
Signature		Date	12 04	2014

ITEMIZED INDEPENDENT EXPENDITUR	(ES				PAGE 36 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)					NTIFICATION NUMBER V
Every Voice Action					00566208
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	M = M /	
Full Name of Payee Mission Control, Inc.			Da	ate of Public	Distribution/Dissemination
				10	22 / Y Y Y Y 2014
Mailing Address 114 Mansfield Hollow Rd			Ar	nount	
# A	Ctata	Zin Onda	F		20000 66
City Mansfield Center	State CT	Zip Code 06250-1316	Tra	nsaction ID :	26089.66 VN7BA9X2CC0
Purpose of Expenditure				ate of Disburs	sement or Obligation
Mail		Category/ Type 004		10	^D 21 / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sc	ought: 🗙	House District: 18
NAN HAYWORTH		X Oppose	Pre	esident	Senate State: <u>NY</u>
Calendar Year-To-Date		126876.79	Disburser	ment For:	Primary X General
Per Election for Office Sought				Other (spe	cify) ▶
Full Name of Payee Revolution Media Enterprises			D		Distribution/Dissemination
				10	^D 21 / Y Y Y Y 2014
Mailing Address 1306 Pennsylvania Ave SE			A	mount	
Apt 101 City	State	Zip Code	— Г		6000.00
Washington	DC	20003-3156			: VN7BA9X25H6 sement or Obligation
Purpose of Expenditure Online Advertising Production		Category/ Type 004		10 /	
Name of Federal Candidate		Support	Office So	ought:	House District:
Mitch McConnell		X Oppose	Pre	esident X	Senate State: KY
Calendar Year-To-Date		258749.50	Disburse 2014	ment For:	Primary X General
Per Election for Office Sought		258749.50	2014	Other (spe	cify) ►
			_		
(a) SUBTOTAL of Itemized Independent Expen	ditures		• •	-7-	32089.66
(b) SUBTOTAL of Unitemized Independent Exp	andituras		. Г		
(c) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	ndidate or authorized				
David Donnelly	[Electroi	nically Filed] Date	12 ^M	/ D D 04	2014
Signature					

ITEMIZED INDEPENDENT EXPEND	ITURES			L 1	PAGE 37 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC ID	ENTIFICATION NUMBER V
Every Voice Action				C	00566208
Check if 24-hour report 48-hour report	eport New rep	ort Amends repo		M /	
Full Name of Payee			Date of	of Public	Distribution/Dissemination
Stones' Phones			М	10 /	21 Y Y Y Y Y 21 2014
Mailing Address 1309 F St NW			L	10	21
Ste 200			Amou	nt	
City	State	Zip Code			7769.05
Washington	DC	20004-1183			: VN7BA9X25W3 rsement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 001		10 ^M /	21 / Y Y Y Y 21 / 2014
Name of Federal Candidate		Support	Office Sough	t: 🗡	House District: 18
NAN HAYWORTH		X Oppose	Preside		Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought		126876.79	Disbursemen 2014		Primary X General
		1 1 /0 1		ther (spe	
Full Name of Payee Stones' Phones				of Public	Distribution/Dissemination
Mailing Address				10	21 2014
- 1309 F St NW			Amou	nt	
Ste 200	State	Zip Code			7769.05
Washington	DC	20004-1183			: VN7BA9X25X1 rsement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 001		10 /	D 21 / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sough	t: 🔉	K House District: 26
Carlos Curbelo		X Oppose	Preside		Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		125446.25	Disbursemen		Primary General
				ther (sp	ecity) 🕨
(a) SUBTOTAL of Itemized Independent E	Expenditures				15538.10
				-7-	7
(b) SUBTOTAL of Unitemized Independen	t Expenditures		• •		
(a) TOTAL Independent Expanditures			_		
(c) TOTAL Independent Expenditures				-7-	
Under penalty of perjury I certify that the with, or at the request or suggestion of, an party committee) any political party commi	ny candidate or authorized				
David Donnelly	Flortron	ically Filed]	10 /		/ 2014
Signature	Election	Date	, 12	04	2014

ITEMIZED INDEPENDENT EXPENI	DITURES			PAGE 38 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER ▼
Every Voice Action				
			C	C00566208
Check if 24-hour report 48-hour	report New rep	port Amends repo	ort filed on	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date of P	ublic Distribution/Dissemination
Buying Time			M 10	/ D D / Y Y Y Y 22 2015
Mailing Address 650 Massachusetts Av	e NW		Amount	
Ste 210		7.0.1		450005.00
City Washington	State DC	Zip Code 20001-3728	Transactio	156395.00 n ID : VN7BA9WFYC7
		20001-3720		isbursement or Obligation
Purpose of Expenditure Television Advertising		Category/ Type	10 ^M	/ D D / Y Y Y Y 22 / 2014
Name of Federal Candidate		Support	Office Sought:	House District:
Mike Rounds		X Oppose	President	Senate State: SD
Calendar Year-To-Date Per Election for Office Sought	· · · · · · · · ·	1218633.89	Disbursement Fo	or: Primary X General
				(specify)
Full Name of Payee			Date of P	Public Distribution/Dissemination
Buying Time			10	22 2014
Mailing Address 650 Massachusetts Av	e NW		Amount	
Ste 210			Amount	
City	State	Zip Code		167700.00
Washington	DC	20001-3728		on ID : VN7BA9X0CK0 Disbursement or Obligation
Purpose of Expenditure Television Advertising		Category/ Type	M 10	
Name of Federal Candidate		Support	Office Sought:	House District:
Mike Rounds		X Oppose	President	Senate State: SD
Calendar Year-To-Date Per Election for Office Sought	· · · · · · · · ·	1218633.89	Disbursement Fo	or: Primary X General
			Other	r (specify) ►
(a) SUBTOTAL of Itemized Independent	Expenditures			324095.00
				7 7 7
(b) SUBTOTAL of Unitemized Independe	nt Expenditures		• •	* * * * * *
(c) TOTAL Independent Expenditures			·· •	A. I. I. A. I. A. I.
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			
David Donnelly	[Electron	nically Filed]	M / D	
Signature		Date	, <u>12</u> (2014

ITEMIZED INDEPENDENT EXPEND	TURES			PAGE 39 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			I	ENTIFICATION NUMBER V
Every Voice Action				00566208
				00000200
Check if 24-hour report 48-hour re	eport New rep	ort Amends repo	rt filed on	
Full Name of Payee			Date of Public	Distribution/Dissemination
Buying Time			M M /	D D / Y Y Y Y 22 2014
Mailing Address 650 Massachusetts Ave	NW		Amount	
Ste 210		7. 0. 1		440000.00
City	State DC	Zip Code 20001-3728	Transaction ID	110000.00
Washington		20001-3728		sement or Obligation
Purpose of Expenditure Television Advertising		Category/ Type 004	10 ^{//}	D D / Y Y Y Y 22 / 2014
Name of Federal Candidate		Support	Office Sought:	House District:
Mike Rounds		X Oppose	President X	Senate State: SD
Calendar Year-To-Date Per Election for Office Sought		1218633.89	Disbursement For:	Primary X General
			Other (spe	cify) ►
Full Name of Payee Mack Sumner Communication	00		Date of Public	Distribution/Dissemination
	15		10 ^M	22 / Y Y Y Y 2014
Mailing Address 2001 N Beauregard St			Amount	
Ste 420			Amount	
City	State	Zip Code		41825.36
Alexandria	VA	22311-1750		: VN7BA9X0CM8 sement or Obligation
Purpose of Expenditure Mail		Category/ Type 004	10 /	^D 22 / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sought:	House District:
Mitch McConnell		X Oppose	President X	Senate State: <u>KY</u>
Calendar Year-To-Date		258749.50	Disbursement For:	Primary X General
Per Election for Office Sought		200740.00	Other (spe	ecify) ►
(a) SUBTOTAL of Itemized Independent E	xpenditures		•	151825.36
(b) SUBTOTAL of Unitemized Independen	t Expenditures		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commi	ny candidate or authorized			
David Donnelly	Flootron	ically Filed]		2014
Signature		Date	12 04	2014

ITEMIZED INDEPENDENT EXPENDIT	URES			PAGE 40 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER V
Every Voice Action				C C00566208
Check if 24-hour report 48-hour rep	port New rep	ort Amends repo		M / D D / Y V V V V V V V
Full Name of Payee			Date c	of Public Distribution/Dissemination
Stones' Phones			М	10 22 2014
Mailing Address 1309 F St NW			L	
Ste 200			Amour	nt
City	State	Zip Code		2626.99
Washington	DC	20004-1183		ction ID : VN7BA9X4C50
Purpose of Expenditure Phone Calls		Category/ Type 001	M	of Disbursement or Obligation
Name of Federal Candidate		Support	Office Sought	t: X House District: 02
Marilinda Garcia		X Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	· · · · · · ·	147976.11	Disbursement 2014	t For: Primary ther (specify) ▶
Full Name of Payee				of Public Distribution/Dissemination
Mack Sumner Communication	S			M / D D / Y Y Y Y
Mailing Address			— L	10 24 2014
2001 N Beauregard St			Amour	nt
Ste 420 City	State	Zip Code		27221.48
Alexandria	VA	22311-1750		ction ID : VN7BA9XADN7 of Disbursement or Obligation
Purpose of Expenditure Mail		Category/ Type 004	М	
Name of Federal Candidate		Support	Office Sough	t: X House District: 02
Marilinda Garcia		X Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought		147976.11	Disbursement 2014	t For: Primary ther (specify) ►
 (a) SUBTOTAL of Itemized Independent Ex (b) SUBTOTAL of Unitemized Independent (c) TOTAL Independent Expenditures 	Expenditures		•	29848.47
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any	ndependent expenditures	reported herein were	not made in c	
party committee) any political party committee	e or its ayerit.			
David Donnelly	[Electron	ically Filed] Date	12 /	04 <u>Y Y Y Y Y</u> 04 2014
Signature				

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 41 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Every Voice Action		C C00566208
Check if 24-hour report 48-hour report New rep	ort Amends report	filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Mack Sumner Communications		10 / Y Y Y Y 2014
Mailing Address 2001 N Beauregard St		Amount
Ste 420		
City State Alexandria VA	Zip Code 22311-1750	23385.94 Transaction ID : VN7BA9XADP5
	22311-1750	Date of Disbursement or Obligation
Purpose of Expenditure Mail	Category/ Type 004	10 / D D / Y Y Y Y 2014
Name of Federal Candidate	Support	Office Sought: X House District: 24
John Katko	Oppose	President Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary X General 2014 Other (specify) ►
Full Name of Payee		Date of Public Distribution/Dissemination
Mission Control, Inc.		10 / D D / Y Y Y Y 2014
Mailing Address 114 Mansfield Hollow Rd		
# A		Amount
City State	Zip Code	23638.12
Mansfield Center CT	06250-1316	Transaction ID : VN7BA9XADW2 Date of Disbursement or Obligation
Purpose of Expenditure Mail	Category/ Type 004	M 10 / D D / Y Y Y Y 2014
Name of Federal Candidate	Support	Office Sought: X House District: 07
Doug Ose	X Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary X General
		Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures		47024.06
(b) SUBTOTAL of Unitemized Independent Expenditures		►
(a) TOTAL 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.		
David Donnelly [Electron	ically Filed]	12 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	Date	

ITE	EMIZED INDEPENDENT EXPEND	ITURES				PAGE 42 OF FOR LINE 24 OF F	50 FORM 3X
	AME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NU	MBER 🔻
E	Every Voice Action				С	C00566208	
Ch	neck if 24-hour report 48-hour	report New repo	ort Amends repo	ort filed on	M = M	/ D D / Y Y	YYY
	Full Name of Payee			D	ate of Publ	ic Distribution/Dissem	ination
	Mission Control, Inc.				^M 10		014 Y
	Mailing Address 114 Mansfield Hollow R	d		A	mount		
	# A						
	City Mansfield Center	State CT	Zip Code 06250-1316	Tra	Insaction I	235 D : VN7BA9XADZ6	64.20
	Purpose of Expenditure			D		oursement or Obligation	
	Mail		Category/ Type 004		10 ^M		014
	Name of Federal Candidate		Support	Office So	ought:	X House District	26
	Carlos Curbelo		X Oppose	Pro Pro	esident	Senate State	FL
	Calendar Year-To-Date Per Election for Office Sought		125446.25	Disburse 2014	ment For:	Primary X	General
	Full Name of Payee	,				lic Distribution/Dissen	ination
	Mission Control, Inc.				M M	/ D D / Y Y	YY
	Mailing Address 114 Mansfield Hollow R				10	24 2	014
	# A			A	mount		
	City	State	Zip Code			269	64.42
	Mansfield Center	СТ	06250-1316			D: VN7BA9XAE29 oursement or Obligation	on
	Purpose of Expenditure Mail		Category/ Type 004		^M 10		2014
	Name of Federal Candidate		Support	Office S	ought:	X House District	18
	NAN HAYWORTH		X Oppose	Pr	esident	Senate State	: <u>NY</u>
	Calendar Year-To-Date Per Election for Office Sought		126876.79	Disburse 2014	ement For:	Primary X	General
	(a) SUBTOTAL of Itemized Independent I	Expenditures		• •		50528	3.62
	(b) SUBTOTAL of Unitemized Independent	nt Expenditures		•••			
	(c) TOTAL Independent Expenditures						
	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					
	David Donnelly	[Electron	ically Filed] Date	e 12	/ D D 04	2014	
	Signature						

TEMIZED INDEPENDENT EXPENDITURES					PAGE 43 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V
Every Voice Action				С	C00566208
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M = M	/ D = D / Y = Y = Y = Y
Full Name of Payee			Dat	e of Publi	ic Distribution/Dissemination
Mack Sumner Communications				^M 10	/ D D / Y Y Y Y 27 2014
Mailing Address 2001 N Beauregard St					
Ste 420			Am	ount	
	State	Zip Code			15000.00
Alexandria	VA	22311-1750			D: VN7BA9XDKB4 ursement or Obligation
Purpose of Expenditure Online Advertising		Category/ Type 004			/ 27 / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sou	aht:	X House District: 24
John Katko		X Oppose		ident	Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought		87130.86	Disbursem 2014		Primary X General
				Other (s	
Full Name of Payee Revolution Media Enterprises			Dat	e of Publ	Lic Distribution/Dissemination
Mailing Address				10	27 2014
1306 Pennsylvania Ave SE			Am	ount	
Apt 101 City	State	Zip Code			6000.00
Washington	DC	20003-3156			D: VN7BA9XDJR4 bursement or Obligation
Purpose of Expenditure Online Advertising Production		Category/ Type 004		10 ^M	/ D D / Y Y Y Y 27 2014
Name of Federal Candidate		Support	Office Sou	ight:	House District:
Mitch McConnell		X Oppose	Pres	ident	Senate State: KY
Calendar Year-To-Date Per Election for Office Sought		258749.50	Disbursem 2014		Primary X General
(a) SUBTOTAL of Itemized Independent Expenditures			. Г	Other (s	21000.00
				-7-	21000.00
(b) SUBTOTAL of Uniternized Independent Expenditure	€S		•		
(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 ag	or authorized				
David Donnelly	[Electroni	cally Filed]	^M 12	/ 04	/ Y Y Y Y Y 2014
Signature	_	_ Date			

ITE	EMIZED INDEPENDENT EXPENDITU	JRES				PAGE 44 OF 50 FOR LINE 24 OF FORM 3X	
	ME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V	
E	Every Voice Action				С	C00566208	
Ch	neck if 24-hour report 48-hour repo	ort New repo	ort Amends repo	ort filed on	M = M	/ D D / Y Y Y Y	
	Full Name of Payee Murphy Vogel Askew Reilly LLC			D	M M	ic Distribution/Dissemination	Ī
	Mailing Address 1199 N Fairfax St			A	10 mount	28 2014	
	Ste 220						ĺ.
	City Alexandria	State VA	Zip Code 22314-1437			1975.02 D : VN7BA9XH293 ursement or Obligation	1
	Purpose of Expenditure Radio Ad Production		Category/ Type 004		10 ^M	/ D D / Y Y Y Y 28 / 2014	
	Name of Federal Candidate		Support	Office S	ought:	X House District: 07	
	Doug Ose		X Oppose		esident	Senate State: CA	-
	Calendar Year-To-Date Per Election for Office Sought		151223.78	Disburse 2014	ement For:	Primary X General pecify) ►	_
	Full Name of Payee Buying Time			C	M M	lic Distribution/Dissemination	1
	Mailing Address 650 Massachusetts Ave NW	V		Α	10 Imount	29 2014	
	Ste 210						i
	City Washington	State DC	Zip Code 20001-3728			41707.60 D : VN7BA9XFKB9 bursement or Obligation	1
	Purpose of Expenditure Radio Advertising		Category/ Type 004		10	/ 29 / 2014	
	Name of Federal Candidate		Support	Office S	ought:	House District:	_
	Larry Pressler		X Oppose	PI	resident	Senate State: SD	-
	Calendar Year-To-Date Per Election for Office Sought		1218633.89	Disburse 2014	ement For:	Primary X General	_
	(a) SUBTOTAL of Itemized Independent Expe	enditures		-		43682.62	
	(b) SUBTOTAL of Uniternized Independent E	xpenditures		- •			
	(c) TOTAL Independent Expenditures			·· ►			
	Under penalty of perjury I certify that the ind with, or at the request or suggestion of, any o party committee) any political party committee	candidate or authorized					
	David Donnelly	[Electron	<i>ically Filed]</i> Date	e 12	/ D D 04	2014	
	Signature						

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 45 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER V
Every Voice Action		C C00566208
Check if 24-hour report 48-hour report New rep	ort Amends repor	
Full Name of Payee Buying Time		Date of Public Distribution/Dissemination
		10 / D D / Y Y Y Y 29 2014
Mailing Address 650 Massachusetts Ave NW		Amount
Ste 210		
City State	Zip Code	53440.00
Washington DC	20001-3728	Transaction ID : VN7BA9XFKC7 Date of Disbursement or Obligation
Purpose of Expenditure TV Advertising	Category/ Type 004	M M / D D / Y Y Y Y Y 10 29 2014
Name of Federal Candidate	Support	Office Sought: House District:
Larry Pressler	X Oppose	President State: SD
Calendar Year-To-Date		Disbursement For: Primary X General
Per Election for Office Sought	1210035.09	Other (specify) ►
Full Name of Payee		Date of Public Distribution/Dissemination
Buying Time		10 / ^y y y y y 2014
Mailing Address 650 Massachusetts Ave NW		Amount
Ste 210		
City State	Zip Code	53440.00 Transaction ID : VN7BA9XH3Z0
Washington DC	20001-3728	Date of Disbursement or Obligation
Purpose of Expenditure TV Advertising	Category/ Type 004	10 / 29 / Y Y Y Y 2014
Name of Federal Candidate	X Support	Office Sought: House District:
Rick Weiland	Oppose	President X Senate State: SD
Calendar Year-To-Date	4040022.00	Disbursement For: Primary X General
Per Election for Office Sought	1218633.89	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures		▶ 106880.00
(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.		
David Donnelly	ically Filed]	
Signature	Date	12 04 2014

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 46 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Every Voice Action		C C00566208
		M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report New	report Amends report f	iled on
Full Name of Payee Murphy Vogel Askew Reilly LLC		Date of Public Distribution/Dissemination
Mailing Address		10 / D D / Y Y Y Y 2014
1199 N Fainax St		Amount
Ste 220 City State	Zip Code	1856.13
Alexandria VA	22314-1437	Transaction ID : VN7BA9XH2A1 Date of Disbursement or Obligation
Purpose of Expenditure Radio Ad Production	Category/ Type 004	10 / 29 / 2014
Name of Federal Candidate	Support O	ffice Sought: House District:
Larry Pressler	X Oppose	President X Senate State: SD
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary X General 014 Other (specify) ►
Full Name of Payee		Date of Public Distribution/Dissemination
Murphy Vogel Askew Reilly LLC		10 29 2014
Mailing Address 1199 N Fairfax St		Amount
Ste 220		
City State Alexandria VA	Zip Code 22314-1437	6473.50 Transaction ID : VN7BA9XH416 Date of Disbursement or Obligation
Purpose of Expenditure TV Ad Production	Category/ Type 004	Date of Disbursement of Obligation 10 29 2014
Name of Federal Candidate	X Support C	Vffice Sought: House District:
Rick Weiland	Oppose	President X Senate State: SD
Calendar Year-To-Date Per Election for Office Sought		old Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	·····	8329.63
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or authori. party committee) any political party committee or its agent.		
David Donnelly [Elect	ronically Filed] Date	12 04 YEYEY 12 04 2014
Signature		

ITE	EMIZED INDEPENDENT EXPENDITURES					PAGE 47 FOR LINE 24	OF 50 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC ID	ENTIFICATIO	N NUMBER 🔻
E	every Voice Action				Cc	00566208	
Ch	eck if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M /	D D /	Y Y Y Y Y
	Full Name of Payee				Date of Public	Distribution/D	iccomination
	Murphy Vogel Askew Reilly LLC					29 /	2014
	Mailing Address 1199 N Fairfax St				Amount		
	Ste 220 City State		Zip Code				6473.50
	Alexandria VA	,	22314-1437		Transaction ID Date of Disbur		424
	Purpose of Expenditure TV Ad Production		Category/ Type 004		10 ^{//}	29 /	2014 Y
	Name of Federal Candidate		Support	Office	Sought:	House D	istrict:
	Larry Pressler		X Oppose		President X	Senate	State: SD
	Calendar Year-To-Date Per Election for Office Sought		1218633.89	Disbu 2014	rsement For:	Primary	K General
	Full Name of Payee				Date of Public	Distribution/D	Dissemination
	Mission Control, Inc.				10 ^{//}	D D / 30	2014 Y
	Mailing Address 114 Mansfield Hollow Rd				Amount		
	# A		7. 0.1				45004.00
	City State Mansfield Center CT		Zip Code 06250-1316		Transaction ID Date of Disbur		
	Purpose of Expenditure Mail		Category/ Type 004		10 /	^D 30 ⁻	Y Y Y Y 2014
	Name of Federal Candidate		Support	Office	Sought:	K House D	District: 02
	Marilinda Garcia		X Oppose		President	Senate	State: <u>NH</u>
	Calendar Year-To-Date Per Election for Office Sought		147976.11	Disbu 2014	rsement For:	Primary ecify) ►	X General
(a) SUBTOTAL of Itemized Independent Expenditures 22135.36							
(b) SUBTOTAL of Unitemized Independent Expenditures							
					-7-		1.45.1
	(c) TOTAL Independent Expenditures			••• •	1 1 7		
	Under penalty of perjury I certify that the independent exp with, or at the request or suggestion of, any candidate or a party committee) any political party committee or its agent.	authorized					
	David Donnelly	[Electron	ically Filed] Date	e 12	2 / D D 2 04	/ 2014	
	Signature						

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 48 OF 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
Every Voice Action		C C00566208
Check if 24-hour report 48-hour report New rep	port Amends repo	rt filed on
Full Name of Payee New Partners Consulting		Date of Public Distribution/Dissemination
		10 / D D / Y Y Y Y 2014
Mailing Address 1250 I St NW		Amount
Ste 200		
City State Washington DC	Zip Code	
	20005-5994	Transaction ID : VN7BA9XMNJ8 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising	Category/ Type 004	10 / D D / Y Y Y Y 2014
Name of Federal Candidate	Support	Office Sought: House District:
Larry Pressler	X Oppose	President State: SD
Calendar Year-To-Date Per Election for Office Sought	1218633.89	Disbursement For: Primary X General
		Other (specify) ►
Full Name of Payee New Partners Consulting		Date of Public Distribution/Dissemination
Mailing Address		10 30 2014
1250 T St NW		Amount
Ste 200 City State	Zip Code	250.00
Washington DC	20005-5994	Transaction ID : VN7BA9XMNZ1 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising	Category/ Type 004	10 / D D / Y Y Y Y 2014
Name of Federal Candidate	Support	Office Sought: House District:
Rick Weiland	Oppose	President X Senate State: SD
Calendar Year-To-Date Per Election for Office Sought	1218633.89	Disbursement For: Primary X General
		Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		500.00
(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.		
David Donnelly [Electron	nically Filed]	
Signature	Date	12 04 2014

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 49 OF 50 FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER V		
Every Voice Action		C C00566208		
Check if 24-hour report 48-hour report New re	port Amends repo	rt filed on		
Full Name of Payee Angle Mastagni Mathews Political Strategies		Date of Public Distribution/Dissemination		
Mailing Address 507 N Sylvania Ave	10 31 2014			
		Amount		
City State	Zip Code	12000.00		
Fort Worth TX	76111-2317	Transaction ID : VN7BA9XMH75 Date of Disbursement or Obligation		
Purpose of Expenditure Phone Calls	enditure Category/ Type 001			
Name of Federal Candidate	Support	Office Sought: House District:		
Mitch McConnell	X Oppose	President X Senate State: KY		
Calendar Year-To-Date Per Election for Office Sought	258749.50	Disbursement For: Primary X General		
		Other (specify) ►		
Full Name of Payee Stones' Phones		Date of Public Distribution/Dissemination		
Mailing Address		10 31 2014		
Mailing Address 1309 F St NW		Amount		
Ste 200	7. 0. 1			
CityStateWashingtonDC	Zip Code 20004-1183	290.90 Transaction ID : VN7BA9XMHQ9 Date of Disbursement or Obligation		
Purpose of Expenditure	Category/	M M / D D / Y Y Y		
Phone Calls	Type 001	10 31 2014		
Name of Federal Candidate	Support	Office Sought: X House District: 02		
Marilinda Garcia	X Oppose	President Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought	147976.11	Disbursement For: Primary X General		
	(8)	Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures		12290.90		
(b) SUBTOTAL of Uniternized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.				
David Donnelly [Electro	nically Filed]	12 04 <u>2014</u>		
Signature	Date	12 04 2014		

ITE	EMIZED INDEPENDENT EXPENDITURES					PAGE 50 OF 50 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC II	DENTIFICATION NUMBER V
E	very Voice Action				С	C00566208
Ch	eck if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or		
	Full Name of Payee			C	Date of Publi	c Distribution/Dissemination
	Stones' Phones				^M 10	/ D D / Y Y Y Y 31 2014
	Mailing Address 1309 F St NW			Δ	mount	
	Ste 200			- I I		
	City	State DC	Zip Code			7032.60
	Washington		20004-1183			D: VN7BA9XMM21 ursement or Obligation
	Purpose of Expenditure Phone Calls		Category/ Type 001		10 ^M	/ <u>31</u> / <u>2014</u>
	Name of Federal Candidate		Support	Office S	ought:	House District:
	Rick Weiland		Oppose	Pi	resident	X Senate State: SD
	Calendar Year-To-Date Per Election for Office Sought		1218633.89	Disburse 2014	ement For:	Primary X General
		77			Other (sp	pecify) ►
	Full Name of Payee Stones' Phones					ic Distribution/Dissemination
					^M 11	/ D D / Y Y Y Y 03 / 2014
	Mailing Address 1309 F St NW			A	Amount	
	Ste 200	State	Zip Code	I		4061.41
	Washington	DC	20004-1183			D: VN7BA9XRAD7 ursement or Obligation
	Purpose of Expenditure GOTV Phone Calls		Category/ Type 001		^M 11	/ D D / Y Y Y Y 2014
	Name of Federal Candidate		Support	Office S	Sought:	House District:
	Rick Weiland		Oppose	P	resident	X Senate State: <u>SD</u>
	Calendar Year-To-Date		1218633.89	Disburse 2014	ement For:	Primary X General
	Per Election for Office Sought	7 7			Other (s	pecify) ►
	(a) SUBTOTAL of Itemized Independent Expenditure	es		•		11094.01
	(b) SUBTOTAL of Unitemized Independent Expendit	tures		• •		
	/ ·					
	(c) TOTAL Independent Expenditures			·· •		1263490.35
	Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized				
	David Donnelly	[Electron	ically Filed] Date	12	/ D D 04	/ Y Y Y Y Y 2014
	Signature		0.0			