

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Generation Forward 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="2015"/>		<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="206045.67"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="514300.00"/>	<input type="text" value="803742.88"/>
(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="720345.67"/>	<input type="text" value="803742.88"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="531009.13"/>	<input type="text" value="614406.34"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="189336.54"/>	<input type="text" value="189336.54"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="172946.36"/>	

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

Generation Forward 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).....	511000.00	800262.88
(ii) Unitemized	300.00	480.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	511300.00	800742.88
(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)	511300.00	800742.88
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).....	3000.00	3000.00
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))..... ▶	514300.00	803742.88
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	514300.00	803742.88

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	218090.79	245988.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	218090.79	245988.00
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)	312918.34	368418.34
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)) ..	531009.13	614406.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	531009.13	614406.34

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)	511300.00	800742.88
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	511300.00	800742.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	218090.79	245988.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3000.00	3000.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	215090.79	242988.00

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

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

FOR LINE NUMBER: PAGE 6 OF 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)
A. Stephen Allen

Mailing Address 1400 Gies Ln

City State Zip Code
Crownsville MD 21032

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

Name of Employer Occupation
Xavier, Inc. President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2015
Transaction ID : SA11AI.4284

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. Gary Lee Attman

Mailing Address 3712 Michelle Way

City State Zip Code
Baltimore MD 21208

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

Name of Employer Occupation
Futurecare Health & Mgmt. Healthcare

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
 12 / 07 / 2015
Transaction ID : SA11AI.4314

Amount of Each Receipt this Period
5000.00

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

Mailing Address 243 Old Pickard Road

City State Zip Code
Concord MA 01742

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

Name of Employer Occupation
Not Employed None

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
 11 / 04 / 2015
Transaction ID : SA11AI.4267

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 17500.00

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 47
	<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)
Generation Forward PAC

A. Markie Britton
Full Name (Last, First, Middle Initial)

Mailing Address 7030 Hi Tech Drive

City Hanover State MD Zip Code 21076

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

Name of Employer Tecore Networks Occupation Corporate Communications Manager

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
 12 / 11 / 2015

Transaction ID : SA11AI.4278

Amount of Each Receipt this Period
5000.00

B. Christina Lee Brown
Full Name (Last, First, Middle Initial)

Mailing Address 6501 Longview Lane

City Louisville State KY Zip Code 40222

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

Name of Employer Not Employed Occupation None

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 / 25 / 2015

Transaction ID : SA11AI.4299

Amount of Each Receipt this Period
25000.00

C. Christina Lee Brown
Full Name (Last, First, Middle Initial)

Mailing Address 6501 Longview Lane

City Louisville State KY Zip Code 40222

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

Name of Employer Not Employed Occupation None

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
 12 / 31 / 2015

Transaction ID : SA11AI.4325

Amount of Each Receipt this Period
25000.00

SUBTOTAL of Receipts This Page (optional).....▶	55000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 47
	<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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NAME OF COMMITTEE (In Full)
Generation Forward PAC

Full Name (Last, First, Middle Initial) A. Francis Campbell		Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2015 Transaction ID : SA11AI.4318
Mailing Address 121 Archimedes Ct		Amount of Each Receipt this Period 1000.00
City Baltimore	State MD	Zip Code 21208
FEC ID number of contributing federal political committee. C		
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 ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. J. Joseph Curran III		Date of Receipt M M / D D / Y Y Y Y Y 09 / 21 / 2015 Transaction ID : SA11AI.4291
Mailing Address 1 Saint Georges Road		Amount of Each Receipt this Period 10000.00
City Baltimore	State MD	Zip Code 21210
FEC ID number of contributing federal political committee. C		
Name of Employer Saul Ewing	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) C. Manuel Diaz		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2015 Transaction ID : SA11AI.4275
Mailing Address 1221 Brickell Avenue		Amount of Each Receipt this Period 2500.00
City Miami	State FL	Zip Code 33131
FEC ID number of contributing federal political committee. C		
Name of Employer Lydecker Diaz	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional).....▶	13500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Generation Forward PAC

Full Name (Last, First, Middle Initial)
A. Michael G. Fahey

Mailing Address 9304 Davenport Street

City State Zip Code
Omaha NE 68114

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2015
Transaction ID : SA11AI.4305

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Fontaine and Company

Mailing Address 2423 Maryland Avenue

City State Zip Code
Baltimore MD 21211

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
 08 / 01 / 2015
Transaction ID : SA11AI.4377

Amount of Each Receipt this Period
5000.00

In-kind - Strategic Consulting

Full Name (Last, First, Middle Initial)
C. Fontaine and Company

Mailing Address 2423 Maryland Avenue

City State Zip Code
Baltimore MD 21211

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
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2015
Transaction ID : SA11AI.4379

Amount of Each Receipt this Period
5000.00

In-kind - Strategic Consulting

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00

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 10 OF 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Generation Forward PAC

A. Fontaine and Company
 Full Name (Last, First, Middle Initial)
 Mailing Address 2423 Maryland Avenue
 City Baltimore State MD Zip Code 21211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2015
Transaction ID : SA11AI.4381
 Amount of Each Receipt this Period
 5000.00
 In-kind - Strategic Consulting

B. Fontaine and Company
 Full Name (Last, First, Middle Initial)
 Mailing Address 2423 Maryland Avenue
 City Baltimore State MD Zip Code 21211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 11 / 01 / 2015
Transaction ID : SA11AI.4383
 Amount of Each Receipt this Period
 5000.00
 In-kind - Strategic Consulting

C. Fontaine and Company
 Full Name (Last, First, Middle Initial)
 Mailing Address 2423 Maryland Avenue
 City Baltimore State MD Zip Code 21211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 12 / 01 / 2015
Transaction ID : SA11AI.4385
 Amount of Each Receipt this Period
 5000.00
 In-kind - Strategic Consulting

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
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 47
<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)
Generation Forward PAC

Full Name (Last, First, Middle Initial) A. George Franklin		Date of Receipt MM / DD / YYYY 08 / 15 / 2015 Transaction ID : SA11AI.4254
Mailing Address 2010 Hudson Ave		Amount of Each Receipt this Period 500.00
City Kalamazoo	State MI	Zip Code 49008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Consultant	
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. Matthew Gallager		Date of Receipt MM / DD / YYYY 12 / 12 / 2015 Transaction ID : SA11AI.4280
Mailing Address 108 Wyndhurst Avenue		Amount of Each Receipt this Period 500.00
City Baltimore	State MD	Zip Code 21210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Goldseker Foundation	Occupation President/CEO	
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. David Gelfand		Date of Receipt MM / DD / YYYY 08 / 08 / 2015 Transaction ID : SA11AI.4250
Mailing Address 9468 Newbridge Dr.		Amount of Each Receipt this Period 5000.00
City Potomac	State MD	Zip Code 20854
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer US Justice Dept.	Occupation DAAG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
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 47
	<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)
Generation Forward PAC

Full Name (Last, First, Middle Initial) A. John Hussman		Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2015 Transaction ID : SA11AI.4282
Mailing Address 5136 Dorsey Hall Drive		Amount of Each Receipt this Period 10000.00
City Ellicot City	State MD	Zip Code 21042
FEC ID number of contributing federal political committee. C	Name of Employer Hussman Strategic Advisors	Occupation Economist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) B. Jamin Development		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2015 Transaction ID : SA11AI.4297
Mailing Address 1206 Malbay Dr.		Amount of Each Receipt this Period 10000.00
City Lutherville	State MD	Zip Code 21093
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) C. Jamin Development		Date of Receipt M M / D D / Y Y Y Y Y 11 / 03 / 2015 Transaction ID : SA11AI.4309
Mailing Address 1206 Malbay Dr.		Amount of Each Receipt this Period 5000.00
City Lutherville	State MD	Zip Code 21093
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

SUBTOTAL of Receipts This Page (optional).....▶	25000.00
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 47
<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)
Generation Forward PAC

A. Kim Kennedy
Full Name (Last, First, Middle Initial)

Mailing Address 7030 Quad Avenue

City Baltimore State MD Zip Code 21237

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

Name of Employer K&K International, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 02 / 2015
Transaction ID : SA11AI.4289

Amount of Each Receipt this Period 1500.00

B. Kim Kennedy
Full Name (Last, First, Middle Initial)

Mailing Address 7030 Quad Avenue

City Baltimore State MD Zip Code 21237

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

Name of Employer K&K International, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 12 / 2015
Transaction ID : SA11AI.4310

Amount of Each Receipt this Period 1500.00

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

Mailing Address 6306 Blenheim Rd

City Baltimore State MD Zip Code 21212

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

Name of Employer Knott Mechanical Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 08 / 2015
Transaction ID : SA11AI.4262

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	4000.00
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 47
	<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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)
A. KO Public Affairs

Mailing Address 111 South Calvert Street

City Baltimore State MD Zip Code 21202

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 / 01 / 2015
Transaction ID : SA11AI.4387

Amount of Each Receipt this Period
5000.00

In-kind - Strategic Consulting

Full Name (Last, First, Middle Initial)
B. KO Public Affairs

Mailing Address 111 South Calvert Street

City Baltimore State MD Zip Code 21202

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
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2015
Transaction ID : SA11AI.4389

Amount of Each Receipt this Period
5000.00

In-kind - Strategic Consulting

Full Name (Last, First, Middle Initial)
C. KO Public Affairs

Mailing Address 111 South Calvert Street

City Baltimore State MD Zip Code 21202

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2015
Transaction ID : SA11AI.4396

Amount of Each Receipt this Period
5000.00

In-kind - Strategic Consulting

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
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 15 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Generation Forward PAC

Full Name (Last, First, Middle Initial)
A. KO Public Affairs

Mailing Address 111 South Calvert Street

City Baltimore State MD Zip Code 21202

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2015
Transaction ID : SA11AI.4392

Amount of Each Receipt this Period
5000.00

In-kind - Strategic Consulting

Full Name (Last, First, Middle Initial)
B. Cynthia Leppert

Mailing Address 2205 Boxmere Road

City Baltimore State MD Zip Code 21212

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

Name of Employer Occupation
Neuberger, Quinn, et, al., Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2015
Transaction ID : SA11AI.4260

Amount of Each Receipt this Period
3500.00

Full Name (Last, First, Middle Initial)
C. Lets Move America Forward Fund

Mailing Address 1677 Lexington Avenue

City New York State NY Zip Code 10029

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : SA11AI.4326

Amount of Each Receipt this Period
25000.00

SUBTOTAL of Receipts This Page (optional).....▶	33500.00
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 16 OF 47
	<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)
Generation Forward PAC

A. John Longacre
Full Name (Last, First, Middle Initial)

Mailing Address 1621 McKean St

City Philadelphia State PA Zip Code 19145

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

Name of Employer LPMG Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.4324

Amount of Each Receipt this Period
 500.00

B. Richard Lydecker
Full Name (Last, First, Middle Initial)

Mailing Address 1221 Brickell Avenue
19th Floor

City Miami State FL Zip Code 33131

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

Name of Employer Lydecker Diaz Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 8100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : SA11AI.4320

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 5601 Palomar Lane

City Dallas State TX Zip Code 75229

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

Name of Employer Clearview Energy Occupation Manager

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
 11 / 24 / 2015

Transaction ID : SA11AI.4273

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....▶	8000.00
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 17 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Generation Forward PAC

A. C. Thomas McMillen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1103 South Carolina Ave, SE
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015
Transaction ID : SA11AI.4269
 Amount of Each Receipt this Period
 1000.00

B. Gary W. Michael
 Full Name (Last, First, Middle Initial)
 Mailing Address 190 Glen Oban Dr.
 City Arnold State MD Zip Code 21012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NaiMichael Co. Occupation Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2015
Transaction ID : SA11AI.4311
 Amount of Each Receipt this Period
 10000.00

C. Progressive Choice
 Full Name (Last, First, Middle Initial)
 Mailing Address 2423 Maryland Ave.
 City Baltimore State MD Zip Code 21218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2015
Transaction ID : SA11AI.4322
 Amount of Each Receipt this Period
 25000.00

SUBTOTAL of Receipts This Page (optional).....▶	36000.00
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 18 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Generation Forward PAC

A. James L. Shea Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 10909 Baronet Road
 City Owings Mills State MD Zip Code 21117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Venable LLP Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **25000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015
Transaction ID : SA11AI.4293
 Amount of Each Receipt this Period
25000.00

B. Paul Sheehy
 Full Name (Last, First, Middle Initial)
 Mailing Address 5106 Cape Cod Court
 City Bethesda State MD Zip Code 20816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sheey Auto Stores Occupation Car Dealer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : SA11AI.4286
 Amount of Each Receipt this Period
5000.00

C. Ryan Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 1038 N East Capitol Boulevard
 City Salt Lake City State UT Zip Code 84103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Variance Ventures Occupation Venture Capital
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **80000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : SA11AI.4288
 Amount of Each Receipt this Period
50000.00

SUBTOTAL of Receipts This Page (optional).....▶	80000.00
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 19 OF 47
	<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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)
A. Ryan Smith

Mailing Address 1038 N East Capitol Boulevard

City Salt Lake City	State UT	Zip Code 84103
------------------------	-------------	-------------------

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

Name of Employer Variance Ventures	Occupation Venture Capital
---------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
105000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2015
Transaction ID : SA11AI.4313

Amount of Each Receipt this Period
25000.00

Full Name (Last, First, Middle Initial)
B. Anne Spitzer

Mailing Address 730 5th Avenue

City New York	State NY	Zip Code 10019
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015
Transaction ID : SA11AI.4301

Amount of Each Receipt this Period
50000.00

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

Mailing Address 730 5th Avenue

City New York	State NY	Zip Code 10019
------------------	-------------	-------------------

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

Name of Employer Spitzer Enterprises	Occupation Investor
---	------------------------

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 / 28 / 2015
Transaction ID : SA11AI.4303

Amount of Each Receipt this Period
50000.00

SUBTOTAL of Receipts This Page (optional).....▶	125000.00
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 20 OF 47
	<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)
Generation Forward PAC

A. Van Scoyoc Kelly, LLC
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Constitution Ave, NW
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 12 / 07 / 2015
Transaction ID : SA11AI.4316
 Amount of Each Receipt this Period
 25000.00

B. Western Development Corporation
 Full Name (Last, First, Middle Initial)
 Mailing Address 1228 31st Street, NW
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 12500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2015
Transaction ID : SA11AI.4307
 Amount of Each Receipt this Period
 12500.00

C. Lee B. Zimmerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 Herr Lane
 City Louisville State KY Zip Code 40222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Kidz Club 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
 09 / 21 / 2015
Transaction ID : SA11AI.4295
 Amount of Each Receipt this Period
 25000.00

SUBTOTAL of Receipts This Page (optional).....▶	62500.00
TOTAL This Period (last page this line number only).....▶	511000.00

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 47	
(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)
Generation Forward PAC

A. Full Name (Last, First, Middle Initial)
Fortune Media, Inc.

Mailing Address 527 Avenue B

City Redondo Beach State CA Zip Code 90277-4183

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : SA15.4345

Amount of Each Receipt this Period
3000.00

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

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	3000.00

**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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2015

Transaction ID : SB21B.4344

Amount of Each Disbursement this Period

3	,	0	,	4	,	6	,	1	2
2046.12									

Full Name (Last, First, Middle Initial)

B. Ron Boehmer

Mailing Address 130 M St, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Expense Reimbursement-No Vendor over \$200

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
07	/	22	/	2015

Transaction ID : SB21B.4358

Amount of Each Disbursement this Period

1	,	0	,	8	,	8	,	6	9
1088.69									

Full Name (Last, First, Middle Initial)

C. Ron Boehmer

Mailing Address 130 M St, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Expense Reimbursement-No Vendor over \$200

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
08	/	03	/	2015

Transaction ID : SB21B.4360

Amount of Each Disbursement this Period

3	,	9	,	0	0
39.00					

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

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

3	,	1	,	7	,	3	,	8	1
3173.81									

3	,	1	,	7	,	3	,	8	1
3173.81									

**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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)

A. Fontaine and Company

Mailing Address 2423 Maryland Avenue

City Baltimore State MD Zip Code 21211

Purpose of Disbursement
GOTV Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2015

Transaction ID : SB21B.4348

Amount of Each Disbursement this Period

14873.98

Full Name (Last, First, Middle Initial)

B. Fontaine and Company

Mailing Address 2423 Maryland Avenue

City Baltimore State MD Zip Code 21211

Purpose of Disbursement
GOTV Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2015

Transaction ID : SB21B.4350

Amount of Each Disbursement this Period

51023.49

Full Name (Last, First, Middle Initial)

C. Fontaine and Company

Mailing Address 2423 Maryland Avenue

City Baltimore State MD Zip Code 21211

Purpose of Disbursement
In-kind - Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2015

Transaction ID : SB21B.4378

Amount of Each Disbursement this Period

5000.00

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

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

70897.47

**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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)

A. Fontaine and Company

Mailing Address 2423 Maryland Avenue

City Baltimore State MD Zip Code 21211

Purpose of Disbursement
GOTV Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 24 / 2015

Transaction ID : SB21B.4349

Amount of Each Disbursement this Period

39665.66

Full Name (Last, First, Middle Initial)

B. Fontaine and Company

Mailing Address 2423 Maryland Avenue

City Baltimore State MD Zip Code 21211

Purpose of Disbursement
In-kind - Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : SB21B.4380

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Fontaine and Company

Mailing Address 2423 Maryland Avenue

City Baltimore State MD Zip Code 21211

Purpose of Disbursement
In-kind - Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2015

Transaction ID : SB21B.4382

Amount of Each Disbursement this Period

5000.00

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

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

49665.66

**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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)

A. Fontaine and Company

Mailing Address 2423 Maryland Avenue

City Baltimore State MD Zip Code 21211

Purpose of Disbursement
In-kind - Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2015

Transaction ID : SB21B.4384

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Fontaine and Company

Mailing Address 2423 Maryland Avenue

City Baltimore State MD Zip Code 21211

Purpose of Disbursement
In-kind - Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2015

Transaction ID : SB21B.4386

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. IOA Insurance Services

Mailing Address 1407 York Rd
#312

City Lutherville State MD Zip Code 21093

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 / 21 / 2015

Transaction ID : SB21B.4342

Amount of Each Disbursement this Period

705.50

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

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

10705.50

**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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)

A. KO Public Affairs

Mailing Address 111 South Calvert Street

City Baltimore State MD Zip Code 21202

Purpose of Disbursement
Strategic Consulting/Expense Reimbursement

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 / 2015

Transaction ID : SB21B.4353

Amount of Each Disbursement this Period

11112.38

Full Name (Last, First, Middle Initial)

B. KO Public Affairs

Mailing Address 111 South Calvert Street

City Baltimore State MD Zip Code 21202

Purpose of Disbursement
In-kind - Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : SB21B.4388

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. KO Public Affairs

Mailing Address 111 South Calvert Street

City Baltimore State MD Zip Code 21202

Purpose of Disbursement
In-kind - Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2015

Transaction ID : SB21B.4390

Amount of Each Disbursement this Period

5000.00

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

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

21112.38

**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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)

A. KO Public Affairs

Mailing Address 111 South Calvert Street

City Baltimore State MD Zip Code 21202

Purpose of Disbursement
In-kind - Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2015

Transaction ID : **SB21B.4397**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. KO Public Affairs

Mailing Address 111 South Calvert Street

City Baltimore State MD Zip Code 21202

Purpose of Disbursement
In-kind - Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2015

Transaction ID : **SB21B.4393**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Message Frame Communications, LLC

Mailing Address 8511 Countrybrooke Way

City Lutherville State MD Zip Code 21093

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2015

Transaction ID : **SB21B.4369**

Amount of Each Disbursement this Period

5000.00

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

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

15000.00

**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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)

A. Message Frame Communications, LLC

Mailing Address 8511 Countrybrooke Way

City Lutherville State MD Zip Code 21093

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2015

Transaction ID : SB21B.4371

Amount of Each Disbursement this Period

5106.00

Full Name (Last, First, Middle Initial)

B. O' SAY CAN YOU SEE PAC

Mailing Address PO BOX 468

City ANNAPOLIS State MD Zip Code 21404

Purpose of Disbursement
List Purchase

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 13 / 2015

Transaction ID : SB21B.4355

Amount of Each Disbursement this Period

564.00

Full Name (Last, First, Middle Initial)

C. Carrie Olson

Mailing Address 1408 Grant St

City Berkeley State CA Zip Code 94703

Purpose of Disbursement
Accounting 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 / 20 / 2015

Transaction ID : SB21B.4328

Amount of Each Disbursement this Period

4590.00

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

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

10260.00

**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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)

A. Carrie Olson

Mailing Address 1408 Grant St

City Berkeley State CA Zip Code 94703

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2015

Transaction ID : SB21B.4330

Amount of Each Disbursement this Period

1980.00

Full Name (Last, First, Middle Initial)

B. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC

Mailing Address 1025 Vermont Ave, NW
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal 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 / 21 / 2015

Transaction ID : SB21B.4334

Amount of Each Disbursement this Period

12985.00

Full Name (Last, First, Middle Initial)

C. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC

Mailing Address 1025 Vermont Ave, NW
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2015

Transaction ID : SB21B.4333

Amount of Each Disbursement this Period

15880.00

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

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

30845.00

**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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)

A. StoryFarm

Mailing Address 1909 Thames Street
Suite 201

City Baltimore State MD Zip Code 21231

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 13 / 2015

Transaction ID : SB21B.4357

Amount of Each Disbursement this Period

3632.13

Full Name (Last, First, Middle Initial)

B. Suntrust Bank

Mailing Address 120 East Baltimore Street

City Baltimore State MD Zip Code 21202

Purpose of Disbursement
Credit Card

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2015

Transaction ID : SB21B.4361

Amount of Each Disbursement this Period

2647.84

Full Name (Last, First, Middle Initial)

C. We Work

Mailing Address 1875 Connecticut Ave, NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2015

Transaction ID : SB21B.4361.0

Amount of Each Disbursement this Period

1875.00

[MEMO ITEM]

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

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

6279.97

**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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)

A. Suntrust Bank

Mailing Address 120 East Baltimore Street

City Baltimore State MD Zip Code 21202

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2015

Transaction ID : SB21B.4361.1

Amount of Each Disbursement this Period

112.12

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 60 Massachusetts Ave, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2015

Transaction ID : SB21B.4361.2

Amount of Each Disbursement this Period

240.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Google

Mailing Address 1600 Amphitheatre Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2015

Transaction ID : SB21B.4361.3

Amount of Each Disbursement this Period

265.02

[MEMO ITEM]

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

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

0.00

**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)
Generation Forward PAC

Full Name (Last, First, Middle Initial)

A. Suntrust Bank

Mailing Address 120 East Baltimore Street

City Baltimore State MD Zip Code 21202

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 20 / 2015

Transaction ID : SB21B.4339

Amount of Each Disbursement this Period

65.00

Full Name (Last, First, Middle Initial)

B. Suntrust Bank

Mailing Address 120 East Baltimore Street

City Baltimore State MD Zip Code 21202

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2015

Transaction ID : SB21B.4340

Amount of Each Disbursement this Period

12.50

Full Name (Last, First, Middle Initial)

C. Suntrust Bank

Mailing Address 120 East Baltimore Street

City Baltimore State MD Zip Code 21202

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2015

Transaction ID : SB21B.4341

Amount of Each Disbursement this Period

5.00

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

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

82.50

218022.29

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 33 OF 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Generation Forward PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fontaine and Company	Nature of Debt (Purpose): GOTV Consulting
Mailing Address 2423 Maryland Avenue	
City State Zip Code Baltimore MD 21211	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4374	
Amount Incurred This Period 80483.76	Payment This Period 0.00	Outstanding Balance at Close of This Period 80483.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Forest Strategy Group	Nature of Debt (Purpose): Fundraising Services
Mailing Address 1425 P Street, NW	
City State Zip Code Washington DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4400	
Amount Incurred This Period 10000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor KO Public Affairs	Nature of Debt (Purpose): Strategic Consulting/Expense Reimbursement
Mailing Address 111 South Calvert Street	
City State Zip Code Baltimore MD 21202	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4372	
Amount Incurred This Period 37397.60	Payment This Period 0.00	Outstanding Balance at Close of This Period 37397.60

1) SUBTOTALS This Period This Page (optional)..... ▶	127881.36
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 34 OF 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Generation Forward PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Message Frame Communications, LLC	Nature of Debt (Purpose): Fundraising Services
Mailing Address 8511 Countrybrooke Way	
City State Zip Code Lutherville MD 21093	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.4402	
Amount Incurred This Period <input type="text" value="25000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="25000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Resonate Networks	Nature of Debt (Purpose): Web Advertising
Mailing Address 11720 Plaza America Drive 3rd Floor	
City State Zip Code Reston VA 20190	

Outstanding Balance Beginning This Period <input type="text" value="5000.00"/>	Transaction ID : SD10.4138	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="5000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor StoryFarm	Nature of Debt (Purpose): Ad Production
Mailing Address 1909 Thames Street Suite 201	
City State Zip Code Baltimore MD 21231	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID : SD10.4137	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="25000.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 35 OF 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Generation Forward PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor StoryFarm	Nature of Debt (Purpose): Media Production Consulting
Mailing Address 1909 Thames Street Suite 201	
City State Zip Code Baltimore MD 21231	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.4399	
Amount Incurred This Period <input type="text" value="20065.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="20065.00"/>

B. 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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="20065.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="172946.36"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="172946.36"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Generation Forward PAC
FEC IDENTIFICATION NUMBER
C C00578724
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Carter Printing
Mailing Address
1739 E Grand Ave
City
Des Moines State
IA Zip Code
50316
Purpose of Expenditure
Printing-Postcards
Category/
Type
Name of Federal Candidate
MARTIN JOSEPH O'MALLEY
Support
Office Sought:
President
State:
IA
Calendar Year-To-Date
Per Election for Office Sought
78268.83

Date of Public Distribution/Dissemination
08 / 03 / 2015
Amount
2005.14
Transaction ID : SE.4210
Date of Disbursement or Obligation
08 / 03 / 2015
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Carter Printing
Mailing Address
1739 E Grand Ave
City
Des Moines State
IA Zip Code
50316
Purpose of Expenditure
Printing-Doorhangers
Category/
Type
Name of Federal Candidate
MARTIN JOSEPH O'MALLEY
Support
Office Sought:
President
State:
IA
Calendar Year-To-Date
Per Election for Office Sought
81784.79

Date of Public Distribution/Dissemination
08 / 05 / 2015
Amount
3515.96
Transaction ID : SE.4214
Date of Disbursement or Obligation
08 / 05 / 2015
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 5521.10
(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.
Damian O'Doherty
[Electronically Filed]
Date
01 / 29 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Generation Forward PAC	FEC IDENTIFICATION NUMBER ▼ C C00578724
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Carter Printing	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 05 / 2015
Mailing Address 1739 E Grand Ave	Amount 3726.92
City State Zip Code Des Moines IA 50316	Transaction ID : SE.4215 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 05 / 2015
Purpose of Expenditure Printing-Doorhangers	Category/Type
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: IA
Calendar Year-To-Date Per Election for Office Sought 85511.71	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Fedex Office	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 14 / 2015
Mailing Address 400 Locust Street	Amount 288.29
City State Zip Code Des Moines IA 50309	Transaction ID : SE.4202 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 14 / 2015
Purpose of Expenditure Printing-Banner	Category/Type
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: IA
Calendar Year-To-Date Per Election for Office Sought 73182.08	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4015.21
(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.

Damian O'Doherty **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
01 / 29 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Generation Forward PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00578724 </div>
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 Fedex Office	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 27 / 2015 </div>						
Mailing Address 400 Locust Street	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 740.65 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Des Moines</td> <td>IA</td> <td>50309</td> </tr> </table>	City	State	Zip Code	Des Moines	IA	50309	Transaction ID : SE.4204 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 27 / 2015 </div>
City	State	Zip Code					
Des Moines	IA	50309					
Purpose of Expenditure Printing-Doorhangers	Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>						
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>						
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 73922.73 </div>						
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							

Full Name of Payee Fedex Office	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 27 / 2015 </div>						
Mailing Address 400 Locust Street	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 332.29 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Des Moines</td> <td>IA</td> <td>50309</td> </tr> </table>	City	State	Zip Code	Des Moines	IA	50309	Transaction ID : SE.4228 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 27 / 2015 </div>
City	State	Zip Code					
Des Moines	IA	50309					
Purpose of Expenditure Printing-Postcards	Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>						
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>						
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 74255.02 </div>						
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 1072.94 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Damian O'Doherty
 Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 29 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Generation Forward PAC	FEC IDENTIFICATION NUMBER ▼ C C00578724
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 Fedex Office	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 01 / 2015
Mailing Address 400 Locust Street	Amount 402.60
City State Zip Code Des Moines IA 50309	Transaction ID : SE.4209 Date of Disbursement or Obligation MM / DD / YYYY 08 / 01 / 2015
Purpose of Expenditure Printing-Doorhangers	Category/Type
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought 76263.69	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Fortune Media, Inc.	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2015
Mailing Address 527 Avenue B	Amount 214041.00
City State Zip Code Redondo Beach CA 90277-4183	Transaction ID : SE.4236 Date of Disbursement or Obligation MM / DD / YYYY 10 / 07 / 2015
Purpose of Expenditure Television Advertisement Purchase	Category/Type
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought 355918.34	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	214443.60
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Damian O'Doherty
Signature

[Electronically Filed]

Date **01 / 29 / 2016**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Generation Forward PAC	FEC IDENTIFICATION NUMBER ▼ C C00578724
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 Fortune Media, Inc. [MEMO ITEM]	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2015
Mailing Address 527 Avenue B	Amount -3000.00
City Redondo Beach	Transaction ID : SE.4406
State CA	Date of Disbursement or Obligation MM / DD / YYYY 10 / 07 / 2015
Zip Code 90277-4183	Purpose of Expenditure Television Advertisement Refund
Category/Type	Name of Federal Candidate MARTIN JOSEPH O'MALLEY
Purpose of Expenditure Television Advertisement Refund	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
365418.34	2016

Full Name of Payee Dillon O'Brien	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2015
Mailing Address 13251 Cheltenham Dr.	Amount 3000.00
City Sherman Oaks	Transaction ID : SE.4403
State CA	Date of Disbursement or Obligation MM / DD / YYYY 09 / 18 / 2015
Zip Code 91423	Purpose of Expenditure Media Production
Category/Type	Name of Federal Candidate MARTIN JOSEPH O'MALLEY
Purpose of Expenditure Media Production	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
141877.34	2016

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Damian O'Doherty

Signature _____ [Electronically Filed] Date MM / DD / YYYY
01 / 29 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Generation Forward PAC	FEC IDENTIFICATION NUMBER ▼ C C00578724
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee ooShirts	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 07 / 2015
Mailing Address 41454 Christy Street	Amount 1765.31
City State Zip Code Fremont CA 94538	Transaction ID : SE.4198 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 07 / 07 / 2015
Purpose of Expenditure T-Shirts	Category/Type
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: <u>00</u> State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought 64765.31	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee PRPR LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 12 / 2015
Mailing Address 3401 Meadow Lane	Amount 4500.00
City State Zip Code West Des Moines IA 50265	Transaction ID : SE.4243 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 12 / 2015
Purpose of Expenditure Iowa Starting Line Online Advertising	Category/Type
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: <u>00</u> State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought 137899.71	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	6265.31
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Damian O'Doherty [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2016

Signature

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ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Generation Forward PAC	FEC IDENTIFICATION NUMBER ▼ C C00578724
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Resonate Networks	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 07 / 2015
Mailing Address 11720 Plaza America Drive 3rd Floor	Amount 42888.00
City State Zip Code Reston VA 20190	Transaction ID : SE.4194 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 07 / 2015
Purpose of Expenditure Web Advertising	Category/Type
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
128399.71	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Siegel Strategies	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2015
Mailing Address 1 Morton Square, Suite 3CW	Amount 11500.00
City State Zip Code New York NY 10014	Transaction ID : SE.4237 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2015
Purpose of Expenditure Advertisement Production	Category/Type
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
367418.34	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	54388.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Damian O'Doherty [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Generation Forward PAC	FEC IDENTIFICATION NUMBER ▼ C C00578724
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee StoryFarm	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2015
Mailing Address 1909 Thames Street Suite 201	Amount 2500.00
City State Zip Code Baltimore MD 21231	Transaction ID : SE.4151 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2015
Purpose of Expenditure Ad Production	Category/Type []
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: <u>00</u> State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought 58000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee StoryFarm	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 13 / 2015
Mailing Address 1909 Thames Street Suite 201	Amount 2500.00
City State Zip Code Baltimore MD 21231	Transaction ID : SE.4143 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 07 / 13 / 2015
Purpose of Expenditure Ad Production	Category/Type []
Name of Federal Candidate MARTIN JOSEPH O'MALLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: <u>00</u> State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought 67265.31	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	[]
(c) TOTAL Independent Expenditures..... ▶	[]

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Damian O'Doherty [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2016

Signature _____

