

# 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.   
**REVOLUTION PAC**

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

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

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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

5. Covering Period  /  /  through  /  /

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

Type or Print Name of Treasurer Dan Backer

Signature of Treasurer Dan Backer [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**REVOLUTION 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="2013"/>	<input type="text" value="2824.52"/>	<input type="text" value="2824.52"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="20361.62"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="6088.00"/>	<input type="text" value="112983.92"/>
(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="26449.62"/>	<input type="text" value="115808.44"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8072.70"/>	<input type="text" value="97431.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="18376.92"/>	<input type="text" value="18376.92"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
**REVOLUTION 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).....	0.00	3245.00
(ii) Unitemized .....	832.00	103674.92
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	832.00	106919.92
(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) .....	832.00	106919.92
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.).....	5256.00	6064.00
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))..... ▶	6088.00	112983.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6088.00	112983.92

**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 .....	2915.98	17455.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2915.98	17455.81
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) .....	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 .....	60.00	264.00
(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)).....	60.00	264.00
29. Other Disbursements .....	5096.72	79711.71
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)) ..	8072.70	97431.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8072.70	97431.52

**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) .....	832.00	106919.92
34. Total Contribution Refunds (from Line 28(d)) .....	60.00	264.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	772.00	106655.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2915.98	17455.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2915.98	17455.81

**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 15
<input 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 checked="" 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)  
**REVOLUTION PAC**

Full Name (Last, First, Middle Initial) <b>A. DEAN ELLERMEIER</b>		Date of Receipt MM / DD / YYYY 09 / 18 / 2013 <b>Transaction ID : SA17.10817</b>
Mailing Address 1568 COUNTY RD E		Amount of Each Receipt this Period 110.00
City SCRIBNER	State NE	Zip Code 68057
FEC ID number of contributing federal political committee. C	Carey contribution	
Name of Employer	Occupation Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. Jared Friedman</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2013 <b>Transaction ID : SA17.10775</b>
Mailing Address 23 Damascus Dr		Amount of Each Receipt this Period 210.00
City Marlboro	State NJ	Zip Code 07746-0000
FEC ID number of contributing federal political committee. C	Carey contribution	
Name of Employer jAY TALL	Occupation Construction Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

Full Name (Last, First, Middle Initial) <b>C. Ronald Quin</b>		Date of Receipt MM / DD / YYYY 09 / 26 / 2013 <b>Transaction ID : SA17.10924</b>
Mailing Address 24178 Leeward Dr		Amount of Each Receipt this Period 215.00
City Gulfport	State MS	Zip Code 39503
FEC ID number of contributing federal political committee. C	Carey contribution	
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 ▼ 330.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	535.00
<b>TOTAL</b> This Period (last page this line number only).....▶	535.00

**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)  
**REVOLUTION PAC**

Full Name (Last, First, Middle Initial)

**A. Allegiance Direct, LLC**

Mailing Address 421 East E Street

City Purcellville State VA Zip Code 20132

Purpose of Disbursement  
Fundraising services

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 03 / 2013

**Transaction ID : SB21B.11018**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. DBCS**

Mailing Address 717 King Street  
Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Legal and compliance consulting

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2013

**Transaction ID : SB21B.11011**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. DBCS**

Mailing Address 717 King Street  
Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Legal and compliance consulting

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2013

**Transaction ID : SB21B.11043**

Amount of Each Disbursement this Period

500.00

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

2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**REVOLUTION PAC**

Full Name (Last, First, Middle Initial)

**A. InfoCision Management Corp.**

Mailing Address 325 Springfield Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Fundraising services

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2013

Transaction ID : SB21B.11042

Amount of Each Disbursement this Period

462.68

Full Name (Last, First, Middle Initial)

**B. Political Media, Inc.**

Mailing Address 406 First Street SE  
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Web content services

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2013

Transaction ID : SB21B.11020

Amount of Each Disbursement this Period

218.75

Full Name (Last, First, Middle Initial)

**C. Political Media, Inc.**

Mailing Address 406 First Street SE  
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Web content services

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 21 / 2013

Transaction ID : SB21B.11031

Amount of Each Disbursement this Period

140.00

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

821.43

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

2821.43



**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)  
**REVOLUTION PAC**

Full Name (Last, First, Middle Initial)

**A. DBCS**

Mailing Address 717 King Street  
Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Carey account; legal and compliance consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.11024**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. DBCS**

Mailing Address 717 King Street  
Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Carey account; legal and compliance consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.11038**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. InfoCision Management Corp.**

Mailing Address 325 Springfield Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Carey account; fundrasing services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.11022**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REVOLUTION PAC**

Full Name (Last, First, Middle Initial)

**A. InfoCision Management Corp.**

Mailing Address 325 Springfield Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Carey account; fundrasing services

003

Candidate Name

Category/  
Type

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  
07 / 26 / 2013

Transaction ID : SB29.11023

Amount of Each Disbursement this Period

84.11

Full Name (Last, First, Middle Initial)

**B. InfoCision Management Corp.**

Mailing Address 325 Springfield Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Carey account; fundrasing services

003

Candidate Name

Category/  
Type

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  
08 / 06 / 2013

Transaction ID : SB29.11028

Amount of Each Disbursement this Period

46.15

Full Name (Last, First, Middle Initial)

**C. InfoCision Management Corp.**

Mailing Address 325 Springfield Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Carey account; fundrasing services

003

Candidate Name

Category/  
Type

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  
08 / 19 / 2013

Transaction ID : SB29.11030

Amount of Each Disbursement this Period

12.50

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

142.76

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REVOLUTION PAC**

Full Name (Last, First, Middle Initial)

**A. InfoCision Management Corp.**

Mailing Address 325 Springfield Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Carey account; fundrasing services

003

Candidate Name

Category/  
Type

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  
09 / 13 / 2013

Transaction ID : SB29.11032

Amount of Each Disbursement this Period

34.80

Full Name (Last, First, Middle Initial)

**B. InfoCision Management Corp.**

Mailing Address 325 Springfield Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Carey account; fundrasing services

003

Candidate Name

Category/  
Type

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  
09 / 16 / 2013

Transaction ID : SB29.11033

Amount of Each Disbursement this Period

17.33

Full Name (Last, First, Middle Initial)

**C. InfoCision Management Corp.**

Mailing Address 325 Springfield Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Carey account; fundrasing services

003

Candidate Name

Category/  
Type

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  
09 / 23 / 2013

Transaction ID : SB29.11034

Amount of Each Disbursement this Period

544.49

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

596.62

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REVOLUTION PAC**

Full Name (Last, First, Middle Initial)

**A. InfoCision Management Corp.**

Mailing Address 325 Springfield Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Carey account; fundraising services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB29.11036**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. InfoCision Management Corp.**

Mailing Address 325 Springfield Drive

City Akron State OH Zip Code 44333

Purpose of Disbursement  
Carey account; fundraising services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB29.11037**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. PCI**

Mailing Address 902 Chinquapin Road

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Carey account; merchant processing fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB29.11029**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REVOLUTION PAC**

Full Name (Last, First, Middle Initial)

**A. PCI**

Mailing Address 902 Chinquapin Road

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Carey account; merchant processing fees

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2013

Transaction ID : SB29.11040

Amount of Each Disbursement this Period

151.47

Full Name (Last, First, Middle Initial)

**B. PCI**

Mailing Address 902 Chinquapin Road

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Carey account; merchant processing fees

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2013

Transaction ID : SB29.11041

Amount of Each Disbursement this Period

1.89

Full Name (Last, First, Middle Initial)

**C. PCI**

Mailing Address 902 Chinquapin Road

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Carey account; merchant processing fees

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2013

Transaction ID : SB29.11044

Amount of Each Disbursement this Period

36.10

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

189.46

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REVOLUTION PAC**

Full Name (Last, First, Middle Initial)

**A. PCI**

Mailing Address 902 Chinquapin Road

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Carey account; merchant processing fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB29.11045**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Political Media, Inc.**

Mailing Address 406 First Street SE  
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Carey account; web content services

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB29.11035**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Political Media, Inc.**

Mailing Address 406 First Street SE  
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Carey account; web content services

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB29.11046**

Amount of Each Disbursement this Period

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REVOLUTION PAC**

Full Name (Last, First, Middle Initial)

### A. Transact

Mailing Address 190 Monroe Avenue NW, Ste. 500

City Grand Rapids State MI Zip Code 49503

Purpose of Disbursement  
Carey account; merchant processing fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : SB29.11047

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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