

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 AMERICARISINGPAC.ORG

ADDRESS (number and street) PO BOX 100088 ARLINGTON VA 22210

2. FEC IDENTIFICATION NUMBER C C00542902 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 Year-End Report (YE) X, 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 M M M / D D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2013 through 12 / 31 / 2013

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 MATTHEW RHOADES

Signature of Treasurer MATTHEW RHOADES [Electronically Filed] Date 04 / 03 / 2014

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMERICARISINGPAC.ORG

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="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="984.58"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="455617.37"/>	<input type="text" value="477665.37"/>
(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="456601.95"/>	<input type="text" value="477665.37"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="223789.01"/>	<input type="text" value="244852.43"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="232812.94"/>	<input type="text" value="232812.94"/>
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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**AMERICARISINGPAC.ORG**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2013 To: M M / D D / Y Y Y Y 12 / 31 / 2013

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).....	454089.37	475064.37
(ii) Unitemized .....	1528.00	2601.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	455617.37	477665.37
(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) .....	455617.37	477665.37
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	455617.37	477665.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	455617.37	477665.37

**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 .....	223789.01	244852.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	223789.01	244852.43
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 .....	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)) ..	223789.01	244852.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	223789.01	244852.43

**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) .....	455617.37	477665.37
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	455617.37	477665.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	223789.01	244852.43
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	223789.01	244852.43

**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 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. ALLIE BETH L ALLMAN</b>		Date of Receipt
Mailing Address 4242 LOMO ALTO DRIVE #N1001		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
DALLAS	TX	75219
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
ALLIE BETH ALLMAN & ASSOCIATES	OWNER, FOUNDER, & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	
		Transaction ID : SA11AI.6177
		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	
		Transaction ID : SA11AI.6203
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
		IN-KIND - COMMUNICATIONS CONSULTING

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="07"/> / <input type="text" value="20"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="10000.00"/>	
		Transaction ID : SA11AI.6209
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
		IN-KIND - COMMUNICATIONS CONSULTING

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="10500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 97
<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. AMERICA RISING LLC</b>		Date of Receipt MM / DD / YYYY 07 / 23 / 2013 <b>Transaction ID : SA11AI.6215</b>
Mailing Address PO BOX 100088		Amount of Each Receipt this Period 5000.00
City ARLINGTON	State VA	Zip Code 22210
FEC ID number of contributing federal political committee. C	IN-KIND - COMMUNICATIONS CONSULTING	
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	

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Receipt MM / DD / YYYY 08 / 15 / 2013 <b>Transaction ID : SA11AI.6204</b>
Mailing Address PO BOX 100088		Amount of Each Receipt this Period 5000.00
City ARLINGTON	State VA	Zip Code 22210
FEC ID number of contributing federal political committee. C	IN-KIND - COMMUNICATIONS CONSULTING	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Receipt MM / DD / YYYY 08 / 20 / 2013 <b>Transaction ID : SA11AI.6210</b>
Mailing Address PO BOX 100088		Amount of Each Receipt this Period 5000.00
City ARLINGTON	State VA	Zip Code 22210
FEC ID number of contributing federal political committee. C	IN-KIND - COMMUNICATIONS CONSULTING	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 97  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

**A. AMERICA RISING LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 100088  
 City ARLINGTON State VA Zip Code 22210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 30000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2013  
**Transaction ID : SA11AI.6216**  
 Amount of Each Receipt this Period  
 5000.00  
 IN-KIND - COMMUNICATIONS CONSULTING

**B. AMERICA RISING LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 100088  
 City ARLINGTON State VA Zip Code 22210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 30263.25

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2013  
**Transaction ID : SA11AI.6225**  
 Amount of Each Receipt this Period  
 263.25  
 IN-KIND - WEBSITE HOSTING FEES

**C. AMERICA RISING LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 100088  
 City ARLINGTON State VA Zip Code 22210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 35263.25

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2013  
**Transaction ID : SA11AI.6205**  
 Amount of Each Receipt this Period  
 5000.00  
 IN-KIND - COMMUNICATIONS CONSULTING

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10263.25
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="40263.25"/>	
		Transaction ID : SA11AI.6211
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
		IN-KIND - COMMUNICATIONS CONSULTING

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="45263.25"/>	
		Transaction ID : SA11AI.6217
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
		IN-KIND - COMMUNICATIONS CONSULTING

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="50263.25"/>	
		Transaction ID : SA11AI.6221
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
		IN-KIND - COMMUNICATIONS CONSULTING

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="15000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6232</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1028.37"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - RENT
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="51291.62"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6235</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1028.37"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - RENT
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="52319.99"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6206</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - COMMUNICATIONS CONSULTING
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="57319.99"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="7056.74"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 97
	<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6229</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1501.50"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - LEGAL CONSULTING
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="58821.49"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6247</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="3364.06"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - EMPLOYEE SALARY REIMBURSEMENT
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="62185.55"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6212</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - COMMUNICATIONS CONSULTING
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="67185.55"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="9865.56"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 97
	<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6218</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - COMMUNICATIONS CONSULTING
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="72185.55"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6222</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - COMMUNICATIONS CONSULTING
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="77185.55"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6227</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - COMPLIANCE CONSULTING
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="78435.55"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="11250.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 97
<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)  
**AMERICARISINGPAC.ORG**

**A. AMERICA RISING LLC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 100088

City ARLINGTON	State VA	Zip Code 22210
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
78674.63

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2013

**Transaction ID : SA11AI.6238**

Amount of Each Receipt this Period  

239.08
--------

**IN-KIND - EMPLOYEE BENEFITS**

**B. AMERICA RISING LLC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 100088

City ARLINGTON	State VA	Zip Code 22210
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
78774.63

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2013

**Transaction ID : SA11AI.6241**

Amount of Each Receipt this Period  

100.00
--------

**IN-KIND - PHONE REIMBURSEMENT**

**C. AMERICA RISING LLC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 100088

City ARLINGTON	State VA	Zip Code 22210
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
78874.63

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2013

**Transaction ID : SA11AI.6244**

Amount of Each Receipt this Period  

100.00
--------

**IN-KIND - PHONE REIMBURSEMENT**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	439.08
<b>TOTAL</b> This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

**A. AMERICA RISING LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 100088  
 City ARLINGTON State VA Zip Code 22210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 82238.69

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 30 / 2013  
**Transaction ID : SA11AI.6248**  
 Amount of Each Receipt this Period  
 3364.06  
 IN-KIND - EMPLOYEE SALARY REIMBURSEMENT

**B. AMERICA RISING LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 100088  
 City ARLINGTON State VA Zip Code 22210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 83267.06

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 01 / 2013  
**Transaction ID : SA11AI.6233**  
 Amount of Each Receipt this Period  
 1028.37  
 IN-KIND - RENT

**C. AMERICA RISING LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 100088  
 City ARLINGTON State VA Zip Code 22210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 84295.43

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 01 / 2013  
**Transaction ID : SA11AI.6236**  
 Amount of Each Receipt this Period  
 1028.37  
 IN-KIND - RENT

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5420.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="86295.43"/>	
		Transaction ID : SA11AI.6230
		Amount of Each Receipt this Period
		<input type="text" value="2000.00"/>
		IN-KIND - LEGAL CONSULTING

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="91295.43"/>	
		Transaction ID : SA11AI.6207
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
		IN-KIND - COMMUNICATIONS CONSULTING

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="94659.49"/>	
		Transaction ID : SA11AI.6249
		Amount of Each Receipt this Period
		<input type="text" value="3364.06"/>
		IN-KIND - EMPLOYEE SALARY REIMBURSEMENT

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="10364.06"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 16 OF 97  
(check only one)

<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)  
**AMERICARISINGPAC.ORG**

**A. AMERICA RISING LLC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 100088

City ARLINGTON	State VA	Zip Code 22210
-------------------	-------------	-------------------

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
99659.49

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2013

**Transaction ID : SA11AI.6213**

Amount of Each Receipt this Period  
5000.00

IN-KIND - COMMUNICATIONS CONSULTING

**B. AMERICA RISING LLC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 100088

City ARLINGTON	State VA	Zip Code 22210
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FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
139659.49

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2013

**Transaction ID : SA11AI.6226**

Amount of Each Receipt this Period  
40000.00

IN-KIND - DIGITAL CONSULTING FEES

**C. AMERICA RISING LLC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 100088

City ARLINGTON	State VA	Zip Code 22210
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FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
144659.49

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2013

**Transaction ID : SA11AI.6219**

Amount of Each Receipt this Period  
5000.00

IN-KIND - COMMUNICATIONS CONSULTING

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. AMERICA RISING LLC</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2013 <b>Transaction ID : SA11AI.6223</b>
Mailing Address PO BOX 100088		Amount of Each Receipt this Period 5000.00
City ARLINGTON	State VA	Zip Code 22210
FEC ID number of contributing federal political committee. C	IN-KIND - COMMUNICATIONS CONSULTING	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 149659.49	

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2013 <b>Transaction ID : SA11AI.6239</b>
Mailing Address PO BOX 100088		Amount of Each Receipt this Period 239.08
City ARLINGTON	State VA	Zip Code 22210
FEC ID number of contributing federal political committee. C	IN-KIND - EMPLOYEE BENEFITS	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 149898.57	

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2013 <b>Transaction ID : SA11AI.6242</b>
Mailing Address PO BOX 100088		Amount of Each Receipt this Period 100.00
City ARLINGTON	State VA	Zip Code 22210
FEC ID number of contributing federal political committee. C	IN-KIND - PHONE REIMBURSEMENT	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 149998.57	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5339.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 18 OF 97  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)  
**A. AMERICA RISING LLC**

Mailing Address **PO BOX 100088**

City **ARLINGTON**      State **VA**      Zip Code **22210**

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

Name of Employer      Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**150098.57**

Date of Receipt  
**11 / 30 / 2013**  
**Transaction ID : SA11AI.6245**

Amount of Each Receipt this Period  
**100.00**

**IN-KIND - PHONE REIMBURSEMENT**

Full Name (Last, First, Middle Initial)  
**B. AMERICA RISING LLC**

Mailing Address **PO BOX 100088**

City **ARLINGTON**      State **VA**      Zip Code **22210**

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

Name of Employer      Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**153462.63**

Date of Receipt  
**11 / 30 / 2013**  
**Transaction ID : SA11AI.6250**

Amount of Each Receipt this Period  
**3364.06**

**IN-KIND - EMPLOYEE SALARY REIMBURSEMENT**

Full Name (Last, First, Middle Initial)  
**C. AMERICA RISING LLC**

Mailing Address **PO BOX 100088**

City **ARLINGTON**      State **VA**      Zip Code **22210**

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

Name of Employer      Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**154491.00**

Date of Receipt  
**12 / 01 / 2013**  
**Transaction ID : SA11AI.6234**

Amount of Each Receipt this Period  
**1028.37**

**IN-KIND - RENT**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **4492.43**

**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 97
	<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6237</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1028.37"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - RENT
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="155519.37"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6231</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="7952.80"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - LEGAL CONSULTING
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="163472.17"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6208</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - COMMUNICATIONS CONSULTING
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="168472.17"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="13981.17"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 97
<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. AMERICA RISING LLC</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2013 <b>Transaction ID : SA11AI.6251</b>
Mailing Address PO BOX 100088		Amount of Each Receipt this Period 5064.06 <b>IN-KIND - EMPLOYEE SALARY REIMBURSEMENT</b>
City ARLINGTON	State VA	Zip Code 22210
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 ▼ 173536.23	

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 20 / 2013 <b>Transaction ID : SA11AI.6214</b>
Mailing Address PO BOX 100088		Amount of Each Receipt this Period 5000.00 <b>IN-KIND - COMMUNICATIONS CONSULTING</b>
City ARLINGTON	State VA	Zip Code 22210
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 ▼ 178536.23	

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 23 / 2013 <b>Transaction ID : SA11AI.6220</b>
Mailing Address PO BOX 100088		Amount of Each Receipt this Period 5000.00 <b>IN-KIND - COMMUNICATIONS CONSULTING</b>
City ARLINGTON	State VA	Zip Code 22210
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 ▼ 183536.23	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15064.06
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 97
<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. AMERICA RISING LLC</b>		Date of Receipt 12 / 30 / 2013 <b>Transaction ID : SA11AI.6224</b>
Mailing Address PO BOX 100088		Amount of Each Receipt this Period 5000.00
City ARLINGTON	State VA	Zip Code 22210
FEC ID number of contributing federal political committee. C	IN-KIND - COMMUNICATIONS CONSULTING	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 188536.23	

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Receipt 12 / 30 / 2013 <b>Transaction ID : SA11AI.6228</b>
Mailing Address PO BOX 100088		Amount of Each Receipt this Period 1250.00
City ARLINGTON	State VA	Zip Code 22210
FEC ID number of contributing federal political committee. C	IN-KIND - COMPLIANCE CONSULTING	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 189786.23	

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Receipt 12 / 30 / 2013 <b>Transaction ID : SA11AI.6240</b>
Mailing Address PO BOX 100088		Amount of Each Receipt this Period 239.08
City ARLINGTON	State VA	Zip Code 22210
FEC ID number of contributing federal political committee. C	IN-KIND - EMPLOYEE BENEFITS	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190025.31	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6489.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6243</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - PHONE REIMBURSEMENT
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="190125.31"/>	

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6246</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - PHONE REIMBURSEMENT
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="190225.31"/>	

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Receipt
Mailing Address PO BOX 100088		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARLINGTON	VA	22210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6252</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="3364.06"/>
Receipt For:	Aggregate Year-to-Date ▼	IN-KIND - EMPLOYEE SALARY REIMBURSEMENT
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="193589.37"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="3564.06"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 23 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. B-5 BAR, LLC</b>		Date of Receipt
Mailing Address 7500 EAST SUNSET TRAIL		<input type="text" value="07"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
PARKER	CO	80134
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6146</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. HAROLD BRIERLEY</b>		Date of Receipt
Mailing Address 5465 LEGACY DRIVE SUITE 300		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
DALLAS	TX	75205
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6197</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
BRIERLEY AND PARTNERS	CHAIRMAN	<input type="text" value="25000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="25000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. BRADLEY T CRATE</b>		Date of Receipt
Mailing Address 138 CONANT ST		<input type="text" value="07"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
BEVERLY	MA	01915
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6143</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RED CURVE SOLUTIONS	OWNER	<input type="text" value="1500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="27500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 24 OF 97  
(check only one)

<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)  
**AMERICARISINGPAC.ORG**

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

Mailing Address 156 CHURCH STREET NE

City VIENNA	State VA	Zip Code 22180
----------------	-------------	-------------------

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

Name of Employer TARGETPOINT	Occupation PRINCIPAL
---------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	24	/	2013

**Transaction ID : SA11AI.6139**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. ENDING SPENDING ACTION FUND**

Mailing Address C/O 610 S. BOULEVARD

City TAMPA	State FL	Zip Code 33606
---------------	-------------	-------------------

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	/	21	/	2013

**Transaction ID : SA11AI.6171**

Amount of Each Receipt this Period  
10000.00

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

Mailing Address 500 CRESCENT COURT, SUITE 250

City DALLAS	State TX	Zip Code 75201
----------------	-------------	-------------------

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 ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2013

**Transaction ID : SA11AI.6173**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	16000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

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

Mailing Address 9500 W. FLAMINGO SUITE 203

City	State	Zip Code
LAS VEGAS	NV	89147

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

Name of Employer	Occupation
REDROCK STRATEGIES	SMALL BUSINESS OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2013  
**Transaction ID : SA11AI.6149**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 8 ROCKMONT ROAD

City	State	Zip Code
BELMONT	MA	02478

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

Name of Employer	Occupation
SHAWMUT GROUP	PRINCIPAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : SA11AI.6134**

Amount of Each Receipt this Period  
 1000.00

**C. ROBERT F HENNINGS JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 1709 N HUNTINGTON ST

City	State	Zip Code
ARLINGTON	VA	22205

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

Name of Employer	Occupation
MCCARTHY MARCUS HENNINGS	CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2013  
**Transaction ID : SA11AI.6145**

Amount of Each Receipt this Period  
 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

**A. J. T. JEZIERSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 3101 N HAMPTON DRIVE  
UNIT 404

City ALEXANDRIA State VA Zip Code 22302

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

Name of Employer U.S. HOUSE OF REPRESENTATIVES Occupation PROFESSIONAL STAFF

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
07 / 15 / 2013  
Transaction ID : SA11AI.6125

Amount of Each Receipt this Period  
1000.00

**B. WILLIAM R JONES**  
Full Name (Last, First, Middle Initial)

Mailing Address 14 EAST WALNUT STREET

City ALEXANDRIA State VA Zip Code 22301

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

Name of Employer BLACK ROCK GROUP Occupation CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
07 / 29 / 2013  
Transaction ID : SA11AI.6147

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 3314 JOHN LYNDE RD

City DES MOINES State IA Zip Code 50312

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

Name of Employer REDWAVE COMMUNICATIONS Occupation MARKETING EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
09 / 05 / 2013  
Transaction ID : SA11AI.6163

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

**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 27 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

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

Mailing Address 222 N. LASALLE STREET  
SUITE 1000

City CHICAGO State IL Zip Code 60601

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

Name of Employer CC INDUSTRIES, INC. Occupation EXECUTIVE VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
11 / 08 / 2013  
Transaction ID : SA11AI.6176

Amount of Each Receipt this Period  
10000.00

**B. KENT A LUCKEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 65 FELLSMERE ROAD

City NEWTON CENTER State MA Zip Code 02459

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

Name of Employer CITIGROUP Occupation MANAGING DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
11 / 07 / 2013  
Transaction ID : SA11AI.6175

Amount of Each Receipt this Period  
2500.00

**C. MRS J.J. MATTHEWS**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 176

City ABILENE State TX Zip Code 79604

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
11 / 21 / 2013  
Transaction ID : SA11AI.6195

Amount of Each Receipt this Period  
50000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. KADE MATTHEWS</b>			Date of Receipt
Mailing Address <b>PO BOX 1170</b>			<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.6200</b>
<b>CLARENDON</b>	<b>TX</b>	<b>79226</b>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25000.00"/>
Name of Employer	Occupation		
<b>KADE L. MATTHEWS, LLC.</b>	<b>CHAIRMAN</b>		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="25000.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. LAWRENCE C MCCARTHY</b>			Date of Receipt
Mailing Address <b>5715 ABERDEEN RD</b>			<input type="text" value="07"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.6144</b>
<b>BETHESDA</b>	<b>MD</b>	<b>20814</b>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="1000.00"/>
Name of Employer	Occupation		
<b>MCCARTHY MARCUS HENNINGS</b>	<b>CONSULTANT</b>		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. MICHAEL MEYERS</b>			Date of Receipt
Mailing Address <b>107 S WEST ST PMB556</b>			<input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.6159</b>
<b>ALEXANDRIA</b>	<b>VA</b>	<b>22314</b>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="1000.00"/>
Name of Employer	Occupation		
<b>TARGET POINT CONSULTING</b>	<b>MARKET RESEARCH</b>		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="27000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 29 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

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

Mailing Address 801 RAPIDAN COURT

City ALEXANDRIA State VA Zip Code 22304

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

Name of Employer PUBLIC OPINION STRATEGIES Occupation RESEARCHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 12 / 2013  
**Transaction ID : SA11AI.6121**

Amount of Each Receipt this Period 1000.00

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

Mailing Address 1780 SEQUOIA VISTA CIRCLE

City SALT LAKE CITY State UT Zip Code 84104

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

Name of Employer ARENA COMMUNICATIONS ONLINE Occupation ONLINE MARKETING

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 12 / 2013  
**Transaction ID : SA11AI.6120**

Amount of Each Receipt this Period 1000.00

**C. THOMAS A RATH**  
Full Name (Last, First, Middle Initial)

Mailing Address 120 FRANKLIN STREET

City CONCORD State NH Zip Code 03301

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

Name of Employer THE RATH GROUP Occupation CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 12 / 2013  
**Transaction ID : SA11AI.6122**

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

**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 30 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. RESTORE OUR FUTURE, INC.</b>		Date of Receipt
Mailing Address 601 PENNSYLVANIA AVE, NW SUITE 1000N		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	<b>Transaction ID : SA11AI.6699</b>
WASHINGTON	DC	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="100000.00"/>
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="100000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. STEVEN ROCHE</b>		Date of Receipt
Mailing Address 100 TRADE CENTER SUITE G700		<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	<b>Transaction ID : SA11AI.6160</b>
WOBURN	MA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="1000.00"/>
Name of Employer	Occupation	
SCR & ASSOCIATES	CONSULTANT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. THE STEVENS &amp; SCHRIEFER GROUP, LTD</b>		Date of Receipt
Mailing Address PO BOX 480		<input type="text" value="07"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	<b>Transaction ID : SA11AI.6148</b>
ARNOLD	MD	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="2000.00"/>
Name of Employer	Occupation	
THE STEVENS & SCHRIEFER GROUP, LTD	POLITICAL CONSULTANCY	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="103000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 31 OF 97
<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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. SCM ASSOCIATES</b>		Date of Receipt
Mailing Address PO BOX 254		<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
DUBLIN	NH	03444
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6132</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. SCM ASSOCIATES</b>		Date of Receipt
Mailing Address PO BOX 254		<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
DUBLIN	NH	03444
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6133</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
	<input type="text" value="2000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL SORRELL</b>		Date of Receipt
Mailing Address 2900 S VALLEY VIEW BLVD NO. 297		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
LAS VEGAS	NV	89102
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6169</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
THE SANTA MESA FOUNDATION, INC	CHAIRMAN AND EXECUTIVE DIRECTOR	<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
	<input type="text" value="5000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="7000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 32 OF 97
	<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)  
**AMERICARISINGPAC.ORG**

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

Mailing Address 1470 COUNTRY LAKE EST. DR.

City CHESTERFIELD	State MO	Zip Code 63005
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FEC ID number of contributing federal political committee. **C**

Name of Employer HERITAGE	Occupation FELLOW
------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2013

**Transaction ID : SA11AI.6151**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 66 CANAL CENTER PLAZA, SUITE 555

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	19	/	2013

**Transaction ID : SA11AI.6158**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 66 CANAL CENTER PLAZA  
STE 555

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2013

**Transaction ID : SA11AI.6161**

Amount of Each Receipt this Period  
1000.00

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



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

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

FOR LINE NUMBER: PAGE 33 OF 97  
(check only one)

<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)  
**AMERICARISINGPAC.ORG**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT L ZORICH**

Mailing Address 5106 TANGLE LANE

City HOUSTON State TX Zip Code 77056

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

Name of Employer ENCAP Occupation MANAGING PARTNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 22 / 2013

**Transaction ID : SA11AI.6196**

Amount of Each Receipt this Period  
5000.00

**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

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	454089.37

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2013

**Transaction ID : SB21B.6315**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 20 / 2013

**Transaction ID : SB21B.6321**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 23 / 2013

**Transaction ID : SB21B.6327**

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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2013

**Transaction ID : SB21B.6316**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2013

**Transaction ID : SB21B.6322**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 23 / 2013

**Transaction ID : SB21B.6328**

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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - WEBSITE HOSTING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2013

Transaction ID : **SB21B.6337**

Amount of Each Disbursement this Period

263.25

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS 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 / 15 / 2013

Transaction ID : **SB21B.6317**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS 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 / 20 / 2013

Transaction ID : **SB21B.6323**

Amount of Each Disbursement this Period

5000.00

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

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

10263.25

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6329**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6333**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6344**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - RENT

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 / 2013

Transaction ID : **SB21B.6347**

Amount of Each Disbursement this Period

1028.37

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS 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 / 15 / 2013

Transaction ID : **SB21B.6318**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - LEGAL 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 / 15 / 2013

Transaction ID : **SB21B.6341**

Amount of Each Disbursement this Period

1501.50

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

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

7529.87

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. AMERICA RISING LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2013
Mailing Address PO BOX 100088		<b>Transaction ID : SB21B.6359</b>
City ARLINGTON	State VA	
Zip Code 22210	Purpose of Disbursement IN-KIND - EMPLOYEE SALARY REIMBURSEMENT	Amount of Each Disbursement this Period 3364.06
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICA RISING LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 20 / 2013
Mailing Address PO BOX 100088		<b>Transaction ID : SB21B.6324</b>
City ARLINGTON	State VA	
Zip Code 22210	Purpose of Disbursement IN-KIND - COMMUNICATIONS CONSULTING	Amount of Each Disbursement this Period 5000.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICA RISING LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 23 / 2013
Mailing Address PO BOX 100088		<b>Transaction ID : SB21B.6330</b>
City ARLINGTON	State VA	
Zip Code 22210	Purpose of Disbursement IN-KIND - COMMUNICATIONS CONSULTING	Amount of Each Disbursement this Period 5000.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	13364.06
<b>TOTAL</b> 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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS 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 / 30 / 2013

Transaction ID : **SB21B.6334**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMPLIANCE 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 / 30 / 2013

Transaction ID : **SB21B.6339**

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - EMPLOYEE BENEFITS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2013

Transaction ID : **SB21B.6350**

Amount of Each Disbursement this Period

239.08

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

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

6489.08



**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - PHONE REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2013

Transaction ID : **SB21B.6353**

Amount of Each Disbursement this Period

100.00

**B. AMERICA RISING LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - PHONE REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2013

Transaction ID : **SB21B.6356**

Amount of Each Disbursement this Period

100.00

**C. AMERICA RISING LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - EMPLOYEE SALARY REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2013

Transaction ID : **SB21B.6360**

Amount of Each Disbursement this Period

3364.06

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

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

3564.06

# 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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

### A. AMERICA RISING LLC

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - 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 / 01 / 2013

Transaction ID : SB21B.6345

Amount of Each Disbursement this Period

1028.37

Full Name (Last, First, Middle Initial)

### B. AMERICA RISING LLC

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - 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 / 01 / 2013

Transaction ID : SB21B.6348

Amount of Each Disbursement this Period

1028.37

Full Name (Last, First, Middle Initial)

### C. AMERICA RISING LLC

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - LEGAL 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 / 12 / 2013

Transaction ID : SB21B.6342

Amount of Each Disbursement this Period

2000.00

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

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

4056.74

# 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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

### A. AMERICA RISING LLC

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS 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 / 15 / 2013

Transaction ID : SB21B.6319

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

### B. AMERICA RISING LLC

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - EMPLOYEE SALARY REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2013

Transaction ID : SB21B.6361

Amount of Each Disbursement this Period

3364.06

Full Name (Last, First, Middle Initial)

### C. AMERICA RISING LLC

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS 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 / 20 / 2013

Transaction ID : SB21B.6325

Amount of Each Disbursement this Period

5000.00

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

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

13364.06

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - DIGITAL CONSULTING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2013			

Transaction ID : SB21B.6338

Amount of Each Disbursement this Period

40000.00
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Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2013			

Transaction ID : SB21B.6331

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2013			

Transaction ID : SB21B.6335

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

50000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - EMPLOYEE BENEFITS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2013

Transaction ID : **SB21B.6351**

Amount of Each Disbursement this Period

239.08

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - PHONE REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2013

Transaction ID : **SB21B.6354**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - PHONE REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2013

Transaction ID : **SB21B.6357**

Amount of Each Disbursement this Period

100.00

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

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

439.08

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - EMPLOYEE SALARY REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 30 / 2013

Transaction ID : **SB21B.6362**

Amount of Each Disbursement this Period

3364.06

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2013

Transaction ID : **SB21B.6346**

Amount of Each Disbursement this Period

1028.37

Full Name (Last, First, Middle Initial)

**C. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2013

Transaction ID : **SB21B.6349**

Amount of Each Disbursement this Period

1028.37

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

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

5420.80

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - LEGAL 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 / 12 / 2013

Transaction ID : **SB21B.6343**

Amount of Each Disbursement this Period

7952.80

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS 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 / 15 / 2013

Transaction ID : **SB21B.6320**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - EMPLOYEE SALARY REIMBURSEMENT

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 / 2013

Transaction ID : **SB21B.6363**

Amount of Each Disbursement this Period

5064.06

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

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

18016.86

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2013

Transaction ID : **SB21B.6326**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2013

Transaction ID : **SB21B.6332**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2013

Transaction ID : **SB21B.6336**

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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - COMPLIANCE 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 / 30 / 2013

Transaction ID : **SB21B.6340**

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - EMPLOYEE BENEFITS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 30 / 2013

Transaction ID : **SB21B.6352**

Amount of Each Disbursement this Period

239.08

Full Name (Last, First, Middle Initial)

**C. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - PHONE REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 30 / 2013

Transaction ID : **SB21B.6355**

Amount of Each Disbursement this Period

100.00

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

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

1589.08

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - PHONE REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2013

Transaction ID : **SB21B.6358**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address PO BOX 100088

City ARLINGTON State VA Zip Code 22210

Purpose of Disbursement  
IN-KIND - EMPLOYEE SALARY REIMBURSEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2013

Transaction ID : **SB21B.6364**

Amount of Each Disbursement this Period

3364.06

Full Name (Last, First, Middle Initial)

**C. AMTRAK CORPORATION**

Mailing Address 50 MASSACHUSETTS AVENUE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: RAIL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2013

Transaction ID : **SB21B.6544**

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

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

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

3464.06

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMTRAK CORPORATION**

Mailing Address 50 MASSACHUSETTS AVENUE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
MILLER REIMBURSEMENT - TRAVEL: RAIL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6566**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. AMTRAK CORPORATION**

Mailing Address 50 MASSACHUSETTS AVENUE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
MILLER REIMBURSEMENT - TRAVEL: RAIL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6568**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. AMTRAK CORPORATION**

Mailing Address 50 MASSACHUSETTS AVENUE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: RAIL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6586**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. AMTRAK CORPORATION**

Mailing Address 50 MASSACHUSETTS AVENUE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: RAIL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6642**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. AMTRAK CORPORATION**

Mailing Address 50 MASSACHUSETTS AVENUE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: RAIL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6646**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. BASECAMP INC**

Mailing Address 1929 18TH STREET  
NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
JORTNER REIMBURSEMENT - BUSINESS CARDS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6540**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. CARMINE'S NYC**

Mailing Address 200 W 44TH ST

City NY State NY Zip Code 10036

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.6509**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CARMINE'S NYC**

Mailing Address 200 W 44TH ST

City NY State NY Zip Code 10036

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.6510**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CFL ASSOCIATES**

Mailing Address 4189 SOUTH FOUR MILE RUN DRIVE

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.6290**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. CHECKER CAB**

Mailing Address 3351 W ADDISON STREET

City State Zip Code  
CHICAGO IL 60618

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2013

Transaction ID : SB21B.6610

Amount of Each Disbursement this Period

22.43

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CHEVRON CORPORATION**

Mailing Address 6001 BOLLINGER CANYON ROAD

City State Zip Code  
SAN RAMON CA 94583

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: FUEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2013

Transaction ID : SB21B.6626

Amount of Each Disbursement this Period

9.12

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CHOICE TAXI ASSOCIATION**

Mailing Address 6550 N CLARK STREET

City State Zip Code  
CHICAGO IL 60626

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2013

Transaction ID : SB21B.6628

Amount of Each Disbursement this Period

23.78

[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial) <b>A. CROWNE PLAZA INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 21 / 2013
Mailing Address 3 RAVINA DRIVE SUITE 100		<b>Transaction ID : SB21B.6580</b>
City ATLANTA State GA Zip Code 30346	Amount of Each Disbursement this Period 434.07	
Purpose of Disbursement JORTNER REIMBURSEMENT - TRAVEL: LODGING	Category/Type 002	<b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. CVS PHARMACY</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 1555 WILSON BLVD.		<b>Transaction ID : SB21B.6640</b>
City ARLINGTON State VA Zip Code 22209	Amount of Each Disbursement this Period 9.20	
Purpose of Disbursement JORTNER REIMBURSEMENT - POSTAGE	Category/Type 003	<b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. CVS PHARMACY</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 1555 WILSON BLVD.		<b>Transaction ID : SB21B.6644</b>
City ARLINGTON State VA Zip Code 22209	Amount of Each Disbursement this Period 2.10	
Purpose of Disbursement JORTNER REIMBURSEMENT - POSTAGE	Category/Type 003	<b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. D7 CAR TRANSPORT NY**

Mailing Address 43-23 35TH STREET

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2013

Transaction ID : SB21B.6598

Amount of Each Disbursement this Period

133.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. DESERT CAB COMPANY**

Mailing Address 4675 WYNN ROAD

City LAS VEGAS State NV Zip Code 89103

Purpose of Disbursement JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2013

Transaction ID : SB21B.6528

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. DESERT CAB COMPANY**

Mailing Address 4675 WYNN ROAD

City LAS VEGAS State NV Zip Code 89103

Purpose of Disbursement JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2013

Transaction ID : SB21B.6529

Amount of Each Disbursement this Period

9.50

[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

### A. DESERT CAB COMPANY

Mailing Address 4675 WYNN ROAD

City LAS VEGAS State NV Zip Code 89103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2013

Transaction ID : SB21B.6532

Amount of Each Disbursement this Period

11.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### B. DESERT CAB COMPANY

Mailing Address 4675 WYNN ROAD

City LAS VEGAS State NV Zip Code 89103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 24 / 2013

Transaction ID : SB21B.6556

Amount of Each Disbursement this Period

11.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### C. ENTERPRISE RENT-A-CAR

Mailing Address 600 CORPORATE PARK DRIVE

City ST. LOUIS State MO Zip Code 63105

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: CAR RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 24 / 2013

Transaction ID : SB21B.6562

Amount of Each Disbursement this Period

36.61

[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. ENTERPRISE RENT-A-CAR**

Mailing Address 600 CORPORATE PARK DRIVE

City ST. LOUIS State MO Zip Code 63105

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: CAR RENTAL

Category/  
Type

Candidate Name

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

Date of Disbursement  
M M M / D D D / Y Y Y Y Y Y  
12 / 06 / 2013

Transaction ID : **SB21B.6674**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. EXPEDIA, INC.**

Mailing Address 333 108TH AVENUE  
NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: LODGING

Category/  
Type

Candidate Name

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

Date of Disbursement  
M M M / D D D / Y Y Y Y Y Y  
12 / 04 / 2013

Transaction ID : **SB21B.6670**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. EXXONMOBIL**

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: FUEL

Category/  
Type

Candidate Name

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

Date of Disbursement  
M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2013

Transaction ID : **SB21B.6606**

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 1812 ADAMS MILL RD  
NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2013

Transaction ID : SB21B.6505

Amount of Each Disbursement this Period

66.62

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 1812 ADAMS MILL RD  
NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SB21B.6507

Amount of Each Disbursement this Period

17.17

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 1812 ADAMS MILL RD  
NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: SHIPPING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 19 / 2013

Transaction ID : SB21B.6524

Amount of Each Disbursement this Period

13.45

[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 1812 ADAMS MILL RD  
NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 08 / 2013

**Transaction ID : SB21B.6534**

Amount of Each Disbursement this Period

5.97

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 1812 ADAMS MILL RD  
NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 08 / 2013

**Transaction ID : SB21B.6535**

Amount of Each Disbursement this Period

42.65

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 1812 ADAMS MILL RD  
NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
JORTNER REIMBURSEMENT - SHIPPING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2013

**Transaction ID : SB21B.6546**

Amount of Each Disbursement this Period

38.95

**[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 1812 ADAMS MILL RD  
NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
JORTNER REIMBURSEMENT - PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6616**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 1812 ADAMS MILL RD  
NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
JORTNER REIMBURSEMENT - PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6618**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. MOLLY JANE FOWLER**

Mailing Address 307 STATE HIGHWAY RA

City CHAFFEE State MO Zip Code 63740

Purpose of Disbursement  
PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6264**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. GLOBE TAXI ASSN. INC.**

Mailing Address 4118 WEST LAWRENCE AVENUE

City CHICAGO State IL Zip Code 60630

Purpose of Disbursement JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2013

Transaction ID : SB21B.6614

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. HITCH CAB**

Mailing Address 801 K STREET

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement MILLER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2013

Transaction ID : SB21B.6666

Amount of Each Disbursement this Period

22.97

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HOLIDAY INN**

Mailing Address 11766 WILSHIRE BLVD  
SUITE 1450

City LOS ANGELES State CA Zip Code 90025

Purpose of Disbursement JORTNER REIMBURSEMENT - TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 24 / 2013

Transaction ID : SB21B.6550

Amount of Each Disbursement this Period

195.90

[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. HOLIDAY INN**

Mailing Address 11766 WILSHIRE BLVD  
SUITE 1450

City LOS ANGELES State CA Zip Code 90025

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2013

Transaction ID : SB21B.6584

Amount of Each Disbursement this Period

250.68

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. HOTWIRE INC.**

Mailing Address 333 MARKET STREET  
SUITE 100

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: CAR RENTAL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2013

Transaction ID : SB21B.6600

Amount of Each Disbursement this Period

48.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HOTWIRE INC.**

Mailing Address 333 MARKET STREET  
SUITE 100

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: CAR RENTAL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2013

Transaction ID : SB21B.6601

Amount of Each Disbursement this Period

45.35

[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. JETBLUE AIRWAYS**

Mailing Address 27-01 QUEENS PLAZA

City NORTH LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.6522**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. JETBLUE AIRWAYS**

Mailing Address 27-01 QUEENS PLAZA

City NORTH LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.6664**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MACKENZIE JORTNER**

Mailing Address 2021 KALORAMA ROAD NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
REIMBURSEMENT - PLEASE SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.6263**

Amount of Each Disbursement this Period

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. MACKENZIE JORTNER**

Mailing Address 2021 KALORAMA ROAD NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
REIMBURSEMENT - PLEASE SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2013

Transaction ID : **SB21B.6279**

Amount of Each Disbursement this Period

672.53

Full Name (Last, First, Middle Initial)

**B. MACKENZIE JORTNER**

Mailing Address 2021 KALORAMA ROAD NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
REIMBURSEMENT - PLEASE SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2013

Transaction ID : **SB21B.6285**

Amount of Each Disbursement this Period

1174.87

Full Name (Last, First, Middle Initial)

**C. MACKENZIE JORTNER**

Mailing Address 2021 KALORAMA ROAD NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
REIMBURSEMENT - PLEASE SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2013

Transaction ID : **SB21B.6287**

Amount of Each Disbursement this Period

406.64

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

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

2254.04

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. MACKENZIE JORTNER**

Mailing Address 2021 KALORAMA ROAD NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
REIMBURSEMENT - PLEASE SEE MEMO ITEMS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2013

Transaction ID : **SB21B.6289**

Amount of Each Disbursement this Period

189.24

Full Name (Last, First, Middle Initial)

**B. MACKENZIE JORTNER**

Mailing Address 2021 KALORAMA ROAD NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
REIMBURSEMENT - PLEASE SEE MEMO ITEMS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2013

Transaction ID : **SB21B.6293**

Amount of Each Disbursement this Period

1547.73

Full Name (Last, First, Middle Initial)

**C. MACKENZIE JORTNER**

Mailing Address 2021 KALORAMA ROAD NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
REIMBURSEMENT - PLEASE SEE MEMO ITEMS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2013

Transaction ID : **SB21B.6294**

Amount of Each Disbursement this Period

367.80

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

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

4104.77

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. MACKENZIE JORTNER**

Mailing Address 2021 KALORAMA ROAD NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
REIMBURSEMENT - PLEASE SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2013

Transaction ID : **SB21B.6299**

Amount of Each Disbursement this Period

196.45

Full Name (Last, First, Middle Initial)

**B. MACKENZIE JORTNER**

Mailing Address 2021 KALORAMA ROAD NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
REIMBURSEMENT - PLEASE SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2013

Transaction ID : **SB21B.6301**

Amount of Each Disbursement this Period

145.45

Full Name (Last, First, Middle Initial)

**C. MACKENZIE JORTNER**

Mailing Address 2021 KALORAMA ROAD NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
REIMBURSEMENT - PLEASE SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 06 / 2013

Transaction ID : **SB21B.6309**

Amount of Each Disbursement this Period

874.60

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

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

1216.50

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. MACKENZIE JORTNER**

Mailing Address 2021 KALORAMA ROAD NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement  
REIMBURSEMENT - PLEASE SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			17			2013			

Transaction ID : SB21B.6311

Amount of Each Disbursement this Period

228.61
--------

Category/Type

Full Name (Last, First, Middle Initial)

**B. KING AND GROVE NEW YORK**

Mailing Address 29 E 29TH STREET

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2013			

Transaction ID : SB21B.6577

Amount of Each Disbursement this Period

179.04
--------

Category/Type

002

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. KING AND GROVE NEW YORK**

Mailing Address 29 E 29TH STREET

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2013			

Transaction ID : SB21B.6576

Amount of Each Disbursement this Period

179.04
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Category/Type

002

[MEMO ITEM]

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

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

228.61
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

### A. TIMOTHY MILLER

Mailing Address 440 RHODE ISLAND AVE NW  
#402

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

### B. TIMOTHY MILLER

Mailing Address 440 RHODE ISLAND AVE NW  
#402

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

### C. NJ TRANSIT

Mailing Address 1 PENN PLAZA EAST

City NEWARK State NJ Zip Code 07105

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: RAIL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2013

Transaction ID : SB21B.6296

Amount of Each Disbursement this Period

316.00

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2013

Transaction ID : SB21B.6303

Amount of Each Disbursement this Period

22.97

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2013

Transaction ID : SB21B.6554

Amount of Each Disbursement this Period

12.50

[MEMO ITEM]

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

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

338.97

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2013

**Transaction ID : SB21B.6260**

Amount of Each Disbursement this Period

265.21

Full Name (Last, First, Middle Initial)

**B. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2013

**Transaction ID : SB21B.6261**

Amount of Each Disbursement this Period

86.28

Full Name (Last, First, Middle Initial)

**C. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2013

**Transaction ID : SB21B.6262**

Amount of Each Disbursement this Period

2.13

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

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

353.62

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2013

Transaction ID : **SB21B.6266**

Amount of Each Disbursement this Period

263.52

Full Name (Last, First, Middle Initial)

**B. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2013

Transaction ID : **SB21B.6267**

Amount of Each Disbursement this Period

2.13

Full Name (Last, First, Middle Initial)

**C. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2013

Transaction ID : **SB21B.6268**

Amount of Each Disbursement this Period

0.85

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

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

266.50

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2013

Transaction ID : **SB21B.6269**

Amount of Each Disbursement this Period

87.13

Full Name (Last, First, Middle Initial)

**B. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2013

Transaction ID : **SB21B.6271**

Amount of Each Disbursement this Period

340.00

Full Name (Last, First, Middle Initial)

**C. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2013

Transaction ID : **SB21B.6272**

Amount of Each Disbursement this Period

93.93

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

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

521.06



**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2013

**Transaction ID : SB21B.6273**

Amount of Each Disbursement this Period

0.43
------

Full Name (Last, First, Middle Initial)

**B. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2013

**Transaction ID : SB21B.6274**

Amount of Each Disbursement this Period

0.43
------

Full Name (Last, First, Middle Initial)

**C. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2013

**Transaction ID : SB21B.6275**

Amount of Each Disbursement this Period

0.43
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1.29
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2013

Transaction ID : **SB21B.6276**

Amount of Each Disbursement this Period

2.56
------

Full Name (Last, First, Middle Initial)

**B. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2013

Transaction ID : **SB21B.6277**

Amount of Each Disbursement this Period

170.00
--------

Full Name (Last, First, Middle Initial)

**C. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2013

Transaction ID : **SB21B.6281**

Amount of Each Disbursement this Period

29.00
-------

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

201.56
--------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

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

Date of Disbursement:  /  /

Mailing Address: 144 2ND ST.  
1ST FL.

City: SAN FRANCISCO State: CA Zip Code: 94105

Purpose of Disbursement: MERCHANT FEES

Candidate Name:

Office Sought:  House  Senate  President  
State:  District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID : **SB21B.6280**

Amount of Each Disbursement this Period:

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

Date of Disbursement:  /  /

Mailing Address: 144 2ND ST.  
1ST FL.

City: SAN FRANCISCO State: CA Zip Code: 94105

Purpose of Disbursement: MERCHANT FEES

Candidate Name:

Office Sought:  House  Senate  President  
State:  District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID : **SB21B.6283**

Amount of Each Disbursement this Period:

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

Date of Disbursement:  /  /

Mailing Address: 144 2ND ST.  
1ST FL.

City: SAN FRANCISCO State: CA Zip Code: 94105

Purpose of Disbursement: MERCHANT FEES

Candidate Name:

Office Sought:  House  Senate  President  
State:  District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID : **SB21B.6284**

Amount of Each Disbursement this Period:

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2013

Transaction ID : **SB21B.6286**

Amount of Each Disbursement this Period

3.41

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2013

Transaction ID : **SB21B.6288**

Amount of Each Disbursement this Period

8.50

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2013

Transaction ID : **SB21B.6292**

Amount of Each Disbursement this Period

0.85

Category/  
Type

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

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

12.76

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT 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
11		22		2013

Transaction ID : **SB21B.6297**

Amount of Each Disbursement this Period

2.13
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Full Name (Last, First, Middle Initial)

**B. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT 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
11		22		2013

Transaction ID : **SB21B.6300**

Amount of Each Disbursement this Period

425.43
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Full Name (Last, First, Middle Initial)

**C. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT 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
11		22		2013

Transaction ID : **SB21B.6304**

Amount of Each Disbursement this Period

42.50
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

470.06
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 22 / 2013

Transaction ID : **SB21B.6306**

Amount of Each Disbursement this Period

4.25

Full Name (Last, First, Middle Initial)

**B. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2013

Transaction ID : **SB21B.6307**

Amount of Each Disbursement this Period

20.86

Full Name (Last, First, Middle Initial)

**C. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2013

Transaction ID : **SB21B.6308**

Amount of Each Disbursement this Period

2.13

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

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

27.24

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2013

Transaction ID : **SB21B.6312**

Amount of Each Disbursement this Period

0.43

Full Name (Last, First, Middle Initial)

**B. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2013

Transaction ID : **SB21B.6310**

Amount of Each Disbursement this Period

1125.00

Full Name (Last, First, Middle Initial)

**C. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2013

Transaction ID : **SB21B.6313**

Amount of Each Disbursement this Period

0.43

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

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

1125.86

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. PIRYX, INC.**

Mailing Address 144 2ND ST.  
1ST FL.

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2013

Transaction ID : SB21B.6314

Amount of Each Disbursement this Period

2.13

Full Name (Last, First, Middle Initial)

**B. PLAT PARKING LOT**

Mailing Address 300 CRESCENT COURT

City DALLAS State TX Zip Code 75201

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: PARKING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2013

Transaction ID : SB21B.6622

Amount of Each Disbursement this Period

4.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. PLAT PARKING LOT**

Mailing Address 300 CRESCENT COURT

City DALLAS State TX Zip Code 75201

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: PARKING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2013

Transaction ID : SB21B.6624

Amount of Each Disbursement this Period

3.75

[MEMO ITEM]

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

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

2.13



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. REAGAN NATIONAL AIRPORT PARKING**

Mailing Address 2401 SMITH BLVD

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: PARKING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.6676**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ROD'S STEAK AND SEAFOOD GRILLE**

Mailing Address 1 CONVENT ROAD

City MORRISTOWN State NJ Zip Code 07960

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: MEALS

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.6634**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. SCR ASSOCIATES**

Mailing Address 4 LEBLANC DRIVE

City DANVERS State MA Zip Code 01923

Purpose of Disbursement  
FUNDRAISING CONSULTING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.6298**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. SF TOWN TAXI**

Mailing Address 999 PENNSYLVANIA ave

City State Zip Code  
SAN FRANCISCO CA 94107

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 05 / 2013

**Transaction ID : SB21B.6672**

Amount of Each Disbursement this Period

7.50

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. SMITH GARAGE**

Mailing Address 1100 SMITH STREET

City State Zip Code  
HOUSTON TX 77002

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: PARKING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 25 / 2013

**Transaction ID : SB21B.6608**

Amount of Each Disbursement this Period

6.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. SPEEDWAY**

Mailing Address PO BOX 1550

City State Zip Code  
SPRINGFIELD OH 45501

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 24 / 2013

**Transaction ID : SB21B.6558**

Amount of Each Disbursement this Period

3.34

**[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. SWISSOTEL CHICAGO**

Mailing Address 323 E. UPPER WACKER DRIVE

City CHICAGO State IL Zip Code 60601

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2013

Transaction ID : SB21B.6582

Amount of Each Disbursement this Period

412.91

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY**

Mailing Address 1033 NORTH FAIRFAX STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SB21B.6265

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY**

Mailing Address 1033 NORTH FAIRFAX STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 12 / 2013

Transaction ID : SB21B.6282

Amount of Each Disbursement this Period

3000.00

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

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

8000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. TARGETED VICTORY**

Mailing Address 1033 NORTH FAIRFAX STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
WEBSITE DEVELOPMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2013

Transaction ID : **SB21B.6291**

Amount of Each Disbursement this Period

1587.50

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY**

Mailing Address 1033 NORTH FAIRFAX STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
WEBSITE SUPPORT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2013

Transaction ID : **SB21B.6295**

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY**

Mailing Address 1033 NORTH FAIRFAX STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2013

Transaction ID : **SB21B.6302**

Amount of Each Disbursement this Period

500.00

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

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

3337.50

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. TARGETED VICTORY**

Mailing Address 1033 NORTH FAIRFAX STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 27 / 2013

Transaction ID : SB21B.6305

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. THE HERTZ CORPORATION**

Mailing Address 225 BRAE BLVD

City PARK RIDGE State NJ Zip Code 07656

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: CAR RENTAL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2013

Transaction ID : SB21B.6538

Amount of Each Disbursement this Period

90.21

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE HERTZ CORPORATION**

Mailing Address 225 BRAE BLVD

City PARK RIDGE State NJ Zip Code 07656

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2013

Transaction ID : SB21B.6632

Amount of Each Disbursement this Period

16.60

[MEMO ITEM]

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

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

500.00

**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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. THE UNION LEAGUE CLUB**

Mailing Address 38 EAST 37TH STREET

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement  
TRAVEL: FOOD

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2013

Transaction ID : SB21B.6278

Amount of Each Disbursement this Period

290.76

Full Name (Last, First, Middle Initial)

**B. THE VENETIAN LAS VEGAS**

Mailing Address 3355 LAS VEGAS BLVD  
S

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2013

Transaction ID : SB21B.6515

Amount of Each Disbursement this Period

100.24

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE VENETIAN LAS VEGAS**

Mailing Address 3355 LAS VEGAS BLVD  
S

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2013

Transaction ID : SB21B.6516

Amount of Each Disbursement this Period

100.24

[MEMO ITEM]

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

290.76

**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 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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. UBER INC.**

Mailing Address 706 MISSION STREET

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 09 / 2013

**Transaction ID : SB21B.6526**

Amount of Each Disbursement this Period

16.90

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. UBER INC.**

Mailing Address 706 MISSION STREET

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 23 / 2013

**Transaction ID : SB21B.6548**

Amount of Each Disbursement this Period

12.34

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. UBER INC.**

Mailing Address 706 MISSION STREET

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 22 / 2013

**Transaction ID : SB21B.6588**

Amount of Each Disbursement this Period

12.00

**[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. UBER INC.**

Mailing Address 706 MISSION STREET

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 22 / 2013

Transaction ID : SB21B.6590

Amount of Each Disbursement this Period

16.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. UBER INC.**

Mailing Address 706 MISSION STREET

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 22 / 2013

Transaction ID : SB21B.6592

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. UBER INC.**

Mailing Address 706 MISSION STREET

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 23 / 2013

Transaction ID : SB21B.6594

Amount of Each Disbursement this Period

45.00

[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. UBER INC.**

Mailing Address 706 MISSION STREET

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2013

Transaction ID : SB21B.6596

Amount of Each Disbursement this Period

14.12

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. UBER INC.**

Mailing Address 706 MISSION STREET

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 07 / 2013

Transaction ID : SB21B.6648

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. UBER INC.**

Mailing Address 706 MISSION STREET

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 07 / 2013

Transaction ID : SB21B.6649

Amount of Each Disbursement this Period

16.00

[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. UBER INC.**

Mailing Address 706 MISSION STREET

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2013

Transaction ID : **SB21B.6650**

Amount of Each Disbursement this Period

11.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. UBER INC.**

Mailing Address 706 MISSION STREET

City State Zip Code  
SAN FRANCISCO CA 94103

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2013

Transaction ID : **SB21B.6654**

Amount of Each Disbursement this Period

12.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES, INC.**

Mailing Address 233 S. WACKER DRIVE

City State Zip Code  
CHICAGO IL 60606

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2013

Transaction ID : **SB21B.6513**

Amount of Each Disbursement this Period

208.90

[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD.

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6519**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD.

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
JORNTER REIMBURSEMENT - TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6542**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD.

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6564**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD.

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6574**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD.

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6570**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD.

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6571**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD.

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2013

Transaction ID : SB21B.6668

Amount of Each Disbursement this Period

874.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD.

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2013

Transaction ID : SB21B.6656

Amount of Each Disbursement this Period

136.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. YELLOW CAB**

Mailing Address 2511 41ST AVENUE

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2013

Transaction ID : SB21B.6560

Amount of Each Disbursement this Period

9.30

[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. YELLOW CAB**

Mailing Address 2511 41ST AVENUE

City State Zip Code  
LONG ISLAND CITY NY 11101

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6552**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. YELLOW CAB**

Mailing Address 2511 41ST AVENUE

City State Zip Code  
LONG ISLAND CITY NY 11101

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6604**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. YELLOW CAB**

Mailing Address 2511 41ST AVENUE

City State Zip Code  
LONG ISLAND CITY NY 11101

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6620**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. YELLOW CAB**

Mailing Address 2511 41ST AVENUE

City State Zip Code  
LONG ISLAND CITY NY 11101

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

002

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2013			

Transaction ID : SB21B.6612

Amount of Each Disbursement this Period

5.40
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. YELLOW CAB**

Mailing Address 2511 41ST AVENUE

City State Zip Code  
LONG ISLAND CITY NY 11101

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

002

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2013			

Transaction ID : SB21B.6636

Amount of Each Disbursement this Period

11.00
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. YELLOW CAB**

Mailing Address 2511 41ST AVENUE

City State Zip Code  
LONG ISLAND CITY NY 11101

Purpose of Disbursement  
JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

002

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2013			

Transaction ID : SB21B.6630

Amount of Each Disbursement this Period

3.83
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[MEMO ITEM]

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

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

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

**A. YELLOW CAB**

Mailing Address 2511 41ST AVENUE

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2013

Transaction ID : SB21B.6658

Amount of Each Disbursement this Period

6.25

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. YELLOW CAB**

Mailing Address 2511 41ST AVENUE

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2013

Transaction ID : SB21B.6659

Amount of Each Disbursement this Period

10.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. YELLOW CAB**

Mailing Address 2511 41ST AVENUE

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2013

Transaction ID : SB21B.6660

Amount of Each Disbursement this Period

5.50

[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)  
**AMERICARISINGPAC.ORG**

Full Name (Last, First, Middle Initial)

### A. YELLOW CAB COMPANY OF DC INC.

Mailing Address 1636 BLADENSBURG ROAD  
NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement JORTNER REIMBURSEMENT - TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2013

Transaction ID : SB21B.6638

Amount of Each Disbursement this Period

12.50
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

0.00
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