

# 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

Virginia Progress PAC

ADDRESS (number and street) 700 13th Street NW

Check if different than previously reported. (ACC) Ste 600  
Washington DC 20005

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00555516 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)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on M M / D D / Y Y Y Y Y Y in the State of  

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2014 through M M / D D / Y Y Y Y Y Y 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 Frank Conner

Signature of Treasurer Frank Conner [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 15 / 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.

Office Use Only							
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**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name  
**Virginia Progress 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="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1408406.75"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="605500.00"/>	<input type="text" value="2292505.00"/>
(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="2013906.75"/>	<input type="text" value="2292505.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1867300.13"/>	<input type="text" value="2145898.38"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="146606.62"/>	<input type="text" value="146606.62"/>
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="31698.09"/>	

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  
**Virginia Progress 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).....	555500.00	1992500.00
(ii) Unitemized .....	0.00	5.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	555500.00	1992505.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	50000.00	300000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	605500.00	2292505.00
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))..... ▶	605500.00	2292505.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	605500.00	2292505.00

**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 .....	147041.70	425639.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	147041.70	425639.95
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) .....	1720258.43	1720258.43
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	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)) ..	1867300.13	2145898.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1867300.13	2145898.38

**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) .....	605500.00	2292505.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	605500.00	2292505.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	147041.70	425639.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	147041.70	425639.95

**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 51
<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)  
**Virginia Progress PAC**

**A. Lee Ainslie**  
Full Name (Last, First, Middle Initial)

Mailing Address 300 Crescent Ct  
FI 18

City Dallas State TX Zip Code 75201-1876

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

Name of Employer Occupation  
Maverick Capital, Ltd. Portfolio Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2014

**Transaction ID : VNJ4GCXG8J5**

Amount of Each Receipt this Period  
25000.00

**B. Eric Anderson**  
Full Name (Last, First, Middle Initial)

Mailing Address 93 S Jackson St

City Seattle State WA Zip Code 98104-2818

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

Name of Employer Occupation  
Intentional Software CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
09 / 26 / 2014

**Transaction ID : VNJ4GD863E8**

Amount of Each Receipt this Period  
10000.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
145500.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2014

**Transaction ID : VNJ4GD863E8E**

Amount of Each Receipt this Period  
10000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 35000.00

**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 51
	<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)  
**Virginia Progress PAC**

**A. Atlantic Cellular Investments, Inc.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 Richmond Sq  
 Ste 330  
 City Providence State RI Zip Code 02906-5117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 75000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014  
**Transaction ID : VNJ4GD5RNC4**  
 Amount of Each Receipt this Period  
 25000.00

**B. Jerry Bias**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 354 E 91st St  
 Apt 1401  
 City New York State NY Zip Code 10128-0089  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Wisdom Oak Winery Managing Principal & CEO  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 13 / 2014  
**Transaction ID : VNJ4GD478K4**  
 Amount of Each Receipt this Period  
 25000.00

**C. Robert Brandt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 Duke St  
 City Alexandria State VA Zip Code 22314-3735  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Lawrence N. Brandt, Inc. Real Estate  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : VNJ4GD473X5**  
 Amount of Each Receipt this Period  
 25000.00  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75000.00
<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 8 OF 51
	<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)  
**Virginia Progress PAC**

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 145500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014

**Transaction ID : VNJ4GD473X5E**

Amount of Each Receipt this Period  
 25000.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. ChaseSource LP**

Mailing Address 3311 W Alabama St

City Houston State TX Zip Code 77098-1702

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNJ4GD68DW0**

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
**C. ESNY Construction Services**

Mailing Address 746 4th Ave  
 FL 2

City Brooklyn State NY Zip Code 11232-1414

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNJ4GD863H2**

Amount of Each Receipt this Period  
 4000.00

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9000.00
<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 51
<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)  
**Virginia Progress PAC**

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
145500.00

Date of Receipt  
09 / 26 / 2014  
**Transaction ID : VNJ4GD863H2E**

Amount of Each Receipt this Period  
4000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Raul J. Fernandez**

Mailing Address 2401 Pennsylvania Ave NW Ste 480

City Washington State DC Zip Code 20037-1730

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

Name of Employer Occupation  
Object Video Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  
09 / 22 / 2014  
**Transaction ID : VNJ4GD51MF4**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**C. Barbara J. Fried**

Mailing Address 5924 Fried Farm Rd

City Crozet State VA Zip Code 22932-1605

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

Name of Employer Occupation  
Fried Companies, Inc. Real Estate Developer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
75000.00

Date of Receipt  
09 / 23 / 2014  
**Transaction ID : VNJ4GD55N33**

Amount of Each Receipt this Period  
25000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35000.00
<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 51
	<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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)  
**A. Emanuel J. Friedman**

Mailing Address 2330 California St NW

City Washington State DC Zip Code 20008-1637

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

Name of Employer EJF Capital Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2014

**Transaction ID : VNJ4GCXN419**

Amount of Each Receipt this Period  
125000.00

Full Name (Last, First, Middle Initial)  
**B. Guide Connection**

Mailing Address 293 24th St

City Brooklyn State NY Zip Code 11232-1309

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNJ4GD863K8**

Amount of Each Receipt this Period  
4000.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
145500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : VNJ4GD863K8E**

Amount of Each Receipt this Period  
4000.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 129000.00

**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 51
	<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)  
**Virginia Progress PAC**

**A. Paul Hirschbiel**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1800 Eden Way  
City Virginia Beach State VA Zip Code 23454-3055  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **5000.00**

Date of Receipt **09 / 18 / 2014**  
**Transaction ID : VNJ4GD863F6**  
Amount of Each Receipt this Period **5000.00**  
\* Earmarked Contribution: See Below

**B. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 441146  
City West Somerville State MA Zip Code 02144-0031  
FEC ID number of contributing federal political committee. **C** C00401224  
Name of Employer Occupation Conduit total listed in Agg. field  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **145500.00**

Date of Receipt **09 / 18 / 2014**  
**Transaction ID : VNJ4GD863F6E**  
Amount of Each Receipt this Period **5000.00**  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C. Eric Kamerath**  
Full Name (Last, First, Middle Initial)  
Mailing Address 297 Summermeadow Cir  
City Bountiful State UT Zip Code 84010-5862  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Attorney  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **15000.00**

Date of Receipt **07 / 21 / 2014**  
**Transaction ID : VNJ4GCZQ631**  
Amount of Each Receipt this Period **15000.00**  
\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... **20000.00**  
**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 12 OF 51
<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)  
**Virginia Progress PAC**

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
145500.00

Date of Receipt  
07 / 21 / 2014  
**Transaction ID : VNJ4GCZQ631E**

Amount of Each Receipt this Period  
15000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Ted Leonsis**

Mailing Address 627 N Glebe Rd Ste 850

City Arlington State VA Zip Code 22203-2144

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

Name of Employer Occupation  
Revolution Growth Fund Co-Founder and Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
07 / 22 / 2014  
**Transaction ID : VNJ4GCYQKW8**

Amount of Each Receipt this Period  
25000.00

Full Name (Last, First, Middle Initial)  
**C. Kevin Maroni**

Mailing Address 220 Clyde St

City Chestnut Hill State MA Zip Code 02467-2904

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

Name of Employer Occupation  
Spectrum Equity Senior Adviser

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
09 / 07 / 2014  
**Transaction ID : VNJ4GD473P9**

Amount of Each Receipt this Period  
25000.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50000.00

**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 13 OF 51
	<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)  
**Virginia Progress PAC**

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

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **145500.00**

Date of Receipt **09 / 07 / 2014**

**Transaction ID : VNJ4GD473P9E**

Amount of Each Receipt this Period **25000.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Alan L. Meltzer**

Mailing Address **6500 Rock Spring Dr Ste 500**

City **Bethesda** State **MD** Zip Code **20817-1149**

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

Name of Employer **The Meltzer Group** Occupation **CEO & Founder**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **6667.00**

Date of Receipt **07 / 21 / 2014**

**Transaction ID : VNJ4GCYCNE0**

Amount of Each Receipt this Period **6667.00**

Full Name (Last, First, Middle Initial)  
**c. Alan L. Meltzer**

Mailing Address **6500 Rock Spring Dr Ste 500**

City **Bethesda** State **MD** Zip Code **20817-1149**

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

Name of Employer **The Meltzer Group** Occupation **CEO & Founder**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **13334.00**

Date of Receipt **08 / 25 / 2014**

**Transaction ID : VNJ4GD1QWD0**

Amount of Each Receipt this Period **6667.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **13334.00**

**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 14 OF 51
	<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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial) <b>A. Alan L. Meltzer</b>		Date of Receipt MM / DD / YYYY 09 / 24 / 2014 <b>Transaction ID : VNJ4GD5JRK8</b>
Mailing Address 6500 Rock Spring Dr Ste 500		Amount of Each Receipt this Period 6666.00
City Bethesda	State MD	Zip Code 20817-1149
FEC ID number of contributing federal political committee. C	Name of Employer The Meltzer Group	Occupation CEO & Founder
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

Full Name (Last, First, Middle Initial) <b>B. G. Gilmer Minor III</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : VNJ4GD0C1J3</b>
Mailing Address 312 Oak Ln		Amount of Each Receipt this Period 25000.00
City Richmond	State VA	Zip Code 23226-1639
FEC ID number of contributing federal political committee. C	Name of Employer N/A	Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name (Last, First, Middle Initial) <b>C. Roger Mody</b>		Date of Receipt MM / DD / YYYY 08 / 13 / 2014 <b>Transaction ID : VNJ4GD47306</b>
Mailing Address 8312 Woodlea Mill Rd		Amount of Each Receipt this Period 10000.00
City McLean	State VA	Zip Code 22102-2320
FEC ID number of contributing federal political committee. C	Name of Employer The Mody Foundation	Occupation Founder & Chairman
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41666.00
<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 15 OF 51
<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)  
**Virginia Progress PAC**

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
145500.00

Date of Receipt  
08 / 13 / 2014  
**Transaction ID : VNJ4GD47306E**

Amount of Each Receipt this Period  
10000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Mark Nichols**

Mailing Address 1316 N Hills Blvd

City North Little Rock State AR Zip Code 72114-3763

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

Name of Employer Occupation  
Seven Summits, LLC Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
08 / 28 / 2014  
**Transaction ID : VNJ4GD47397**

Amount of Each Receipt this Period  
10000.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
145500.00

Date of Receipt  
08 / 28 / 2014  
**Transaction ID : VNJ4GD47397E**

Amount of Each Receipt this Period  
10000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<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 16 OF 51
<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)  
**Virginia Progress PAC**

**A.** Full Name (Last, First, Middle Initial)  
Nonfederal Political Education Fund of the Building & Construction Trades Union Building Trades Union

Mailing Address 815 16th St NW  
Ste 600

City Washington State DC Zip Code 20006-4101

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : VNJ4GD863M6**

Amount of Each Receipt this Period  
10000.00

**B.** Full Name (Last, First, Middle Initial)  
**Marjorie Roberts**

Mailing Address PO Box 6347

City Charlotte Amalie State VI Zip Code 00804-6347

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

Name of Employer Occupation  
Marjorie Roberts, PC Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2014

**Transaction ID : VNJ4GCZR664**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
145500.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2014

**Transaction ID : VNJ4GCZR664E**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<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 17 OF 51
	<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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)  
**A. Marjorie Roberts**

Mailing Address PO Box 6347

City State Zip Code  
Charlotte Amalie VI 00804-6347

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

Name of Employer Occupation  
Marjorie Roberts, PC Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2014

**Transaction ID : VNJ4GCZR6E4**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City State Zip Code  
West Somerville MA 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
145500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 11 / 2014

**Transaction ID : VNJ4GCZR6E4E**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**C. Brian N. Sheth**

Mailing Address 3407 Woodcutters Way

City State Zip Code  
Austin TX 78746-1545

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

Name of Employer Occupation  
Vista Equity Partners President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 07 / 2014

**Transaction ID : VNJ4GD0C246**

Amount of Each Receipt this Period  
50000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50500.00
<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 51
	<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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial) <b>A. Lauren Stack</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 12 / 2014
Mailing Address 210 Duke St		<b>Transaction ID : VNJ4GD47440</b>
City Alexandria	State VA	Zip Code 22314-3806
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00	
Name of Employer Corcoran Gallery of Art	Occupation Chief Operating Officer	* Earmarked Contribution: See Below
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 12 / 2014
Mailing Address PO Box 441146		<b>Transaction ID : VNJ4GD47440E</b>
City West Somerville	State MA	Zip Code 02144-0031
FEC ID number of contributing federal political committee. C C00401224	Amount of Each Receipt this Period 5000.00	
Name of Employer	Occupation Conduit total listed in Agg. field	<b>[MEMO ITEM]</b> Note: Above Contribution earmarked through this organization.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 145500.00	

Full Name (Last, First, Middle Initial) <b>C. Joshua Steiner</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 28 / 2014
Mailing Address 39 W 76th St		<b>Transaction ID : VNJ4GCZQ5Q6</b>
City New York	State NY	Zip Code 10023-1503
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10000.00	
Name of Employer Bloomberg LP	Occupation Head of Vertical	* Earmarked Contribution: See Below
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<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 19 OF 51
	<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)  
**Virginia Progress PAC**

**A. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
145500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2014

**Transaction ID : VNJ4GCZQ5Q6E**

Amount of Each Receipt this Period  

10000.00
----------

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B. Ranvir Trehan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1308 Ballantrae Farm Dr

City McLean	State VA	Zip Code 22101-3028
----------------	-------------	------------------------

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

Name of Employer Trehan Foundation	Occupation Founder
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

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

**Transaction ID : VNJ4GD478M2**

Amount of Each Receipt this Period  

1000.00
---------

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
145500.00

Date of Receipt  

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

**Transaction ID : VNJ4GD478M2E**

Amount of Each Receipt this Period  

1000.00
---------

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<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 51
	<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)  
**Virginia Progress PAC**

**A. Ernst Volgenau**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4350 Fair Lakes Ct  
 City State Zip Code  
 Fairfax VA 22033-4233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SRA International, Inc. Chairman  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : VNJ4GD4JBE9**  
 Amount of Each Receipt this Period  
 10000.00

**B. Jeffrey Walker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 Central Park W  
 Apt 14D  
 City State Zip Code  
 New York NY 10023-7714  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Teacher  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 14 / 2014  
**Transaction ID : VNJ4GCZQ6A7**  
 Amount of Each Receipt this Period  
 20000.00  
 \* Earmarked Contribution: See Below

**C. ActBlue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 441146  
 City State Zip Code  
 West Somerville MA 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 145500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 14 / 2014  
**Transaction ID : VNJ4GCZQ6A7E**  
 Amount of Each Receipt this Period  
 20000.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30000.00  
**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 21 OF 51
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Virginia Progress PAC**

**A. Phil Wendel**  
Full Name (Last, First, Middle Initial)

Mailing Address 455 2nd St SE

City Charlottesville	State VA	Zip Code 22902-5793
-------------------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Investor
-----------------------------------	------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : VNJ4GCZDQ79**

Amount of Each Receipt this Period  
 30000.00

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	555500.00

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

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

FOR LINE NUMBER: PAGE 22 OF 51  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Virginia Progress PAC**

**A. Common Ground PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1490 Quarterpath Rd  
Number 272

City Williamsburg State VA Zip Code 23185-6544

FEC ID number of contributing federal political committee. **C** C00538835

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 26 / 2014

**Transaction ID : VNJ4GD618E6**

Amount of Each Receipt this Period  
50000.00

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	50000.00

**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 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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		15		2014

Mailing Address PO Box 441146

**Transaction ID : VNH589TJ8F6**

City State Zip Code  
West Somerville MA 02144-0031

Amount of Each Disbursement this Period

829.50
--------

Purpose of Disbursement  
Merchant Services Fee

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		21		2014

Mailing Address PO Box 441146

**Transaction ID : VNH589TJ8E9**

City State Zip Code  
West Somerville MA 02144-0031

Amount of Each Disbursement this Period

592.50
--------

Purpose of Disbursement  
Merchant Services Fee

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		28		2014

Mailing Address PO Box 441146

**Transaction ID : VNH589TJ8D1**

City State Zip Code  
West Somerville MA 02144-0031

Amount of Each Disbursement this Period

395.00
--------

Purpose of Disbursement  
Merchant Services Fee

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

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

1817.00
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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

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NAME OF COMMITTEE (In Full)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services, Inc.**

Date of Disbursement

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

Mailing Address PO Box 441146

**Transaction ID : VNH589VK603**

City State Zip Code  
West Somerville MA 02144-0031

Amount of Each Disbursement this Period

395.00
--------

Purpose of Disbursement  
Merchant Services Fee

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2014

Mailing Address PO Box 441146

**Transaction ID : VNH589TSWS3**

City State Zip Code  
West Somerville MA 02144-0031

Amount of Each Disbursement this Period

19.75
-------

Purpose of Disbursement  
Merchant Services Fee

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2014

Mailing Address PO Box 441146

**Transaction ID : VNH589VK5K0**

City State Zip Code  
West Somerville MA 02144-0031

Amount of Each Disbursement this Period

395.00
--------

Purpose of Disbursement  
Merchant Services Fee

--

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)..... ▶

809.75
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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

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NAME OF COMMITTEE (In Full)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services, Inc.**

Date of Disbursement

Mailing Address PO Box 441146

M M M	/	D D D	/	Y Y Y Y Y
09		08		2014

City State Zip Code  
West Somerville MA 02144-0031

**Transaction ID : VNH589VK5M8**

Purpose of Disbursement  
Merchant Services Fee

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

987.50
--------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services, Inc.**

Date of Disbursement

Mailing Address PO Box 441146

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

City State Zip Code  
West Somerville MA 02144-0031

**Transaction ID : VNH589VK5N6**

Purpose of Disbursement  
Merchant Services Fee

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

987.50
--------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services, Inc.**

Date of Disbursement

Mailing Address PO Box 441146

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

City State Zip Code  
West Somerville MA 02144-0031

**Transaction ID : VNH589VK5Q2**

Purpose of Disbursement  
Merchant Services Fee

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

237.00
--------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

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

2212.00
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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

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NAME OF COMMITTEE (In Full)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services, Inc.**

Mailing Address PO Box 441146

City State Zip Code  
West Somerville MA 02144-0031

Purpose of Disbursement  
Merchant Services Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

**Transaction ID : VNH589VRWA9**

Amount of Each Disbursement this Period

592.50

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services, Inc.**

Mailing Address PO Box 441146

City State Zip Code  
West Somerville MA 02144-0031

Purpose of Disbursement  
Merchant Services Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2014

**Transaction ID : VNH589WB128**

Amount of Each Disbursement this Period

316.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Anzalone Liszt Grove Research, Inc.**

Mailing Address 260 Commerce St  
FI 4

City State Zip Code  
Montgomery AL 36104-2546

Purpose of Disbursement  
Polling Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2014

**Transaction ID : VNH589TQZ95**

Amount of Each Disbursement this Period

23800.00

Category/  
Type

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

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

24708.50

**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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Bluelabs**

Mailing Address 700 14th St NW  
Frnt 2

City Washington State DC Zip Code 20005-2016

Purpose of Disbursement  
Polling 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 / 08 / 2014

**Transaction ID : VNH589TQZA3**

Amount of Each Disbursement this Period

8000.00

Full Name (Last, First, Middle Initial)

**B. Bully Pulpit Interactive**

Mailing Address 1140 Connecticut Ave NW  
Ste 800

City Washington State DC Zip Code 20036-4010

Purpose of Disbursement  
Website Development Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2014

**Transaction ID : VNH589W0NT3**

Amount of Each Disbursement this Period

2940.00

Full Name (Last, First, Middle Initial)

**C. Clayton Cox**

Mailing Address 425 Massachusetts Ave NW  
# 222

City Washington State DC Zip Code 20001-2609

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2014

**Transaction ID : VNH589TGGB6**

Amount of Each Disbursement this Period

2173.39

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

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

13113.39

**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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Clayton Cox**

Mailing Address 425 Massachusetts Ave NW  
# 222

City Washington State DC Zip Code 20001-2609

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2014

**Transaction ID : VNH589TGGA8**

Amount of Each Disbursement this Period

2415.66

Full Name (Last, First, Middle Initial)

**B. Clayton Cox**

Mailing Address 425 Massachusetts Ave NW  
# 222

City Washington State DC Zip Code 20001-2609

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2014

**Transaction ID : VNH589VK637**

Amount of Each Disbursement this Period

2173.38

Full Name (Last, First, Middle Initial)

**C. Clayton Cox**

Mailing Address 425 Massachusetts Ave NW  
# 222

City Washington State DC Zip Code 20001-2609

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2014

**Transaction ID : VNH589VK645**

Amount of Each Disbursement this Period

2315.96

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

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

6905.00

**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 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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Clayton Cox**

Mailing Address 425 Massachusetts Ave NW  
# 222

City Washington State DC Zip Code 20001-2609

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : VNH589VK653**

Amount of Each Disbursement this Period

2173.39

Full Name (Last, First, Middle Initial)

**B. Clayton Cox**

Mailing Address 425 Massachusetts Ave NW  
# 222

City Washington State DC Zip Code 20001-2609

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : VNH589WB1E3**

Amount of Each Disbursement this Period

2315.95

Full Name (Last, First, Middle Initial)

**C. Michael M. Halle**

Mailing Address 475 K St NW  
Unit 517

City Washington State DC Zip Code 20001-5259

Purpose of Disbursement  
Reimbursement - Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2014

**Transaction ID : VNH589SX5Z1**

Amount of Each Disbursement this Period

49.83

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

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

4539.17

**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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Michael M. Halle**

Mailing Address 475 K St NW  
Unit 517

City Washington State DC Zip Code 20001-5259

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2014

**Transaction ID : VNH589TGG82**

Amount of Each Disbursement this Period

2500.04

Full Name (Last, First, Middle Initial)

**B. Michael M. Halle**

Mailing Address 475 K St NW  
Unit 517

City Washington State DC Zip Code 20001-5259

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2014

**Transaction ID : VNH589TGG90**

Amount of Each Disbursement this Period

2500.05

Full Name (Last, First, Middle Initial)

**C. Michael M. Halle**

Mailing Address 475 K St NW  
Unit 517

City Washington State DC Zip Code 20001-5259

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2014

**Transaction ID : VNH589VK694**

Amount of Each Disbursement this Period

2500.04

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

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

7500.13

**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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Michael M. Halle**

Mailing Address 475 K St NW  
Unit 517

City Washington State DC Zip Code 20001-5259

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VNH589VK6A2**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Michael M. Halle**

Mailing Address 475 K St NW  
Unit 517

City Washington State DC Zip Code 20001-5259

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VNH589VK6C8**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Michael M. Halle**

Mailing Address 475 K St NW  
Unit 517

City Washington State DC Zip Code 20001-5259

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VNH589WB1H5**

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 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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Harold C. Malchow Jr.**

Mailing Address 3442 Roberts Ln

City State Zip Code  
Arlington VA 22207-5335

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VNH589TGG25**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Harold C. Malchow Jr.**

Mailing Address 3442 Roberts Ln

City State Zip Code  
Arlington VA 22207-5335

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VNH589TGG33**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Harold C. Malchow Jr.**

Mailing Address 3442 Roberts Ln

City State Zip Code  
Arlington VA 22207-5335

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VNH589VK6E4**

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 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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Harold C. Malchow Jr.**

Mailing Address 3442 Roberts Ln

City State Zip Code  
Arlington VA 22207-5335

Purpose of Disbursement  
Strategic Consulting Services

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  
08 / 29 / 2014

**Transaction ID : VNH589VK6G0**

Amount of Each Disbursement this Period

3750.00

Full Name (Last, First, Middle Initial)

**B. Harold C. Malchow Jr.**

Mailing Address 3442 Roberts Ln

City State Zip Code  
Arlington VA 22207-5335

Purpose of Disbursement  
Strategic Consulting Services

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  
09 / 15 / 2014

**Transaction ID : VNH589VK6H7**

Amount of Each Disbursement this Period

3750.00

Full Name (Last, First, Middle Initial)

**C. Harold C. Malchow Jr.**

Mailing Address 3442 Roberts Ln

City State Zip Code  
Arlington VA 22207-5335

Purpose of Disbursement  
Strategic Consulting Services

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  
09 / 30 / 2014

**Transaction ID : VNH589WB1F1**

Amount of Each Disbursement this Period

3750.00

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

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

11250.00

**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)

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<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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Robert E. Mook**

Mailing Address 525 G St SE  
Apt 2

City Washington State DC Zip Code 20003-4255

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2014

**Transaction ID : VNH589TGG59**

Amount of Each Disbursement this Period

2500.04

Full Name (Last, First, Middle Initial)

**B. Robert E. Mook**

Mailing Address 525 G St SE  
Apt 2

City Washington State DC Zip Code 20003-4255

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2014

**Transaction ID : VNH589TGG67**

Amount of Each Disbursement this Period

2500.05

Full Name (Last, First, Middle Initial)

**C. Robert E. Mook**

Mailing Address 525 G St SE  
Apt 2

City Washington State DC Zip Code 20003-4255

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2014

**Transaction ID : VNH589VK6P7**

Amount of Each Disbursement this Period

2500.04

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

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

7500.13

**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)

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<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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Robert E. Mook**

Mailing Address 525 G St SE  
Apt 2

City Washington State DC Zip Code 20003-4255

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2014

**Transaction ID : VNH589VK6Q5**

Amount of Each Disbursement this Period

2500.05

Full Name (Last, First, Middle Initial)

**B. Robert E. Mook**

Mailing Address 525 G St SE  
Apt 2

City Washington State DC Zip Code 20003-4255

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : VNH589VK6R3**

Amount of Each Disbursement this Period

2500.04

Full Name (Last, First, Middle Initial)

**C. Robert E. Mook**

Mailing Address 525 G St SE  
Apt 2

City Washington State DC Zip Code 20003-4255

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : VNH589WB1K1**

Amount of Each Disbursement this Period

2500.05

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

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

7500.14

**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)

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<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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Database Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VNH589TGK97**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VNH589TGGJ1**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VNH589TGGM7**

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 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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2014

Transaction ID : VNH589WB160

Amount of Each Disbursement this Period

90.80

Full Name (Last, First, Middle Initial)

**B. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2014

Transaction ID : VNH589TGGC4

Amount of Each Disbursement this Period

4264.33

Full Name (Last, First, Middle Initial)

**C. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2014

Transaction ID : VNH589TGGG6

Amount of Each Disbursement this Period

25.74

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

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

4380.87

**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 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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2014

Transaction ID : VNH589WB2N9

Amount of Each Disbursement this Period

82.03

Full Name (Last, First, Middle Initial)

**B. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2014

Transaction ID : VNH589VK6S1

Amount of Each Disbursement this Period

4264.36

Full Name (Last, First, Middle Initial)

**C. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2014

Transaction ID : VNH589VK6X2

Amount of Each Disbursement this Period

35.74

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

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

4382.13

**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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Payroll 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 / 15 / 2014

Transaction ID : VNH589VK704

Amount of Each Disbursement this Period

81.81

Full Name (Last, First, Middle Initial)

**B. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2014

Transaction ID : VNH589VK6T9

Amount of Each Disbursement this Period

4382.57

Full Name (Last, First, Middle Initial)

**C. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2014

Transaction ID : VNH589VK6Y0

Amount of Each Disbursement this Period

26.21

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

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

4490.59

**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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2014

**Transaction ID : VNH589VK720**

Amount of Each Disbursement this Period

82.03

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : VNH589VK6W4**

Amount of Each Disbursement this Period

4264.35

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : VNH589VK6Z8**

Amount of Each Disbursement this Period

35.74

Category/  
Type

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

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

4382.12



**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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : VNH589VK712

Amount of Each Disbursement this Period

81.81

Full Name (Last, First, Middle Initial)

**B. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : VNH589WB178

Amount of Each Disbursement this Period

4382.58

Full Name (Last, First, Middle Initial)

**C. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : VNH589WB1A2

Amount of Each Disbursement this Period

26.21

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

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

4490.60

**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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Paychex, Inc.**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : VNH589WB1B9**

Amount of Each Disbursement this Period

82.03

Full Name (Last, First, Middle Initial)

**B. Perkins Coie, LLP**

Mailing Address 1201 3rd Ave Ste 4800

City Seattle State WA Zip Code 98101-3266

Purpose of Disbursement  
Legal & Compliance Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2014

**Transaction ID : VNH589THWJ6**

Amount of Each Disbursement this Period

4549.79

Full Name (Last, First, Middle Initial)

**C. Perkins Coie, LLP**

Mailing Address 1201 3rd Ave Ste 4800

City Seattle State WA Zip Code 98101-3266

Purpose of Disbursement  
Legal & Compliance Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2014

**Transaction ID : VNH589W0NS5**

Amount of Each Disbursement this Period

4114.18

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

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

8746.00

**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 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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Shorr Johnson Magnus**

Mailing Address 100 N 20th St  
Ste 201

City Philadelphia State PA Zip Code 19103-1454

Purpose of Disbursement  
Media Production Costs

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 Y  
07 / 23 / 2014

Transaction ID : VNH589TFFS5

Amount of Each Disbursement this Period

4317.64

Full Name (Last, First, Middle Initial)

**B. State Corporation Commission**

Mailing Address PO Box 1197

City Richmond State VA Zip Code 23218-1197

Purpose of Disbursement  
Corporation Fees

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 Y  
08 / 21 / 2014

Transaction ID : VNH589TZCW8

Amount of Each Disbursement this Period

275.00

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address PO Box 72470244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Shipping

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 Y  
07 / 21 / 2014

Transaction ID : VNH589TC510

Amount of Each Disbursement this Period

18.91

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

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

4611.55

# 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)  
**Virginia Progress PAC**

Full Name (Last, First, Middle Initial)

### A. UPS

Mailing Address PO Box 72470244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Shipping

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 Y
08	/	04	/	2014

Transaction ID : VNH589TM361

Amount of Each Disbursement this Period

16.63
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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 M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

Amount of Each Disbursement this Period

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

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

16.63
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147005.93
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 45 OF 51
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Virginia Progress PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>New Partners Consulting, Inc.</b>	Nature of Debt (Purpose): Research Consulting Services
Mailing Address 1250 I St NW Ste 200	
City State Washington DC Zip Code 20005-5977	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : VNF6R9HA4F6</b>	
Amount Incurred This Period 9003.20	Payment This Period 0.00	Outstanding Balance at Close of This Period 9003.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Perkins Coie, LLP</b>	Nature of Debt (Purpose): Legal & Compliance Services
Mailing Address 1201 3rd Ave Ste 4800	
City State Seattle WA Zip Code 98101-3266	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : VNF6R9HA4E8</b>	
Amount Incurred This Period 5705.80	Payment This Period 0.00	Outstanding Balance at Close of This Period 5705.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Shorr Johnson Magnus</b>	Nature of Debt (Purpose): Media Production Costs
Mailing Address 100 N 20th St Ste 201	
City State Philadelphia PA Zip Code 19103-1454	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : VNF6R9HA4C2</b>	
Amount Incurred This Period 14425.95	Payment This Period 0.00	Outstanding Balance at Close of This Period 14425.95

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	29134.95
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 46 OF 51
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Virginia Progress PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Shorr Johnson Magnus</b>	Nature of Debt (Purpose): Shipping
Mailing Address 100 N 20th St Ste 201	
City State Zip Code Philadelphia PA 19103-1454	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : VNF6R9HA4D0</b>	
Amount Incurred This Period 761.39	Payment This Period 0.00	Outstanding Balance at Close of This Period 761.39

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Shorr Johnson Magnus</b>	Nature of Debt (Purpose): Media Production Costs
Mailing Address 100 N 20th St Ste 201	
City State Zip Code Philadelphia PA 19103-1454	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : VNF6R9HA583</b>	
Amount Incurred This Period 1801.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 1801.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2563.14
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	31698.09
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	31698.09

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

NAME OF COMMITTEE (In Full) <b>Virginia Progress PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00555516
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 <b>Shorr Johnson Magnus</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>08 / 23 / 2014</b>	
Mailing Address 100 N 20th St Ste 201		Amount <b>4317.63</b>	
City Philadelphia	State PA	Zip Code 19103-1454	<b>Transaction ID : VNH589V1BF0</b>
Purpose of Expenditure Media Production Costs	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 23 / 2014</b>	
Name of Federal Candidate Edward W Gillespie		Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought <b>1737247.52</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Shorr Johnson Magnus</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 10 / 2014</b>	
Mailing Address 100 N 20th St Ste 201		Amount <b>4317.64</b>	
City Philadelphia	State PA	Zip Code 19103-1454	<b>Transaction ID : VNH589VE0P6</b>
Purpose of Expenditure Media Production Costs	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 23 / 2014</b>	
Name of Federal Candidate Edward W Gillespie		Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought <b>1737247.52</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>8635.27</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> 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.

*Frank Conner*  
Signature

[Electronically Filed]

Date **10 / 15 / 2014**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Virginia Progress PAC
FEC IDENTIFICATION NUMBER C C0055516
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Shorr Johnson Magnus
Mailing Address 100 N 20th St Ste 201
City Philadelphia State PA Zip Code 19103-1454
Purpose of Expenditure Media Buy Category/Type 004
Name of Federal Candidate Edward W Gillespie Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1737247.52

Date of Public Distribution/Dissemination 08 / 23 / 2014
Amount 50000.00
Transaction ID : VNH589TZE1
Date of Disbursement or Obligation 08 / 21 / 2014
Office Sought: House Senate State: VA
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee Shorr Johnson Magnus
Mailing Address 100 N 20th St Ste 201
City Philadelphia State PA Zip Code 19103-1454
Purpose of Expenditure Media Buy Category/Type 004
Name of Federal Candidate Edward W Gillespie Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1737247.52

Date of Public Distribution/Dissemination 09 / 02 / 2014
Amount 480142.80
Transaction ID : VNH589V3478
Date of Disbursement or Obligation 08 / 27 / 2014
Office Sought: House Senate State: VA
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 980142.80
(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.

Signature Frank Conner [Electronically Filed] Date 10 / 15 / 2014



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Virginia Progress PAC
FEC IDENTIFICATION NUMBER C C00555516
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Shorr Johnson Magnus
[MEMO ITEM]
Mailing Address 100 N 20th St Ste 201
City Philadelphia State PA Zip Code 19103-1454
Purpose of Expenditure Media Production Costs - Estimate
Category/Type 004
Name of Federal Candidate Edward W Gillespie
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1737247.52

Date of Public Distribution/Dissemination 09/02/2014
Amount 1801.75
Transaction ID : VNH589V3XM4
Date of Disbursement or Obligation
Disbursement For: Primary General 2014

Full Name of Payee Shorr Johnson Magnus
Mailing Address 100 N 20th St Ste 201
City Philadelphia State PA Zip Code 19103-1454
Purpose of Expenditure Media Production Costs
Category/Type 004
Name of Federal Candidate Edward W Gillespie
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1737247.52

Date of Public Distribution/Dissemination 08/23/2014
Amount 16329.56
Transaction ID : VNH589TZEG9
Date of Disbursement or Obligation 09/03/2014
Disbursement For: Primary General 2014

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 16329.56

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.

Signature Frank Conner [Electronically Filed] Date 10/15/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Virginia Progress PAC
FEC IDENTIFICATION NUMBER C C00555516
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Shorr Johnson Magnus
Mailing Address 100 N 20th St Ste 201
City Philadelphia State PA Zip Code 19103-1454
Purpose of Expenditure Media Production Costs - Estimate
Category/Type 004
Name of Federal Candidate Edward W Gillespie
Calendar Year-To-Date Per Election for Office Sought 1737247.52

Date of Public Distribution/Dissemination 09/10/2014
Amount 14425.95
Transaction ID : VNH589VE0Q4
Date of Disbursement or Obligation
Disbursement For: General 2014

Full Name of Payee Shorr Johnson Magnus
Mailing Address 100 N 20th St Ste 201
City Philadelphia State PA Zip Code 19103-1454
Purpose of Expenditure Media Buy
Category/Type
Name of Federal Candidate Edward W Gillespie
Calendar Year-To-Date Per Election for Office Sought 1737247.52

Date of Public Distribution/Dissemination 09/16/2014
Amount 353935.40
Transaction ID : VNH589VJ3K9
Date of Disbursement or Obligation 09/15/2014
Disbursement For: General 2014

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 353935.40

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.

Signature Frank Conner [Electronically Filed] Date 10/15/2014

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

NAME OF COMMITTEE (In Full) <b>Virginia Progress PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00555516
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 <b>Shorr Johnson Magnus</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 23 / 2014</b>
Mailing Address 100 N 20th St Ste 201	Amount <b>361215.40</b>
City Philadelphia      State PA      Zip Code 19103-1454	<b>Transaction ID : VNH589VTR81</b>
Purpose of Expenditure Media Buy      Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>09 / 22 / 2014</b>
Name of Federal Candidate Edward W Gillespie <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>VA</u>
Calendar Year-To-Date Per Election for Office Sought <b>1737247.52</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Shorr Johnson Magnus</b> <b>[MEMO ITEM]</b> *	Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 23 / 2014</b>
Mailing Address 100 N 20th St Ste 201	Amount <b>761.39</b>
City Philadelphia      State PA      Zip Code 19103-1454	<b>Transaction ID : VNH589VTR73</b>
Purpose of Expenditure Shipping      Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Edward W Gillespie <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>VA</u>
Calendar Year-To-Date Per Election for Office Sought <b>1737247.52</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>361215.40</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<b>1720258.43</b>

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.

*Frank Conner*      **[Electronically Filed]**      Date **10 / 15 / 2014**

Signature \_\_\_\_\_