

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Blue America PAC

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="13770.35"/>	<input type="text" value="13770.35"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="39636.29"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12450.71"/>	<input type="text" value="59368.11"/>
(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="52087.00"/>	<input type="text" value="73138.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6507.93"/>	<input type="text" value="27559.39"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="45579.07"/>	<input type="text" value="45579.07"/>
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

Write or Type Committee Name

Blue America PAC

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).....	6985.00	13266.00
(ii) Unitemized	4984.49	42991.02
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11969.49	56257.02
(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)	11969.49	56257.02
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).....	481.22	3102.62
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	8.47
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))..... ▶	12450.71	59368.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	12450.71	59368.11

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	1143.68	20095.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1143.68	20095.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	7000.00
24. Independent Expenditures (use Schedule E)	364.25	364.25
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	0.00	100.00
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)) ..	6507.93	27559.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6507.93	27559.39

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)	11969.49	56257.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11969.49	56257.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1143.68	20095.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	481.22	3102.62
38. Net Operating Expenditures (subtract Line 37 from Line 36)	662.46	16992.52

**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 14
	<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)
Blue America PAC

A. Alan Appleford
 Full Name (Last, First, Middle Initial)
 Mailing Address 6284 Clive Ave
 City Oakland State CA Zip Code 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **900.00**

Date of Receipt
 10 / 10 / 2014
Transaction ID : SA11AI.31663
 Amount of Each Receipt this Period
500.00

B. Gayle Colyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1700 meadowlark Way
 City Roseville State CA Zip Code 95661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Property management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt
 10 / 01 / 2014
Transaction ID : SA11AI.31592
 Amount of Each Receipt this Period
50.00

C. Bertis Downs
 Full Name (Last, First, Middle Initial)
 Mailing Address 738 Cobb St
 City Athens State GA Zip Code 30606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **533.34**

Date of Receipt
 10 / 13 / 2014
Transaction ID : SA11AI.31580
 Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... **1050.00**
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 7 OF 14
	<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)
Blue America PAC

A. Bertis Downs
Full Name (Last, First, Middle Initial)
Mailing Address 738 Cobb St
City Athens State GA Zip Code 30606
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1033.34**

Date of Receipt
10 / 13 / 2014
Transaction ID : SA11AI.31581
Amount of Each Receipt this Period
500.00

B. Diane Edwards
Full Name (Last, First, Middle Initial)
Mailing Address 23 Brewster Ave 31
City Ridgefield Pk State NJ Zip Code 07660
FEC ID number of contributing federal political committee. **C**
Name of Employer Waldoff Histrois Occupation Waitess
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **450.00**

Date of Receipt
10 / 03 / 2014
Transaction ID : SA11AI.31665
Amount of Each Receipt this Period
50.00

C. Douglas Kahn
Full Name (Last, First, Middle Initial)
Mailing Address 1811 Englewood Road #324
City Englewood State FL Zip Code 34223
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation none
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **2600.00**

Date of Receipt
10 / 07 / 2014
Transaction ID : SA11AI.31578
Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional)..... **3150.00**
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 14
	<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)
Blue America PAC

Full Name (Last, First, Middle Initial)
A. Douglas Kahn

Mailing Address 1811 Englewood Road #324

City Englewood	State FL	Zip Code 34223
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FEC ID number of contributing federal political committee. **C**

Name of Employer none	Occupation none
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2014

Transaction ID : SA11AI.31579

Amount of Each Receipt this Period
2600.00

Full Name (Last, First, Middle Initial)
B. Mayra Larronde

Mailing Address 7241 Sw 137th Ct

City Miami	State FL	Zip Code 33183
---------------	-------------	-------------------

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

Name of Employer	Occupation Accounting Clerk
------------------	--------------------------------

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
10	/	10	/	2014

Transaction ID : SA11AI.31661

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Bina Pawley

Mailing Address 196 North St Apt 3d

City Buffalo	State NY	Zip Code 14201
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

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

Transaction ID : SA11AI.31662

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....▶	2685.00
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: PAGE 9 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue America PAC

Full Name (Last, First, Middle Initial)
A. Martin Scheinberg

Mailing Address 1210 Fairview Lane

City State Zip Code
Riviera Beach FL 33404

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

Name of Employer Occupation
none retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2014
Transaction ID : SA11AI.31598

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. William Schrode

Mailing Address 1984 East Loma Vista Drive

City State Zip Code
Tempe AZ 85282

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

Name of Employer Occupation
retired retired

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
 10 / 02 / 2014
Transaction ID : SA11AI.31599

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C.

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶ 6985.00

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

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

FOR LINE NUMBER: PAGE 10 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue America PAC

Full Name (Last, First, Middle Initial)
A. Hudson Bay Company

Mailing Address P.O. Box 427

City Anoka State MN Zip Code 55303

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2934.39

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2014
Transaction ID : SA15.31657

Amount of Each Receipt this Period
312.99

Full Name (Last, First, Middle Initial)
B. Hudson Bay Company

Mailing Address P.O. Box 427

City Anoka State MN Zip Code 55303

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3102.62

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2014
Transaction ID : SA15.31658

Amount of Each Receipt this Period
168.23

Full Name (Last, First, Middle Initial)
C.

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).....▶	481.22
TOTAL This Period (last page this line number only).....▶	481.22

**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)
Blue America PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2014

Transaction ID : SB21B.31577

Amount of Each Disbursement this Period

444.77

Full Name (Last, First, Middle Initial)

B. Hudson Bay Company

Mailing Address P.O. Box 427

City Anoka State MN Zip Code 55303

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 14 / 2014

Transaction ID : SB21B.31659

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. Venture Bank

Mailing Address 4470 W. 78th Street Circle

City Bloomington State MN Zip Code 55435

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2014

Transaction ID : SB21B.31671

Amount of Each Disbursement this Period

98.91

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

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

1143.68

1143.68

**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)
Blue America PAC

Full Name (Last, First, Middle Initial)

A. BLUE AMERICA PAC INDEPENDENT EXPENDITURE COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Mailing Address 1025 VERMONT AVE, NW
SUITE 300

Transaction ID : SB23.31575

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Contribution

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

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

5000.00

5000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Blue America PAC	FEC IDENTIFICATION NUMBER ▼ C C00427617
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 Facebook	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 07 / 2014
Mailing Address 156 University Ave.	Amount 33.89
City Palo Alto State CA Zip Code 94301	Transaction ID : SE.31668 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 07 / 2014
Purpose of Expenditure Web Ads Category/Type 	Name of Federal Candidate ALAN MARK GRAYSON <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 33.89	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Facebook	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2014
Mailing Address 156 University Ave.	Amount 62.60
City Palo Alto State CA Zip Code 94301	Transaction ID : SE.31669 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 08 / 2014
Purpose of Expenditure Web Ads Category/Type 	Name of Federal Candidate ALAN MARK GRAYSON <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 96.49	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	96.49
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Howard Klein
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
10 / 20 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Blue America PAC	FEC IDENTIFICATION NUMBER ▼ C C00427617
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	

Full Name of Payee Facebook	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014
Mailing Address 156 University Ave.	Amount 267.76
City State Zip Code Palo Alto CA 94301	Transaction ID : SE.31670 Date of Disbursement or Obligation MM / DD / YYYY 10 / 14 / 2014
Purpose of Expenditure Web Ads	Category/Type
Name of Federal Candidate ALAN MARK GRAYSON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 09 State: FL
Calendar Year-To-Date Per Election for Office Sought 364.25	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <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
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	267.76
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	364.25

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.

Howard Klein

Signature _____ [Electronically Filed] Date MM / DD / YYYY
10 / 20 / 2014