

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 NEA Advocacy Fund

ADDRESS (number and street) 1201 16th Street NW Suite 418 Washington DC 20036

2. FEC IDENTIFICATION NUMBER C C00489815 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07 / 01 / 2014 through 09 / 30 / 2014

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 Michael Edwards

Signature of Treasurer Michael Edwards [Electronically Filed] Date 10 / 13 / 2014

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

NEA Advocacy 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"/>	<input type="text" value="4239664.79"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1336771.04"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="7518821.45"/>	<input type="text" value="7518927.70"/>
(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="8855592.49"/>	<input type="text" value="11758592.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8315031.48"/>	<input type="text" value="11218031.48"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="540561.01"/>	<input type="text" value="540561.01"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

NEA Advocacy 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).....	7514151.58	7514151.58
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7514151.58	7514151.58
(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)	7514151.58	7514151.58
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).....	4669.87	4776.12
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))..... ▶	7518821.45	7518927.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7518821.45	7518927.70

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	510000.00	1439000.00
24. Independent Expenditures (use Schedule E)	3148784.17	3148784.17
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	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	4656247.31	6630247.31
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)) ..	8315031.48	11218031.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8315031.48	11218031.48

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)	7514151.58	7514151.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7514151.58	7514151.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	4669.87	4776.12
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	-4669.87	-4776.12

**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 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
NEA Advocacy Fund

Full Name (Last, First, Middle Initial) A. National Education Association		Date of Receipt MM / DD / YYYY 08 / 12 / 2014 Transaction ID : A2014-2175300
Mailing Address 1201 16th Street NW		Amount of Each Receipt this Period 1083681.69
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C		Per Capita Dues
Name of Employer Not Applicable	Occupation Not Applicable	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1083681.69	

Full Name (Last, First, Middle Initial) B. National Education Association		Date of Receipt MM / DD / YYYY 08 / 13 / 2014 Transaction ID : A2014-2175301
Mailing Address 1201 16th Street NW		Amount of Each Receipt this Period 3600000.00
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C		Per Capita Dues
Name of Employer Not Applicable	Occupation Not Applicable	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4683681.69	

Full Name (Last, First, Middle Initial) C. National Education Association		Date of Receipt MM / DD / YYYY 08 / 28 / 2014 Transaction ID : A2014-2175302
Mailing Address 1201 16th Street NW		Amount of Each Receipt this Period 250682.69
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C		Per Capita Dues
Name of Employer Not Applicable	Occupation Not Applicable	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4934364.38	

SUBTOTAL of Receipts This Page (optional).....▶	4934364.38
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:	PAGE 7 OF 18
	(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)
NEA Advocacy Fund

Full Name (Last, First, Middle Initial) A. National Education Association			Date of Receipt
Mailing Address 1201 16th Street NW			<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : A2014-2175303
Washington	DC	20036	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="900000.00"/>
Name of Employer	Occupation		Per Capita Dues
Not Applicable	Not Applicable		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
	<input type="text" value="5834364.38"/>		

Full Name (Last, First, Middle Initial) B. National Education Association			Date of Receipt
Mailing Address 1201 16th Street NW			<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : A2014-2175304
Washington	DC	20036	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="1079950.65"/>
Name of Employer	Occupation		Per Capita Dues
Not Applicable	Not Applicable		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
	<input type="text" value="6914315.03"/>		

Full Name (Last, First, Middle Initial) C. National Education Association			Date of Receipt
Mailing Address 1201 16th Street NW			<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : A2014-2175305
Washington	DC	20036	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="599836.55"/>
Name of Employer	Occupation		Per Capita Dues
Not Applicable	Not Applicable		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
	<input type="text" value="7514151.58"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2579787.20"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="7514151.58"/>

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

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

FOR LINE NUMBER: PAGE 8 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEA Advocacy Fund

A. The New Media Firm Inc.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1634 Eye Street NW Ste 704
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Not Applicable
 Aggregate Year-to-Date ▼
 4669.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : A2014-13651
 Amount of Each Receipt this Period
 4669.87
 Refund of IE for State Activities paid in Sept and Oct 2012

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	4669.87
TOTAL This Period (last page this line number only).....▶	4669.87

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
NEA Advocacy Fund

Full Name (Last, First, Middle Initial)

A. Fair Share Action

Mailing Address 3845 Tennyson Street #150

City State Zip Code
Denver CO 80212

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : B535653

Amount of Each Disbursement this Period

500000.00

Full Name (Last, First, Middle Initial)

B. America Votes

Mailing Address 1401 New York Ave NW

City State Zip Code
Washington DC 20005

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : B535644

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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)..... ▶

510000.00

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

510000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEA Advocacy Fund

Full Name (Last, First, Middle Initial)

A. Arizona Wins

Mailing Address 530 E. McDowell Rd. Suite 107-189

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement
Non-Fed Political Org-State

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2014

Transaction ID : B535607

Amount of Each Disbursement this Period

100000.00

Full Name (Last, First, Middle Initial)

B. Arizona Wins

Mailing Address 530 E. McDowell Rd. Suite 107-189

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement
Non-Fed Political Org-State

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : B535610

Amount of Each Disbursement this Period

100000.00

Full Name (Last, First, Middle Initial)

C. Arizona Wins

Mailing Address 530 E. McDowell Rd. Suite 107-189

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement
Non-Fed Political Org-State

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2014

Transaction ID : B535655

Amount of Each Disbursement this Period

150000.00

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

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

350000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEA Advocacy Fund

Full Name (Last, First, Middle Initial)

A. Democrats for Public Education

Mailing Address 888 16th Street NW Ste 650

City Washington State DC Zip Code 20006

Purpose of Disbursement
Non-Fed Political Org-Natl

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 13 / 2014

Transaction ID : B535624

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

B. Grassroots for Florida

Mailing Address 4644 W. Gandy Blvd. Ste. 4-106

City Tampa State FL Zip Code 33611

Purpose of Disbursement
Non-Fed Political Org-State

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2014

Transaction ID : B535617

Amount of Each Disbursement this Period

100000.00

Full Name (Last, First, Middle Initial)

C. Grassroots for Florida

Mailing Address 4644 W. Gandy Blvd. Ste. 4-106

City Tampa State FL Zip Code 33611

Purpose of Disbursement
Non-Fed Political Org-State

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2014

Transaction ID : B535641

Amount of Each Disbursement this Period

225000.00

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

350000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEA Advocacy Fund

Full Name (Last, First, Middle Initial)

A. Kentucky Family Values

Mailing Address 642 S Fourth Street #300

City Louisville State KY Zip Code 40202

Purpose of Disbursement
Non-Federal PAC

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 13 / 2014

Transaction ID : B535625

Amount of Each Disbursement this Period

550000.00

Full Name (Last, First, Middle Initial)

B. Cmte to Rebuild Maine's Middle Class

Mailing Address PO Box 3

City Auburn State ME Zip Code 04212

Purpose of Disbursement
Maine Ind Exp Activities

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 11 / 2014

Transaction ID : B535651

Amount of Each Disbursement this Period

75000.00

Full Name (Last, First, Middle Initial)

C. Michigan for All

Mailing Address 1101 17th Street NW Suite 900

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non-Federal PAC

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : B535637

Amount of Each Disbursement this Period

200000.00

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

825000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEA Advocacy Fund

Full Name (Last, First, Middle Initial)

A. Waterfront Strategies

Mailing Address 3050 K Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
G-2014 Governor MI

011

Category/
Type

Candidate Name
Rick Snyder

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District:

Date of Disbursement

MM / DD / YYYY
09 / 11 / 2014

Transaction ID : B535652

Amount of Each Disbursement this Period

703747.31

Full Name (Last, First, Middle Initial)

B. Win Minnesota Political Fund

Mailing Address 1600 University West #309C

City St. Paul State MN Zip Code 55104

Purpose of Disbursement
State Ind Exp Cmte

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2014

Transaction ID : B535632

Amount of Each Disbursement this Period

100000.00

Full Name (Last, First, Middle Initial)

C. NC Citizens for Protecting Our Schools

Mailing Address PO Box 1093

City Raleigh State NC Zip Code 27602

Purpose of Disbursement
Non-Federal PAC

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2014

Transaction ID : B535657

Amount of Each Disbursement this Period

250000.00

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

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

1053747.31

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
NEA Advocacy Fund

Full Name (Last, First, Middle Initial)

A. Patriot Majority

Mailing Address P.O. Box 35522

City Washington State DC Zip Code 20033

Purpose of Disbursement
New Mexico Ind Exp Activites

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : B535628

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Amy Chapman

Mailing Address 28342 Portsmouth Street

City Madison Heights State MI Zip Code 48071

Purpose of Disbursement
Michigan Ind Exp Activites

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : B536038

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Patriot Majority

Mailing Address P.O. Box 35522

City Washington State DC Zip Code 20033

Purpose of Disbursement
New Mexico Ind Exp Activites

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : B536034

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEA Advocacy Fund

Full Name (Last, First, Middle Initial)

A. PA Families First

Mailing Address 1401 K Street NW, Ste 200

City Washington State DC Zip Code 20005

Purpose of Disbursement
Governor Activities

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : B535608

Amount of Each Disbursement this Period

560000.00

Full Name (Last, First, Middle Initial)

B. PA Families First

Mailing Address 1401 K Street NW, Ste 200

City Washington State DC Zip Code 20005

Purpose of Disbursement
Governor Activities

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014

Transaction ID : B535648

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

C. Democratic Governors Association

Mailing Address 1401 K Street NW Suite 200

City Washington State DC Zip Code 20005

Purpose of Disbursement
Association

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2014

Transaction ID : B535646

Amount of Each Disbursement this Period

900000.00

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

1480000.00

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

4656247.31

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NEA Advocacy Fund	FEC IDENTIFICATION NUMBER ▼ C C00489815
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee Prism Communications Inc	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 01 / 2014
Mailing Address 1000 Potomac Street NW	Amount 990000.00 490000.00
City Washington State DC Zip Code 20007	Transaction ID : B500109 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 01 / 2014
Purpose of Expenditure TV and online advertising	Category/Type 004
Name of Federal Candidate Thomas Cotton	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: AR
Calendar Year-To-Date Per Election for Office Sought 990000.00 490000.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Waterfront Strategies	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 05 / 2014
Mailing Address 3050 K Street NW Suite 100	Amount 998601.00 1498601.00
City Washington State DC Zip Code 20007	Transaction ID : B511351 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 05 / 2014
Purpose of Expenditure Time purchase for TV advertising	Category/Type 004
Name of Federal Candidate Thom Tillis	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC
Calendar Year-To-Date Per Election for Office Sought 998601.00 1728601.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	998601.00 1988601.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	990000.00 0.00
(c) TOTAL Independent Expenditures..... ▶	998601.00 1988601.00

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.

Michael Edwards [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
10 / 10 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NEA Advocacy Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489815 </div>
---	--

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

Full Name of Payee Buying Time		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div> 09 / 05 / 2014	
Mailing Address 650 Massachusetts Ave NW Ste 210		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M M . 00 </div> 230000.00	
City Washington	State DC	Zip Code 20001	Transaction ID : B511502 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div> 09 / 05 / 2014
Purpose of Expenditure Development of TV advertising	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 004 </div>		
Name of Federal Candidate Thom Tillis		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M M . 00 </div> 1728601.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div> 09 / 10 / 2014	
Mailing Address 3050 K Street NW Suite 100		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M M . 76 </div> 727690.76	
City Washington	State DC	Zip Code 20007	Transaction ID : B512012 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div> 09 / 10 / 2014
Purpose of Expenditure Production and time for TV ad	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 004 </div>		
Name of Federal Candidate Dan Sullivan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M M . 76 </div> 727690.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M M . 76 </div> 957690.76
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M M . 00 </div> _____
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M M . 00 </div> _____

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

Michael Edwards
 Signature _____

Date
M M / D D / Y Y Y Y Y Y
 10 / 10 / 2014

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) NEA Advocacy Fund		FEC IDENTIFICATION NUMBER ▼ C C00489815	
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		MM / DD / YYYY	MM / DD / YYYY

Full Name of Payee Chambers Lopez Strategies LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 23 / 2014		
Mailing Address P.O. Box 5539			Amount 202492.41		
City Arlington	State VA	Zip Code 22205	Transaction ID : B532669		
Purpose of Expenditure Production and time for TV ad		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 23 / 2014		
Name of Federal Candidate Cory Gardner		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought		202492.41	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

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

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	202492.41
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	3148784.17

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.

Michael Edwards
Signature

[Electronically Filed] Date **10 / 10 / 2014**