

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.
AMERICAN UNITY PAC INC

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

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / through / /

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

Type or Print Name of Treasurer Margaret Hoover

Signature of Treasurer Margaret Hoover [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AMERICAN UNITY PAC INC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value=""/>	<input type="text" value="107343.37"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1483878.75"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2394418.45"/>	<input type="text" value="5592713.90"/>
(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="388297.20"/>	<input type="text" value="5700057.27"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1995358.46"/>	<input type="text" value="3817118.53"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1882938.74"/>	<input type="text" value="1882938.74"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="19234.88"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

AMERICAN UNITY PAC INC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2394373.45	5486463.28
(ii) Unitemized	45.00	250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2394418.45	5486713.28
(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)	2394418.45	5486713.28
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	106000.62
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))..... ▶	2394418.45	5592713.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2394418.45	5592713.90

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	1397139.87	2064290.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1397139.87	2064290.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	190000.00
24. Independent Expenditures (use Schedule E)	598218.59	1562828.38
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)) ..	1995358.46	3817118.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1995358.46	3817118.53

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)	2394418.45	5486713.28
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2394418.45	5486713.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1397139.87	2064290.15
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	106000.62
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1397139.87	1958289.53

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5H-CB

Form/Schedule: F3XN
Transaction ID :

Independent Expenditures previously reported as memo entries and outstanding debt have been paid. Schedule D has been adjusted where required to show payment of outstanding debt for Independent Expenditures. Schedule E notes which expenses were previously reported as memos. Schedule E notes those IE's reported on 48 or 24 hour notices as memo entries and Schedule D notes them as current debt if the invoices have not yet been paid.

Form/Schedule:
Transaction ID:

**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 22
	<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)
AMERICAN UNITY PAC INC

A. Donald Capoccia
Full Name (Last, First, Middle Initial)

Mailing Address 330 E. 56th St.
Apt. 1601

City New York State NY Zip Code 10022

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

Name of Employer BFC Second Avenue Builders Occupation Real Estate Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 05 / 2014
Transaction ID : SA11AI.4754

Amount of Each Receipt this Period
5000.00

B. Michael Kalb
Full Name (Last, First, Middle Initial)

Mailing Address 2 Park St.
1st Floor

City London State ZZ Zip Code

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

Name of Employer Sun European Partners LLC Occupation Senior Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
09 / 09 / 2014
Transaction ID : SA11AI.4758

Amount of Each Receipt this Period
100000.00

Verified US Citizen

C. Seth A. Klarman
Full Name (Last, First, Middle Initial)

Mailing Address 329 Heath St.

City Chestnut Hill State MA Zip Code 02467

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

Name of Employer The Ballpost Group LLC Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250000.00

Date of Receipt
09 / 25 / 2014
Transaction ID : SA11AI.4761

Amount of Each Receipt this Period
250000.00

SUBTOTAL of Receipts This Page (optional).....▶	355000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 22
<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)
AMERICAN UNITY PAC INC

A. Daniel S. Loeb
Full Name (Last, First, Middle Initial)

Mailing Address 390 Park Avenue

City New York	State NY	Zip Code 10022
------------------	-------------	-------------------

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

Name of Employer Third Point LLC	Occupation Investment Manager
-------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2014

Transaction ID : SA11AI.4760

Amount of Each Receipt this Period
1000000.00

B. Kenneth B. Mehlman
Full Name (Last, First, Middle Initial)

Mailing Address 9 West 57th St., Ste. 4200

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

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

Name of Employer Kohlberg Kravis Roberts & Co.	Occupation Attorney
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

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

Transaction ID : SA11AI.4756

Amount of Each Receipt this Period
25000.00

C. Paul Singer
Full Name (Last, First, Middle Initial)

Mailing Address 40 West 57th Street, 30th Floor

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

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

Name of Employer Elliott Management Corp.	Occupation Principal
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1805463.28

Date of Receipt

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

Transaction ID : SA11AI.4784

Amount of Each Receipt this Period
14373.45

In-kind - Legal Fees

SUBTOTAL of Receipts This Page (optional).....▶	1039373.45
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 22
(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)
AMERICAN UNITY PAC INC

A. Full Name (Last, First, Middle Initial)
Paul Singer

Mailing Address 40 West 57th Street, 30th Floor

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

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

Name of Employer Elliott Management Corp.	Occupation Principal
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2805463.28

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	26	/	2014

Transaction ID : SA11AI.4762

Amount of Each Receipt this Period

1000000.00

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

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SUBTOTAL of Receipts This Page (optional).....▶	1000000.00
TOTAL This Period (last page this line number only).....▶	2394373.45

**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)
AMERICAN UNITY PAC INC

Full Name (Last, First, Middle Initial)

A. Allegiance Strategies LLC

Mailing Address PO Box 53454

City Washington State DC Zip Code 20009

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

MM / DD / YYYY
08 / 29 / 2014

Transaction ID : SB21B.4765

Amount of Each Disbursement this Period

10800.00

Full Name (Last, First, Middle Initial)

B. Allegiance Strategies LLC

Mailing Address PO Box 53454

City Washington State DC Zip Code 20009

Purpose of Disbursement Web Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2014

Transaction ID : SB21B.4770

Amount of Each Disbursement this Period

80027.17

Full Name (Last, First, Middle Initial)

C. Allegiance Strategies LLC

Mailing Address PO Box 53454

City Washington State DC Zip Code 20009

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SB21B.4773

Amount of Each Disbursement this Period

50102.62

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

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

140929.79

**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)
AMERICAN UNITY PAC INC

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 1909 K St., NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4763

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. BB&T

Mailing Address 1909 K St., NW

City Washington State DC Zip Code 20006

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

/ /

Transaction ID : SB21B.4768

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address 1909 K St., NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4771

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)
AMERICAN UNITY PAC INC

Full Name (Last, First, Middle Initial)

A. Huckaby Davis Lisker Inc.

Mailing Address 228 S. Washington St., Ste. 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
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
09 / 30 / 2014

Transaction ID : SB21B.4774

Amount of Each Disbursement this Period

1382.21

Full Name (Last, First, Middle Initial)

B. McCarthy Hennings Whalen Inc.

Mailing Address 1850 M St., NW Ste. 235

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non Candidate Media Production

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2014

Transaction ID : SB21B.4778

Amount of Each Disbursement this Period

3273.79

Full Name (Last, First, Middle Initial)

C. Mentzer Media Services Inc.

Mailing Address 600 Fairmount Ave., Ste. 306

City Towson State MD Zip Code 21286

Purpose of Disbursement
8/13/14 Media Buy Adjustment-See Line 24

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 / 2014

Transaction ID : SB21B.4776

Amount of Each Disbursement this Period

-80000.00

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

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

-75344.00

**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)
AMERICAN UNITY PAC INC

Full Name (Last, First, Middle Initial)

A. Mentzer Media Services Inc.

Mailing Address 600 Fairmount Ave., Ste. 306

City Towson State MD Zip Code 21286

Purpose of Disbursement
Media buy-prepayment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2014

Transaction ID : SB21B.4772

Amount of Each Disbursement this Period

1284000.00

Full Name (Last, First, Middle Initial)

B. Paul Singer

Mailing Address 40 West 57th Street, 30th Floor

City New York State NY Zip Code 10019

Purpose of Disbursement
In-kind - Legal 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 / 08 / 2014

Transaction ID : SB21B.4785

Amount of Each Disbursement this Period

14373.45

Full Name (Last, First, Middle Initial)

C. Voter/Consumer Research Inc.

Mailing Address 501 C St., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Research

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2014

Transaction ID : SB21B.4764

Amount of Each Disbursement this Period

10000.00

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

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

1308373.45

**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)
AMERICAN UNITY PAC INC

Full Name (Last, First, Middle Initial)

A. Voter/Consumer Research Inc.

Mailing Address 501 C St., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Research

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
09 / 21 / 2014

Transaction ID : SB21B.4769

Amount of Each Disbursement this Period

22950.00

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

22950.00

1397113.14

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 22
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
AMERICAN UNITY PAC INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor McCarthy Hennings Whalen Inc.	Nature of Debt (Purpose): IE-Innis-Media Production
Mailing Address 1850 M St., NW Ste. 235	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period 7991.65	Transaction ID : SD10.4704	
Amount Incurred This Period -7991.65	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor McCarthy Hennings Whalen Inc.	Nature of Debt (Purpose): IE-Ros Lehtinen-Media Production
Mailing Address 1850 M St., NW Ste. 235	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4782	
Amount Incurred This Period 9108.04	Payment This Period 0.00	Outstanding Balance at Close of This Period 9108.04

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor McCarthy Hennings Whalen Inc.	Nature of Debt (Purpose): IE-Dent-Media Production
Mailing Address 1850 M St., NW Ste. 235	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4783	
Amount Incurred This Period 10126.84	Payment This Period 0.00	Outstanding Balance at Close of This Period 10126.84

1) SUBTOTALS This Period This Page (optional)..... ▶	19234.88
2) TOTALS This Period (last page this line number only)..... ▶	19234.88
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	19234.88

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICAN UNITY PAC INC
FEC IDENTIFICATION NUMBER
C C00523589
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Arena Communications
Mailing Address: 1780 Sequoia Vista Circle
City: Salt Lake City, State: UT, Zip Code: 84104
Purpose of Expenditure: IE-Innis-Direct Mail, Category/Type: 004
Name of Federal Candidate: DANIEL E INNIS, Support
Office Sought: House, District: 01, State: NH
Calendar Year-To-Date Per Election for Office Sought: 321478.00
Disbursement For: Primary, 2014

Full Name of Payee: Arena Communications
Mailing Address: 1780 Sequoia Vista Circle
City: Salt Lake City, State: UT, Zip Code: 84104
Purpose of Expenditure: IE-Innis-Direct Mail, Category/Type: 004
Name of Federal Candidate: DANIEL E INNIS, Support
Office Sought: House, District: 01, State: NH
Calendar Year-To-Date Per Election for Office Sought: 342956.00
Disbursement For: Primary, 2014

(a) SUBTOTAL of Itemized Independent Expenditures: 42956.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Margaret Hoover [Electronically Filed] Date 10/14/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICAN UNITY PAC INC	FEC IDENTIFICATION NUMBER ▼ C C00523589
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Arena Communications	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 02 / 2014
Mailing Address 1780 Sequoia Vista Circle	Amount 40398.00
City State Zip Code Salt Lake City UT 84104	Transaction ID : SE.4723 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 02 / 2014
Purpose of Expenditure IE-Innis-Direct Mail	Category/Type 004
Name of Federal Candidate DANIEL E INNIS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President State: NH
Calendar Year-To-Date Per Election for Office Sought 434301.65	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee HVT-Marketing	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 09 / 2014
Mailing Address S66 W14523 Janesville Rd.	Amount 50000.00
City State Zip Code Muskego WI 53150	Transaction ID : SE.4731 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 26 / 2014
Purpose of Expenditure IE-Collins-Media Production/Media Buy	Category/Type 004
Name of Federal Candidate SUSAN M COLLINS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: ME
Calendar Year-To-Date Per Election for Office Sought 50000.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	90398.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margaret Hoover [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICAN UNITY PAC INC	FEC IDENTIFICATION NUMBER ▼ C C00523589
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee McCarthy Hennings Whalen Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 20 / 2014
Mailing Address 1850 M St., NW Ste. 235	Amount 7991.65
City State Zip Code Washington DC 20036	Transaction ID : SE.4657 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 29 / 2014
Purpose of Expenditure IE-Innis-Media Production (prev reported as memo)	Category/Type 004
Name of Federal Candidate DANIEL E INNIS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President <input type="checkbox"/> State: NH
Calendar Year-To-Date Per Election for Office Sought 372425.65	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee McCarthy Hennings Whalen Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 04 / 2014
Mailing Address 1850 M St., NW Ste. 235	Amount 8916.94
City State Zip Code Washington DC 20036	Transaction ID : SE.4726 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 04 / 2014
Purpose of Expenditure IE-Innis-Media Production	Category/Type 004
Name of Federal Candidate DANIEL E INNIS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President <input type="checkbox"/> State: NH
Calendar Year-To-Date Per Election for Office Sought 768218.59	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	16908.59
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margaret Hoover [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
10 / 14 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICAN UNITY PAC INC
FEC IDENTIFICATION NUMBER
C C00523589
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
McCarthy Hennings Whalen Inc.
[MEMO ITEM]
Mailing Address
1850 M St., NW
Ste. 235
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
IE-Ros Lehtinen-Media Production
Category/Type
004
Name of Federal Candidate
ILEANA ROS-LEHTINEN
Support
Office Sought: House District: 27
State: FL
Calendar Year-To-Date
Per Election for Office Sought
40000.00

Date of Public Distribution/Dissemination
09 / 09 / 2014
Amount
9108.04
Transaction ID : SE.4780
Date of Disbursement or Obligation
09 / 09 / 2014
Disbursement For: General
2014

Full Name of Payee
McCarthy Hennings Whalen Inc.
[MEMO ITEM]
Mailing Address
1850 M St., NW
Ste. 235
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
IE-Dent-Media Production
Category/Type
004
Name of Federal Candidate
CHARLES W DENT
Support
Office Sought: House District: 15
State: PA
Calendar Year-To-Date
Per Election for Office Sought
40000.00

Date of Public Distribution/Dissemination
09 / 09 / 2014
Amount
10126.84
Transaction ID : SE.4781
Date of Disbursement or Obligation
09 / 09 / 2014
Disbursement For: General
2014

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margaret Hoover
[Electronically Filed]
Date 10 / 14 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICAN UNITY PAC INC
FEC IDENTIFICATION NUMBER
C C00523589
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Mentzer Media Services Inc.
Mailing Address: 600 Fairmount Ave., Ste. 306
City: Towson, State: MD, Zip Code: 21286
Purpose of Expenditure: IE-Innis-Media Buy, Category/Type: 004
Name of Federal Candidate: DANIEL E INNIS, Support
Office Sought: House, District: 01, State: NH
Calendar Year-To-Date Per Election for Office Sought: 759301.65
Disbursement For: Primary, 2014

Full Name of Payee: Mentzer Media Services Inc.
Mailing Address: 600 Fairmount Ave., Ste. 306
City: Towson, State: MD, Zip Code: 21286
Purpose of Expenditure: IE-Ros-Lehtinen-Media Buy, Category/Type: 004
Name of Federal Candidate: ILEANA ROS-LEHTINEN, Support
Office Sought: House, District: 27, State: FL
Calendar Year-To-Date Per Election for Office Sought: 40000.00
Disbursement For: General, 2014

(a) SUBTOTAL of Itemized Independent Expenditures: 365000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Margaret Hoover [Electronically Filed] Date 10/14/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICAN UNITY PAC INC	FEC IDENTIFICATION NUMBER ▼ C C00523589
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mentzer Media Services Inc.	Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2014
Mailing Address 600 Fairmount Ave., Ste. 306	Amount 40000.00
City State Zip Code Towson MD 21286	Transaction ID : SE.4736 Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2014
Purpose of Expenditure IE-Dent-Media Buy	Category/Type 004
Name of Federal Candidate CHARLES W DENT	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 15 State: PA
Calendar Year-To-Date Per Election for Office Sought 40000.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee	Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: State:
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	40000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	598218.59

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margaret Hoover
Signature

[Electronically Filed]

Date **10 / 14 / 2014**