

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NARAL Pro-Choice America PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		392669.98
(b) Cash on Hand at Beginning of Reporting Period.....	406437.83	
(c) Total Receipts (from Line 19)	3015.00	27885.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	409452.83	420554.98
7. Total Disbursements (from Line 31).....	72309.32	83411.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	337143.51	337143.51
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

NARAL Pro-Choice America PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1500.00	12075.00
(ii) Unitemized	1515.00	15810.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3015.00	27885.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3015.00	27885.00
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))..... ▶	3015.00	27885.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3015.00	27885.00

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	3309.32	13411.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3309.32	13411.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	64000.00	65000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
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	5000.00	5000.00
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)) ..	72309.32	83411.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	72309.32	83411.47

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)	3015.00	27885.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3015.00	27885.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3309.32	13411.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3309.32	13411.47

**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 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
NARAL Pro-Choice America PAC

Full Name (Last, First, Middle Initial) A. Rosetta M. Celentano		Date of Receipt MM / DD / YYYY 03 / 06 / 2014
Mailing Address PO Box 333		Transaction ID : C9987187
City Hyannis Port	State MA	Zip Code 02647-0333
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Alex S. Hill		Date of Receipt MM / DD / YYYY 03 / 06 / 2014
Mailing Address 1604 Pease Rd		Transaction ID : C9987206
City Austin	State TX	Zip Code 78703-3414
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Self Employed	Occupation Psychiatrist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Debbie E. Neiman		Date of Receipt MM / DD / YYYY 03 / 06 / 2014
Mailing Address 7 Oak Meadow Lane		Transaction ID : C9987188
City Carmel Valley	State CA	Zip Code 93924-9455
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	1500.00

**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)
NARAL Pro-Choice America PAC

Full Name (Last, First, Middle Initial)

A. First Data Merchant Services

Mailing Address 12050 Baltimore Ave

City State Zip Code
Beltsville MD 20705

Purpose of Disbursement
Credit card processing fee for PAC

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	8			2	0	1	4		

Transaction ID : D473219

Amount of Each Disbursement this Period

1	2	7	9	7
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Full Name (Last, First, Middle Initial)

B. Mission Control

Mailing Address 114 A Mansfield Hollow Rd

City State Zip Code
Mansfield Center CT 06250

Purpose of Disbursement
Printing for PAC

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	4		

Transaction ID : D472255

Amount of Each Disbursement this Period

2	7	0	6	.	0	0
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Full Name (Last, First, Middle Initial)

C. Squire Lemkin & O'Brien LLP

Mailing Address 111 Rockville Pike
Ste 475

City State Zip Code
Rockville MD 20850-5162

Purpose of Disbursement
Accounting services for PAC

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	1	4		

Transaction ID : D472246

Amount of Each Disbursement this Period

4	5	0	.	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3	2	8	3	.	9	7
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3	2	8	3	.	9	7
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America PAC

Full Name (Last, First, Middle Initial)

A. AIMEE BELGARD FOR CONGRESS

Mailing Address PO Box 35

City Willingboro State NJ Zip Code 08046-0035

Purpose of Disbursement
Contribution

Candidate Name
AIMEE BELGARD

Office Sought: House
 Senate
 President
State: NJ District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2014

Transaction ID : D472259

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Al Franken for Senate

Mailing Address PO Box 583144

City Minneapolis State MN Zip Code 55458

Purpose of Disbursement
Contribution

Candidate Name
Al Franken

Office Sought: House
 Senate
 President
State: MN District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2014

Transaction ID : D472270

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Alaskans for Begich

Mailing Address PO BOX 240287

City ANCHORAGE State AK Zip Code 99524

Purpose of Disbursement
Contribution

Candidate Name
Mark Begich

Office Sought: House
 Senate
 President
State: AK District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2014

Transaction ID : D472262

Amount of Each Disbursement this Period

3000.00

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

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

8500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America PAC

Full Name (Last, First, Middle Initial)

A. ALISON FOR KENTUCKY

Mailing Address 340 Democrat Dr

City Frankfort State KY Zip Code 40601-8209

Purpose of Disbursement
Contribution

Candidate Name

ALISON LUNDERGAN GRIMES

Office Sought: House
 Senate
 President
State: KY District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2014

Transaction ID : D472263

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Alma Adams for Congress

Mailing Address PO Box 20622

City Greensboro State NC Zip Code 27420-0622

Purpose of Disbursement
Contribution

Candidate Name

ALMA SHEALEY ADAMS

Office Sought: House
 Senate
 President
State: NC District: 12

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2014

Transaction ID : D472248

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. APPEL FOR IOWA, INC.

Mailing Address PO Box 702

City Des Moines State IA Zip Code 50303-0702

Purpose of Disbursement
Contribution

Candidate Name

STACI APPEL

Office Sought: House
 Senate
 President
State: IA District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2014

Transaction ID : D472264

Amount of Each Disbursement this Period

2500.00

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

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

8000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America PAC

Full Name (Last, First, Middle Initial)

A. Bera for Congress

Mailing Address PO Box 582496

City Elk Grove State CA Zip Code 95758-0042

Purpose of Disbursement
Contribution

Candidate Name

Ami Bera

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	4

Transaction ID : D472265

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. CAIN FOR CONGRESS

Mailing Address PO Box 1523

City Bangor State ME Zip Code 04402-1523

Purpose of Disbursement
Contribution

Candidate Name

EMILY ANN CAIN

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	4

Transaction ID : D472266

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Carol Shea-Porter for Congress

Mailing Address PO Box 453

City Rochester State NH Zip Code 03866-0453

Purpose of Disbursement
Contribution

Candidate Name

Carl Shea-Porter

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NH District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	4

Transaction ID : D472267

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

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

7	5	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

7	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Michael Wager

Mailing Address PO Box 779

City Chagrin Falls State OH Zip Code 44022-0779

Purpose of Disbursement Contribution

Candidate Name
MICHAEL WAGER

Office Sought: House Senate President
State: OH District: 14

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2014

Transaction ID : **D472268**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Duckworth for Congress

Mailing Address PO Box 8867

City Rolling Meadows State IL Zip Code 60008-8867

Purpose of Disbursement Contribution

Candidate Name
L. Tammy Duckworth

Office Sought: House Senate President
State: IL District: 08

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2014

Transaction ID : **D472250**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address PO Box 77

City East Moline State IL Zip Code 61244-0077

Purpose of Disbursement Contribution

Candidate Name
Cheri Bustos

Office Sought: House Senate President
State: IL District: 17

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2014

Transaction ID : **D472251**

Amount of Each Disbursement this Period

1000.00

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

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

4500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JEANNE SHAHEEN

Mailing Address 105 N State St

City State Zip Code
Concord NH 03301-4334

Purpose of Disbursement
Contribution

Candidate Name
JEANNE SHAHEEN

Office Sought: House
 Senate
 President
State: NH District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	25	/	2014

Transaction ID : D472273

Amount of Each Disbursement this Period

3,000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF RENTERIA

Mailing Address P.O. BOX 655

City State Zip Code
SANGER CA 93657

Purpose of Disbursement
Contribution

Candidate Name
AMANDA RENTERIA

Office Sought: House
 Senate
 President
State: CA District: 21

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	25	/	2014

Transaction ID : D472272

Amount of Each Disbursement this Period

2,500.00

Full Name (Last, First, Middle Initial)

C. Joe Garcia for Congress

Mailing Address PO BOX 0595
Suite 102

City State Zip Code
Miami FL 33196

Purpose of Disbursement
Contribution

Candidate Name
Joe Garcia

Office Sought: House
 Senate
 President
State: FL District: 25

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	25	/	2014

Transaction ID : D472274

Amount of Each Disbursement this Period

2,500.00

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

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

8000.00

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

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America PAC

Full Name (Last, First, Middle Initial)

A. JOHN FOUST FOR CONGRESS

Mailing Address PO BOX 962

City State Zip Code
MCLEAN VA 22101

Purpose of Disbursement
Contribution

Candidate Name
JOHN FOUST

Office Sought: House
 Senate
 President
State: VA District: 10

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	4

Transaction ID : **D472275**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Kirkpatrick for Arizona

Mailing Address PO Box 12011

City State Zip Code
Casa Grande AZ 85130-0549

Purpose of Disbursement
Contribution

Candidate Name
Ann Kirkpatrick

Office Sought: House
 Senate
 President
State: AZ District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	4

Transaction ID : **D472276**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Kuster for Congress

Mailing Address PO Box 1498

City State Zip Code
Concord NH 03302-1498

Purpose of Disbursement
Contribution

Candidate Name
Ann McLean Kuster

Office Sought: House
 Senate
 President
State: NH District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	4

Transaction ID : **D472277**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

7	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America PAC

Full Name (Last, First, Middle Initial)

A. Kyrsten Sinema for Congress

Mailing Address PO Box 25879

City State Zip Code
Tempe AZ 85285-5879

Purpose of Disbursement
Contribution

Candidate Name

Kyrsten Sinema

Office Sought: House
 Senate
 President
State: AZ District: 09

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2014

Transaction ID : D472278

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. The Markey Committee

Mailing Address PO Box 526

City State Zip Code
Medford MA 02155-0006

Purpose of Disbursement
Contribution

Candidate Name

Edward John Markey

Office Sought: House
 Senate
 President
State: MA District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2014

Transaction ID : D472282

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Dr. Raul Ruiz for Congress

Mailing Address PO Box 6116

City State Zip Code
La Quinta CA 92248-6116

Purpose of Disbursement
Contribution

Candidate Name

Dr. Raul Ruiz

Office Sought: House
 Senate
 President
State: CA District: 36

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2014

Transaction ID : D472279

Amount of Each Disbursement this Period

2500.00

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

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

6000.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America PAC

Full Name (Last, First, Middle Initial)

A. Ron Barber for Congress

Mailing Address PO Box 57715

City Tucson State AZ Zip Code 85732-7715

Purpose of Disbursement
Contribution

Candidate Name
Ronald Barber

Office Sought: House
 Senate
 President
State: AZ District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : D472280

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Schneider for Congress

Mailing Address PO Box 1318

City Deerfield State IL Zip Code 60015-6005

Purpose of Disbursement
Contribution

Candidate Name
Bradley S. Schneider

Office Sought: House
 Senate
 President
State: IL District: 10

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : D472252

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. STEVE COHEN FOR CONGRESS

Mailing Address 349 KENILWORTH

City MEMPHIS State TN Zip Code 38112

Purpose of Disbursement
Contribution

Candidate Name
Steve Cohen

Office Sought: House
 Senate
 President
State: TN District: 09

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : D472269

Amount of Each Disbursement this Period

2500.00

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

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

6000.00

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

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America PAC

Full Name (Last, First, Middle Initial)

A. The Democratic Party of Wisconsin

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Mailing Address 15 N Pinckney St
Suite 200

Transaction ID : D472281

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

5,000.00

Purpose of Disbursement
Contribution

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. WALSH FOR MONTANA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Mailing Address PO BOX 1724

Transaction ID : D472283

City HELENA State MT Zip Code 59624

Amount of Each Disbursement this Period

3,000.00

Purpose of Disbursement
Contribution

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MT District: 00

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

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

8000.00

64000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America PAC

Full Name (Last, First, Middle Initial)

A. Friends for Flores

Mailing Address 2058 N Western Ave

City Chicago State IL Zip Code 60647

Purpose of Disbursement
Non-federal Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : D472271

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Michaud for Maine

Mailing Address PO Box 1590

City Portland State ME Zip Code 04104-1590

Purpose of Disbursement
Non-federal Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : D472284

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Michaud for Maine

Mailing Address PO Box 1590

City Portland State ME Zip Code 04104-1590

Purpose of Disbursement
Non-federal Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : D472285

Amount of Each Disbursement this Period

1000.00

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

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

5000.00

5000.00
