

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
Madison Action Fund

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

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

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

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul Kilgore

Signature of Treasurer Paul Kilgore [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Madison Action Fund**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="10615.10"/>	<input type="text" value="10615.10"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="23802.19"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="39560.04"/>	<input type="text" value="279764.95"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="63362.23"/>	<input type="text" value="290380.05"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="17864.54"/>	<input type="text" value="244882.36"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="45497.69"/>	<input type="text" value="45497.69"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Madison Action Fund**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	24360.04	238577.04
(ii) Unitemized .....	15200.00	41187.91
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	39560.04	279764.95
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	39560.04	279764.95
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	39560.04	279764.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	39560.04	279764.95

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	14739.54	97525.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	14739.54	97525.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	3125.00	147256.76
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	100.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	100.00
29. Other Disbursements .....	0.00	0.00
30. 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	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	17864.54	244882.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17864.54	244882.36

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	39560.04	279764.95
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	39560.04	279664.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	14739.54	97525.60
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	14739.54	97525.60

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 26
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

**A. Joan Allison**  
Full Name (Last, First, Middle Initial)  
Mailing Address 927 W Sharon Rd  
City Santa Ana State CA Zip Code 92706  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested  
Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 960.00

Date of Receipt  
08 / 11 / 2014  
**Transaction ID : SA11AI.5160**  
Amount of Each Receipt this Period  
720.00

**B. Travis Allison**  
Full Name (Last, First, Middle Initial)  
Mailing Address 17280 County Road 136  
City Tyler State TX Zip Code 75703  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested  
Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
08 / 14 / 2014  
**Transaction ID : SA11AI.5281**  
Amount of Each Receipt this Period  
600.00

**C. Lynn Chrisp**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2740 S Smokey Hill Rd  
City Hastings State NE Zip Code 68901  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested  
Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
08 / 15 / 2014  
**Transaction ID : SA11AI.5157**  
Amount of Each Receipt this Period  
600.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1920.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

Full Name (Last, First, Middle Initial)  
**A. Eleanor Cobb**

Mailing Address 131 S Vista St

City Los Angeles State CA Zip Code 90036

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 14 / 2014  
**Transaction ID : SA11AI.5325**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. Richard Cox**

Mailing Address 1951 Kakela Dr

City Honolulu State HI Zip Code 96822

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  
08 / 18 / 2014  
**Transaction ID : SA11AI.5440**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. Byron Crocker**

Mailing Address 2025 Hanover Cir

City Beaumont State TX Zip Code 77706

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
08 / 14 / 2014  
**Transaction ID : SA11AI.5308**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00

**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 26
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Kay Finlay</b>		Date of Receipt MM / DD / YYYY 08 / 14 / 2014 <b>Transaction ID : SA11AI.5267</b>
Mailing Address 10 La Cerra Cir		Amount of Each Receipt this Period 150.00
City Rancho Mirage	State CA	Zip Code 92270
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B. Dale Funk</b>		Date of Receipt MM / DD / YYYY 08 / 18 / 2014 <b>Transaction ID : SA11AI.5426</b>
Mailing Address 1736 S 181st St		Amount of Each Receipt this Period 450.00
City Omaha	State NE	Zip Code 68130
FEC ID number of contributing federal political committee. C		
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. Don Gabianelli</b>		Date of Receipt MM / DD / YYYY 08 / 11 / 2014 <b>Transaction ID : SA11AI.5177</b>
Mailing Address 47 Louise St		Amount of Each Receipt this Period 1000.00
City Crossville	State TN	Zip Code 38555
FEC ID number of contributing federal political committee. C		
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Maejel Graf</b>		Date of Receipt MM / DD / YYYY 08 / 14 / 2014 <b>Transaction ID : SA11AI.5279</b>
Mailing Address 68 Elena Ave		Amount of Each Receipt this Period 1000.00
City Atherton	State CA	Zip Code 94027
FEC ID number of contributing federal political committee. C		
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Helen Gross</b>		Date of Receipt MM / DD / YYYY 08 / 14 / 2014 <b>Transaction ID : SA11AI.5314</b>
Mailing Address 2455 E Woodstone Dr		Amount of Each Receipt this Period 450.00
City Hayden	State ID	Zip Code 83835
FEC ID number of contributing federal political committee. C		
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. James Hall</b>		Date of Receipt MM / DD / YYYY 08 / 18 / 2014 <b>Transaction ID : SA11AI.5443</b>
Mailing Address PO Box 10666		Amount of Each Receipt this Period 500.00
City Midland	State TX	Zip Code 79702
FEC ID number of contributing federal political committee. C		
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 26
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

**A. J Hannemann**  
Full Name (Last, First, Middle Initial)  
Mailing Address 34 Murray Dr  
City Cape Elizabeth State ME Zip Code 04107  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
08 / 20 / 2014  
**Transaction ID : SA11AI.5562**  
Amount of Each Receipt this Period  
300.00

**B. Billie Hatley**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2711 Canyon Oaks Ct  
City Temple State TX Zip Code 76502  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
08 / 14 / 2014  
**Transaction ID : SA11AI.5266**  
Amount of Each Receipt this Period  
250.00

**C. Nancy Hunter**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4756 John Scott Dr  
City Lynchburg State VA Zip Code 24503  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
08 / 15 / 2014  
**Transaction ID : SA11AI.5401**  
Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 950.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 26
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

Full Name (Last, First, Middle Initial)  
**A. George Hutter**

Mailing Address 1500 Westbrook Ct Apt 3133

City Richmond	State VA	Zip Code 23227
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		14		2014

**Transaction ID : SA11AI.5285**

Amount of Each Receipt this Period  

300.00
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Full Name (Last, First, Middle Initial)  
**B. William Jenkins**

Mailing Address 2008 Magnolia Rdg

City Vestavia	State AL	Zip Code 35243
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		11		2014

**Transaction ID : SA11AI.5214**

Amount of Each Receipt this Period  

300.00
--------

Full Name (Last, First, Middle Initial)  
**C. Ferenc Kacsinta**

Mailing Address 7323 Cartwright Ave

City Sun Valley	State CA	Zip Code 91352
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2160.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		11		2014

**Transaction ID : SA11AI.5200**

Amount of Each Receipt this Period  

2160.00
---------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2760.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 26
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

Full Name (Last, First, Middle Initial)  
**A. Frederick Kapetansky**

Mailing Address 2599 Sonata Dr

City Columbus State OH Zip Code 43209

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

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014  
**Transaction ID : SA11AI.5289**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Ragina Leclerc**

Mailing Address 9070 SW 80th Ave Rm 305

City Ocala State FL Zip Code 34481

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

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014  
**Transaction ID : SA11AI.5365**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. John Lodge**

Mailing Address PO Box 96589

City Houston State TX Zip Code 77213

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

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2014  
**Transaction ID : SA11AI.5222**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

Full Name (Last, First, Middle Initial)  
**A. Elizabeth Macintyre**

Mailing Address 2860 Colby Dr

City Boulder State CO Zip Code 80305

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

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 14 / 2014  
**Transaction ID : SA11AI.5290**

Amount of Each Receipt this Period  
**120.00**

Full Name (Last, First, Middle Initial)  
**B. Gerald McCoy**

Mailing Address 6945 W Surrey Ave

City Peoria State AZ Zip Code 85381

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

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.04**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 14 / 2014  
**Transaction ID : SA11AI.5323**

Amount of Each Receipt this Period  
**300.04**

Full Name (Last, First, Middle Initial)  
**C. Harold Morell**

Mailing Address 1501 E Magnolia Rd Apt 240

City Salina State KS Zip Code 67401

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

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 13 / 2014  
**Transaction ID : SA11AI.5262**

Amount of Each Receipt this Period  
**300.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **720.04**

**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

**A. Richard Olander**  
Full Name (Last, First, Middle Initial)

Mailing Address 1742 N Fitzgerald Ln

City Hanford State CA Zip Code 93230

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.00

Date of Receipt  
08 / 11 / 2014  
Transaction ID : SA11AI.5220

Amount of Each Receipt this Period  
208.00

**B. Edward Poitras**  
Full Name (Last, First, Middle Initial)

Mailing Address 949 Hamilton Cir

City Haines City State FL Zip Code 33844

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
08 / 14 / 2014  
Transaction ID : SA11AI.5331

Amount of Each Receipt this Period  
400.00

**C. Kenneth Rolfe**  
Full Name (Last, First, Middle Initial)

Mailing Address 301 SE Foundation Dr

City Dallas State OR Zip Code 97338

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 14 / 2014  
Transaction ID : SA11AI.5361

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	908.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

**A. Richard Rossman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 582  
 City Olathe State KS Zip Code 66051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014  
**Transaction ID : SA11AI.5337**  
 Amount of Each Receipt this Period  
 250.00

**B. C Ruleman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4255 Gwynne Rd  
 City Memphis State TN Zip Code 38117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2014  
**Transaction ID : SA11AI.5411**  
 Amount of Each Receipt this Period  
 500.00

**C. Anthony Ryan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 393 Dorchester Rd  
 City Lyme State NH Zip Code 03768  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014  
**Transaction ID : SA11AI.5551**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

**A. Fredric Schluter**  
Full Name (Last, First, Middle Initial)

Mailing Address 2433 Golfside Dr

City Naples State FL Zip Code 34110

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2014  
**Transaction ID : SA11AI.5412**

Amount of Each Receipt this Period  
**100.00**

**B. Fred Scott**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1282

City Spanish Fork State UT Zip Code 84660

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2014  
**Transaction ID : SA11AI.5258**

Amount of Each Receipt this Period  
**300.00**

**C. Charles Shartle**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1049

City Crockett State TX Zip Code 75835

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **807.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2014  
**Transaction ID : SA11AI.5413**

Amount of Each Receipt this Period  
**202.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **602.00**

**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 26
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Charles Shartle</b>		Date of Receipt 08 / 15 / 2014 <b>Transaction ID : SA11AI.5414</b>
Mailing Address PO Box 1049		Amount of Each Receipt this Period 600.00
City Crockett	State TX	Zip Code 75835
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1407.00	

Full Name (Last, First, Middle Initial) <b>B. Charles Shartle</b>		Date of Receipt 08 / 15 / 2014 <b>Transaction ID : SA11AI.5415</b>
Mailing Address PO Box 1049		Amount of Each Receipt this Period 500.00
City Crockett	State TX	Zip Code 75835
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1907.00	

Full Name (Last, First, Middle Initial) <b>C. David Smith</b>		Date of Receipt 08 / 14 / 2014 <b>Transaction ID : SA11AI.5321</b>
Mailing Address 2512 Fairmont Ave		Amount of Each Receipt this Period 200.00
City Dayton	State OH	Zip Code 45419
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

**A. Brian Stanley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4500 Pecan Meadow Ct  
 City Fort Worth State TX Zip Code 76140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested  
 Occupation Information Requested  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2014  
**Transaction ID : SA11AI.5227**  
 Amount of Each Receipt this Period  
 2000.00

**B. Keturah Thunder-Haab**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 436 Pine Brae St  
 City Ann Arbor State MI Zip Code 48105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested  
 Occupation Information Requested  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2014  
**Transaction ID : SA11AI.5234**  
 Amount of Each Receipt this Period  
 220.00

**C. Harry Van Iderstine**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 812 S Timberlane Dr  
 City New Smyrna Beach State FL Zip Code 32168  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested  
 Occupation Information Requested  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014  
**Transaction ID : SA11AI.5264**  
 Amount of Each Receipt this Period  
 400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2620.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 26
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

**A. Lajeau Whitcomb**  
Full Name (Last, First, Middle Initial)

Mailing Address 2104 N Cottonwood Rd

City Stillwater	State OK	Zip Code 74075
--------------------	-------------	-------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
08		11		2014

**Transaction ID : SA11AI.5233**

Amount of Each Receipt this Period  
500.00

**B. O Whitten**  
Full Name (Last, First, Middle Initial)

Mailing Address 17040 Arnold Dr Apt 43

City Riverside	State CA	Zip Code 92518
-------------------	-------------	-------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
08		20		2014

**Transaction ID : SA11AI.5497**

Amount of Each Receipt this Period  
200.00

**C. James Will**  
Full Name (Last, First, Middle Initial)

Mailing Address 616 Broadway

City Tacoma	State WA	Zip Code 98402
----------------	-------------	-------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
08		11		2014

**Transaction ID : SA11AI.5184**

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 26
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

**A. Harry Williams**  
Full Name (Last, First, Middle Initial)  
Mailing Address 727 Jackson St  
City Denver State CO Zip Code 80206  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested  
Occupation Information Requested  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 14 / 2014  
**Transaction ID : SA11AI.5320**  
Amount of Each Receipt this Period  
250.00

**B. Ester Wood**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2485 Townley Ln  
City North Garden State VA Zip Code 22959  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested  
Occupation Information Requested  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 11 / 2014  
**Transaction ID : SA11AI.5205**  
Amount of Each Receipt this Period  
160.00

**C. Jim Woods**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7619 Pennyburn Dr  
City Dallas State TX Zip Code 75248  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested  
Occupation Information Requested  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 11 / 2014  
**Transaction ID : SA11AI.5196**  
Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 660.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

Full Name (Last, First, Middle Initial) <b>A. David Young</b>		Date of Receipt MM / DD / YYYY 08 / 11 / 2014
Mailing Address 2023 Salt Myrtle Ln		<b>Transaction ID : SA11AI.5164</b>
City Orange Park	State FL	Zip Code 32003
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Edward Young</b>		Date of Receipt MM / DD / YYYY 08 / 13 / 2014
Mailing Address 1673 Wyntre Brooke Dr		<b>Transaction ID : SA11AI.5243</b>
City York	State PA	Zip Code 17403
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 320.00	
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>C. Elo Zinke</b>		Date of Receipt MM / DD / YYYY 08 / 14 / 2014
Mailing Address 2582 County Road 1596		<b>Transaction ID : SA11AI.5382</b>
City Avinger	State TX	Zip Code 75630
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 3000.00	
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	24360.04

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address PO Box 25118

City Tampa State FL Zip Code 33622

Purpose of Disbursement  
PAC Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2014

**Transaction ID : SB21B.5155**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address PO Box 25118

City Tampa State FL Zip Code 33622

Purpose of Disbursement  
PAC Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 27 / 2014

**Transaction ID : SB21B.5154**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Joel Fraser**

Mailing Address 164 First Avenue

City Cranston State RI Zip Code 02910

Purpose of Disbursement  
See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2014

**Transaction ID : SB21B.5141**

Amount of Each Disbursement this Period

13007.40

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

13037.40

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

Full Name (Last, First, Middle Initial)

**A. Microtel**

Mailing Address 105 Westover Drive

City Hattiesburg State MS Zip Code 39402

Purpose of Disbursement  
PAC GOTV Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2014

**Transaction ID : SB21B.5141.0**

Amount of Each Disbursement this Period

3235.66
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Sleep Inn**

Mailing Address 333 Airport Rd

City Pearl State MS Zip Code 39208

Purpose of Disbursement  
PAC GOTV Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2014

**Transaction ID : SB21B.5141.1**

Amount of Each Disbursement this Period

2277.80
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606

Purpose of Disbursement  
PAC GOTV Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2014

**Transaction ID : SB21B.5141.2**

Amount of Each Disbursement this Period

2302.50
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

Full Name (Last, First, Middle Initial)

**A. Kroger**

Mailing Address 1650 Bryan Station Rd

City Lexington State KY Zip Code 40505

Purpose of Disbursement  
PAC GOTV Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2014

**Transaction ID : SB21B.5141.3**

Amount of Each Disbursement this Period

2836.05

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. HSP Direct**

Mailing Address 20130 Lakeview Center Plaza Ste 300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
PAC Direct Mail Creative Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 28 / 2014

**Transaction ID : SB21B.5567**

Amount of Each Disbursement this Period

508.08

Full Name (Last, First, Middle Initial)

**C. Sunrise Data Services**

Mailing Address 20130 Lakeview Center Plaza Ste 300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement  
PAC Direct Mail Data Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2014

**Transaction ID : SB21B.5568**

Amount of Each Disbursement this Period

230.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

738.08



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Madison Action Fund**

Full Name (Last, First, Middle Initial)

**A. Washington Intelligence Bureau**

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement  
PAC Caging & Escrow

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 28 / 2014

**Transaction ID : SB21B.5566**

Amount of Each Disbursement this Period

903.98

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

903.98

14679.46

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

NAME OF COMMITTEE (In Full) <b>Madison Action Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00524520
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Campaign Sidekick, LLC.</b>		Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>08 / 25 / 2014</b>	
Mailing Address 1712 Pioneer Ave Ste 6328		Amount <span style="float:right">3125.00</span>	
City Cheyenne	State WY	Zip Code 82001	<b>Transaction ID : SE.5151</b>
Purpose of Expenditure Robo Calls	Category/Type 001	Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>08 / 25 / 2014</b>	
Name of Federal Candidate STEVEN DANE RUSSELL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">3125.00</span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	
District: <u>05</u>		State: <u>OK</u>	

Full Name of Payee		Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	
Mailing Address		Amount <span style="float:right"></span>	
City	State	Zip Code	Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>
Purpose of Expenditure	Category/Type	<span style="float:right"></span>	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate
Calendar Year-To-Date Per Election for Office Sought <span style="float:right"></span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
District: _____		State: _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="float:right">3125.00</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="float:right"></span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="float:right">3125.00</span>

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

*Paul Kilgore*  
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**09 / 18 / 2014**