

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 Searchlight Leadership Fund

ADDRESS (number and street) 700 13th Street, NW Suite 600 Washington DC 20005 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00327395 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 05 / 28 / 2013 through 06 / 30 / 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 Claude Zobell

Signature of Treasurer Claude Zobell [Electronically Filed] Date 07 / 31 / 2013

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

**Searchlight Leadership Fund**

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"/>		179532.64
(b) Cash on Hand at Beginning of Reporting Period.....	116767.84	
(c) Total Receipts (from Line 19) .....	147755.33	316895.93
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	264523.17	496428.57
7. Total Disbursements (from Line 31).....	124229.00	356134.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	140294.17	140294.17
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Searchlight Leadership Fund**

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).....	12500.00	42500.00
(ii) Unitemized .....	5.00	135.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12505.00	42635.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	109000.00	248000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	121505.00	290635.00
12. Transfers From Affiliated/Other Party Committees.....	21250.33	21250.33
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	10.60
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	5000.00	5000.00
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))..... ▶	147755.33	316895.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	147755.33	316895.93

**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 .....	26729.00	138384.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	26729.00	138384.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	95000.00	200300.00
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 .....	2500.00	17450.00
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)) ..	124229.00	356134.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	124229.00	356134.40

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	121505.00	290635.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	121505.00	290635.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	26729.00	138384.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	10.60
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	26729.00	138373.80

**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 41
	<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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Janine Lowy</b>		Date of Receipt MM / DD / YYYY 06 / 27 / 2013 <b>Transaction ID : C19995320</b>
Mailing Address 11601 Wilshire Blvd. 12th Floor		Amount of Each Receipt this Period 5000.00
City Los Angeles	State CA	Zip Code 90025
FEC ID number of contributing federal political committee. C	Name of Employer N/A	Occupation Homemaker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Peter Lowy</b>		Date of Receipt MM / DD / YYYY 06 / 27 / 2013 <b>Transaction ID : C19995323</b>
Mailing Address 11601 Wilshire Blvd 12th Floor		Amount of Each Receipt this Period 5000.00
City Los Angeles	State CA	Zip Code 90025-1748
FEC ID number of contributing federal political committee. C	Name of Employer Westfield Corporation	Occupation CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. John D. Raffaelli</b>		Date of Receipt MM / DD / YYYY 06 / 28 / 2013 <b>Transaction ID : C20001435</b>
Mailing Address 900 19Th Street, NW Suite 800		Amount of Each Receipt this Period 2500.00
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C	Name of Employer Capitol Council, LLC	Occupation Partner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	12500.00

**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 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Kindred Healthcare Inc. PAC</b>		Date of Receipt
Mailing Address 680 S. Fourth St. One Vencor Place		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
Louisville	KY	40202
FEC ID number of contributing federal political committee.	<input type="text" value="C00242271"/>	
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="5000.00"/>	
		Transaction ID : <b>C19976400</b>
		Amount of Each Receipt this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) <b>B. American College of Surgeons Professional Assn PAC</b>		Date of Receipt
Mailing Address 1640 Wisconsin Avenue, NW		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20007
FEC ID number of contributing federal political committee.	<input type="text" value="C00382424"/>	
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="5000.00"/>	
		Transaction ID : <b>C19979790</b>
		Amount of Each Receipt this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) <b>C. National Multi Housing Council PAC</b>		Date of Receipt
Mailing Address 1850 M Street NW Suite 540		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20036
FEC ID number of contributing federal political committee.	<input type="text" value="C00130773"/>	
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="2500.00"/>	
		Transaction ID : <b>C20001440</b>
		Amount of Each Receipt this Period <input type="text" value="2500.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="12500.00"/>
<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 8 OF 41  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. United Transportation Union PAC**

Mailing Address 24950 Country Club Blvd.  
 Suite 340

City North Olmsted State OH Zip Code 44070

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : C19974801**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**B. American Academy of Ophthalmology Inc PAC**

Mailing Address 655 Beach Street

City San Francisco State CA Zip Code 94109

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2013

**Transaction ID : C19974721**

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
**C. National Rural Letter Carriers Assn. PAC**

Mailing Address 1630 Duke Street  
 2nd Floor

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00072025

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2013

**Transaction ID : C19979791**

Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10000.00

**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 9 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. Pfizer Inc. PAC**

Mailing Address 235 E 42nd Street

City New York State NY Zip Code 10017-5703

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C20001441**

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
**B. American Congress of Ob-Gyns PAC**

Mailing Address 409 12th St SW

City Washington State DC Zip Code 20024-2125

FEC ID number of contributing federal political committee. **C** C00364158

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2013

**Transaction ID : C19976402**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**C. Outdoor Advertising Association of America PAC**

Mailing Address 1850 M Street, NW, Suite 1040

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00045781

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : C19995332**

Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<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 10 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. Chicago Board Options Exchange PAC**

Mailing Address 400 S. LaSalle Street

City Chicago State IL Zip Code 60605

FEC ID number of contributing federal political committee. **C** C00100693

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : C19976572**

Amount of Each Receipt this Period  
 2000.00

Full Name (Last, First, Middle Initial)  
**B. Travelers Companies Inc. PAC**

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

FEC ID number of contributing federal political committee. **C** C00376376

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C20001442**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
**C. American Academy Of Neurology Professional Asoc. PAC**

Mailing Address 1501 M Street, NW  
7th Street

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00435933

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : C19974723**

Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<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 11 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. PAC of the American Assoc. of Orthopaedic Surgeons**

Mailing Address 317 Massachusetts Avenue, NE  
1st Floor

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
06 / 06 / 2013  
**Transaction ID : C19974803**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. Verizon Communications, Inc./ Verizon Wireless Good Government Club**

Mailing Address 1300 I St NW  
Suite 400 West

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 13 / 2013  
**Transaction ID : C19979793**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. National Emergency Medicine PAC**

Mailing Address 1125 Executive Circle

City Irving State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C C00140061**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
05 / 30 / 2013  
**Transaction ID : C19973764**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<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 12 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. Radiation Therapy Services, Inc. PAC**

Mailing Address 2234 Colonial Blvd.

City Fort Myers State FL Zip Code 33907

FEC ID number of contributing federal political committee. **C** C00385120

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : C19995334**

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
**B. National Air Traffic Controllers Association PAC**

Mailing Address 1325 Massachusetts Avenue, NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : C19974725**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**C. Service Employees International Union C.O.P.E.**

Mailing Address 1800 Massachusetts Avenue, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2013

**Transaction ID : C19982285**

Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<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 13 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Home Depot Inc. PAC</b>		Date of Receipt
Mailing Address 1155 F Street, NW Suite 400		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee.	<input type="text" value="C00284885"/>	<b>Transaction ID : C19995335</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="5000.00"/>
	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. College of American Pathologists PAC</b>		Date of Receipt
Mailing Address 1350 I Street NW Suite 590		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee.	<input type="text" value="C00274944"/>	<b>Transaction ID : C19973765</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>C. American Postal Workers Union COPA</b>		Date of Receipt
Mailing Address 1300 L Street NW		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee.	<input type="text" value="C00010322"/>	<b>Transaction ID : C19995325</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"/>	

<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 14 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

**A. American College of Cardiology PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2400 N Street, NW  
 City Washington State DC Zip Code 20037-1153  
 FEC ID number of contributing federal political committee. **C** C00375360  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2013  
**Transaction ID : C20001436**  
 Amount of Each Receipt this Period  
 5000.00

**B. Raytheon Company PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 Wilson Boulevard Suite 1500  
 City Arlington State VA Zip Code 22209-2270  
 FEC ID number of contributing federal political committee. **C** C00097568  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2013  
**Transaction ID : C19973766**  
 Amount of Each Receipt this Period  
 5000.00

**C. American Federation of State County & Municipal Employees PEOPLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1625 L Street, NW  
 City Washington State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C** C00011114  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 03 / 2013  
**Transaction ID : C19974797**  
 Amount of Each Receipt this Period  
 5000.00

<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: (check only one)	PAGE 15 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. Employees of Northrop Grumman Corporation PAC**

Mailing Address 2980 Fairview Park Drive

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 28 / 2013  
**Transaction ID : C20001437**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. American College of Radiology Association PAC**

Mailing Address 1891 Preston White Drive

City Reston State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 03 / 2013  
**Transaction ID : C19974798**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. American Beverage Association PAC**

Mailing Address 1101 16th St NW

City Washington State DC Zip Code 20036-4829

FEC ID number of contributing federal political committee. **C** C00100107

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : C19995328**

Amount of Each Receipt this Period  
1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11500.00
<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 16 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Facebook Inc. PAC</b>		Date of Receipt
Mailing Address 1155 F Street, NW Suite 475		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00502906"/>	<b>Transaction ID : C20001438</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="5000.00"/>
	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. American Academy of Family Physicians PAC</b>		Date of Receipt
Mailing Address 2021 Massachusetts Avenue, NW		<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20036-1011
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00411553"/>	<b>Transaction ID : C19974799</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="2500.00"/>
	<input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) <b>C. American Beverage Association PAC</b>		Date of Receipt
Mailing Address 1101 16th St NW		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20036-4829
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00100107"/>	<b>Transaction ID : C19995329</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="2500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="8500.00"/>
<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 17 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Travelers Companies Inc. PAC</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
Hartford	CT	06183
FEC ID number of contributing federal political committee.		<b>Transaction ID : C19995339</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="1500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Federation of American Hospitals PAC</b>		Date of Receipt
Mailing Address 750 9th St NW Ste 600		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20001-4595
FEC ID number of contributing federal political committee.		<b>Transaction ID : C20001439</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="2500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer		<input type="text"/>
Occupation		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="4000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="109000.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Reid Searchlight Fund</b>		Date of Receipt MM / DD / YYYY 06 / 27 / 2013 <b>Transaction ID : C19985377</b>
Mailing Address 700 13th Street NW Suite 600		Amount of Each Receipt this Period 21250.33
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00543389		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 21250.33	

Full Name (Last, First, Middle Initial) <b>B. Reed Hastings</b>		Date of Receipt MM / DD / YYYY 05 / 03 / 2013 <b>Transaction ID : C19995514</b>
Mailing Address 849 Almar Ave Ste C 523		Amount of Each Receipt this Period 4800.00
City Santa Cruz	State CA	Zip Code 95060
FEC ID number of contributing federal political committee. C		
Name of Employer Netflix	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00	<b>[MEMO ITEM]</b> *

Full Name (Last, First, Middle Initial) <b>C. August A. DiRenzo</b>		Date of Receipt MM / DD / YYYY 05 / 20 / 2013 <b>Transaction ID : C19995515</b>
Mailing Address 10 East 70th Street		Amount of Each Receipt this Period 4800.00
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		
Name of Employer Cushman & Wakefield	Occupation Vice Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00	<b>[MEMO ITEM]</b> *

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	21250.33
<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 19 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Liza Vismanos</b>		Date of Receipt MM / DD / YYYY 06 / 05 / 2013 <b>Transaction ID : C19995516</b>
Mailing Address 1345 Moraga Drive		Amount of Each Receipt this Period 4800.00
City Los Angeles	State CA	Zip Code 90049
FEC ID number of contributing federal political committee. C		[MEMO ITEM] *
Name of Employer Nephron Managment	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00	

Full Name (Last, First, Middle Initial) <b>B. Randy Rosen</b>		Date of Receipt MM / DD / YYYY 06 / 19 / 2013 <b>Transaction ID : C19995517</b>
Mailing Address 5900 Wilshire Blvd		Amount of Each Receipt this Period 4800.00
City Los Angeles	State CA	Zip Code 90036
FEC ID number of contributing federal political committee. C		[MEMO ITEM] *
Name of Employer Rosen Anesthesia Group	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		[MEMO ITEM] *
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	21250.33

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

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

FOR LINE NUMBER: PAGE 20 OF 41  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

**A. Friends of Max Baucus**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 586  
City Helena State MT Zip Code 59624  
FEC ID number of contributing federal political committee. **C** C00328211  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 29 / 2013  
**Transaction ID : C19973767**  
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 Y Y  
Amount of Each Receipt this Period

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

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

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

**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)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 401 N. Washington Street  
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D563500**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Pepco**

Mailing Address 701 9th Street NW

City Washington State DC Zip Code 20068-0001

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D559590**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. CareFirst Blue Cross Blue Shield**

Mailing Address 840 First Street, NE

City Washington State DC Zip Code 20065

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D560660**

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)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Claude E. Zobell Jr.**

Mailing Address 4115 Blackheath Drive

City Memphis State TN Zip Code 38135

Purpose of Disbursement  
Treasurer Services

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
06		28		2013

**Transaction ID : D561090**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. The Hartford**

Mailing Address P.O. Box 660916

City Dallas State TX Zip Code 75266

Purpose of Disbursement  
Insurance

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
05		31		2013

**Transaction ID : D559591**

Amount of Each Disbursement this Period

506.00
--------

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 401 N. Washington Street  
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Payroll Taxes

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
06		14		2013

**Transaction ID : D560471**

Amount of Each Disbursement this Period

830.64
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1836.64
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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)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Comcast**

Mailing Address PO Box 17189

City Wilmington State DE Zip Code 19886-0001

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2013

**Transaction ID : D559592**

Amount of Each Disbursement this Period

41.73

Full Name (Last, First, Middle Initial)

**B. Christopher D. Anderson**

Mailing Address 9550 West Sahara Avenue  
Apartment 1033

City Las Vegas State NV Zip Code 89117

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 14 / 2013

**Transaction ID : D560472**

Amount of Each Disbursement this Period

1430.03

Full Name (Last, First, Middle Initial)

**C. UPS Store**

Mailing Address 4616 W. Sahara Avenue

City Las Vegas State NV Zip Code 89102

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2013

**Transaction ID : D560662**

Amount of Each Disbursement this Period

10.79

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

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

1482.55

**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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Sage Payment Solutions**

Mailing Address 1501 Farm Credit Dr  
Ste 1500

City McLean State VA Zip Code 22102-5007

Purpose of Disbursement  
Merchant Service Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D563503**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Verizon Wireless**

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D559593**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Laura N. Matthews**

Mailing Address 901 N. Pollard Street  
Apt. 913

City Arlington State VA Zip Code 22203

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D560473**

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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 401 N. Washington Street  
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D559594**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Christopher D. Anderson**

Mailing Address 9550 West Sahara Avenue  
Apartment 1033

City Las Vegas State NV Zip Code 89117

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D559595**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 401 N. Washington Street  
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D561085**

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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Laura N. Matthews**

Mailing Address 901 N. Pollard Street  
Apt. 913

City Arlington State VA Zip Code 22203

Purpose of Disbursement  
Salary

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  
05 / 31 / 2013

**Transaction ID : D559596**

Amount of Each Disbursement this Period

574.33

Full Name (Last, First, Middle Initial)

**B. Well & Lighthouse, LLC**

Mailing Address 1244 19th Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Internet Consulting Services

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  
05 / 31 / 2013

**Transaction ID : D559586**

Amount of Each Disbursement this Period

1045.00

Full Name (Last, First, Middle Initial)

**C. Christopher D. Anderson**

Mailing Address 9550 West Sahara Avenue  
Apartment 1033

City Las Vegas State NV Zip Code 89117

Purpose of Disbursement  
Salary

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  
06 / 28 / 2013

**Transaction ID : D561086**

Amount of Each Disbursement this Period

1430.03

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

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

3049.36

**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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Well & Lighthouse, LLC**

Mailing Address 1244 19th Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Internet Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D559587**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Ricoh**

Mailing Address PO Box 827577

City Philadelphia State PA Zip Code 19182

Purpose of Disbursement  
Maintenance Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D560467**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Laura N. Matthews**

Mailing Address 901 N. Pollard Street  
Apt. 913

City Arlington State VA Zip Code 22203

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D561087**

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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. 418-426 C Street LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 21 / 2013
Mailing Address 1160 Silas Deane Hwy Suite 401		<b>Transaction ID : D561088</b>
City Wethersfield State CT Zip Code 06109	Amount of Each Disbursement this Period 545.40	
Purpose of Disbursement Rent	Category/Type	
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. Well &amp; Lighthouse, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2013
Mailing Address 1244 19th Street NW		<b>Transaction ID : D559588</b>
City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 2012.50	
Purpose of Disbursement Internet Consulting Services	Category/Type	
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. UPS Store</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2013
Mailing Address 4616 W. Sahara Avenue		<b>Transaction ID : D560468</b>
City Las Vegas State NV Zip Code 89102	Amount of Each Disbursement this Period 6.41	
Purpose of Disbursement Shipping	Category/Type	
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)..... ▶	2564.31
<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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Blue State Digital, LLC**

Mailing Address 734 15th Street, NW  
Suite 1200

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Internet Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2013

**Transaction ID : D560658**

Amount of Each Disbursement this Period

430.00

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 401 N. Washington Street  
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2013

**Transaction ID : D563499**

Amount of Each Disbursement this Period

64.24

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address P.O. Box 660720

City Dallas State TX Zip Code 75266

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2013

**Transaction ID : D559589**

Amount of Each Disbursement this Period

86.45

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

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

580.69

**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)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Best Messenger**

Mailing Address PO Box 33122

City Washington State DC Zip Code 20033-0122

Purpose of Disbursement  
Messenger Service

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
06		07		2013

**Transaction ID : D560469**

Amount of Each Disbursement this Period

35.62
-------

Full Name (Last, First, Middle Initial)

**B. Blue State Digital, LLC**

Mailing Address 734 15th Street, NW  
Suite 1200

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Internet Consulting Services

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
06		17		2013

**Transaction ID : D560659**

Amount of Each Disbursement this Period

4790.00
---------

Full Name (Last, First, Middle Initial)

**C. Ricoh**

Mailing Address PO Box 827577

City Philadelphia State PA Zip Code 19182

Purpose of Disbursement  
Maintenance Fee

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
06		21		2013

**Transaction ID : D561089**

Amount of Each Disbursement this Period

24.56
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4850.18
---------

**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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 04 / 2013

**Transaction ID : D559665**

Amount of Each Disbursement this Period

1187.80

Full Name (Last, First, Middle Initial)

**B. Windows Catering Company**

Mailing Address 5724 General Washington Drive

City Alexandria State VA Zip Code 22312

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 04 / 2013

**Transaction ID : D559670**

Amount of Each Disbursement this Period

458.61

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. ADO**

Mailing Address 796 Main St

City Venice State CA Zip Code 90291-3216

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 04 / 2013

**Transaction ID : D559666**

Amount of Each Disbursement this Period

462.18

**[MEMO ITEM]**

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

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

1187.80

**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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. National Car Rental**

Mailing Address 6855 Bermuda Road

City Las Vegas State NV Zip Code 89119

Purpose of Disbursement  
Travel

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  
06 / 04 / 2013

Transaction ID : D559669

Amount of Each Disbursement this Period

257.01

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card Payment, See Below

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  
06 / 13 / 2013

Transaction ID : D560605

Amount of Each Disbursement this Period

1267.44

Full Name (Last, First, Middle Initial)

**C. Spago**

Mailing Address 3500 Las Vegas Blvd. S.

City Las Vegas State NV Zip Code 89109

Purpose of Disbursement  
Meals

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  
06 / 13 / 2013

Transaction ID : D560606

Amount of Each Disbursement this Period

343.32

[MEMO ITEM]

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

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

1267.44



**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)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Marcel's**

Mailing Address 2401 Pennsylvania Ave NW

City Washington State DC Zip Code 20037

Purpose of Disbursement  
Meals

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
06	/	13	/	2013

**Transaction ID : D560607**

Amount of Each Disbursement this Period

924.12
--------

**[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

--

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

--

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

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

0.00
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26549.66
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Udall For Colorado**

Mailing Address P.O. Box 40158

City State Zip Code  
Denver CO 80204

Purpose of Disbursement  
Contribution

Candidate Name  
**Mark Udall**

Office Sought:  House  
 Senate  
 President  
State: CO District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561100**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Al Franken For Senate 2014**

Mailing Address PO Box 583144

City State Zip Code  
Minneapolis MN 55458

Purpose of Disbursement  
Contribution

Candidate Name  
**Al Franken**

Office Sought:  House  
 Senate  
 President  
State: MN District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561091**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Friends of Mark Warner**

Mailing Address 201 North Union Street, Suite 300

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
Contribution

Candidate Name  
**Mark Warner**

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561101**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. VoteVets**

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement  
2013 Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : D560602**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Chris Coons for Delaware**

Mailing Address PO Box 9900

City Newark State DE Zip Code 19714

Purpose of Disbursement  
Contribution

Candidate Name

**Christopher A. Coons**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: DE District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561092**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Friends of Mary Landrieu, Inc.**

Mailing Address 700 13th Street, NW  
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name

**Mary Landrieu**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: LA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561102**

Amount of Each Disbursement this Period

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

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

1	5	0	0	0	0	0	0	0	0
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5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Udall For Us All**

Mailing Address P.O. Box 25766

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement  
Contribution

Candidate Name

**Tom Udall**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NM District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561103**

Amount of Each Disbursement this Period

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

**B. Massachusetts Democratic State Committee- Fed Fund**

Mailing Address 77 Summer St  
FI 10

City Boston State MA Zip Code 02110-1006

Purpose of Disbursement  
2013 Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : D560603**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Friends Of Dick Durbin**

Mailing Address P.O. Box 1949

City Springfield State IL Zip Code 62705

Purpose of Disbursement  
Contribution

Candidate Name

**Richard Durbin**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561093**

Amount of Each Disbursement this Period

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

1	5	0	0	0	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

1	5	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Reed Committee**

Mailing Address P.O. Box 8628

City Cranston State RI Zip Code 02920

Purpose of Disbursement  
Contribution

Candidate Name

**Jack Reed**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: RI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561094**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Schatz For Senate**

Mailing Address PO Box 3828

City Honolulu State HI Zip Code 96812

Purpose of Disbursement  
Contribution

Candidate Name

**Brian Schatz**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: HI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561104**

Amount of Each Disbursement this Period

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

**C. Friends Of Jeanne Shaheen**

Mailing Address 105 N State Street

City Concord State NH Zip Code 03301

Purpose of Disbursement  
Contribution

Candidate Name

**Jeanne Shaheen**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561095**

Amount of Each Disbursement this Period

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

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

1	5	0	0	0	0	0	0	0	0
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5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Nevada State Democratic Party**

Mailing Address 409 Horn Street

City Las Vegas State NV Zip Code 89107

Purpose of Disbursement  
2013 Contribution

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
0	6		2	5		2	0	1	3

**Transaction ID : D561105**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Jeff Merkley For Oregon**

Mailing Address 3321 SE 20th Avenue

City Portland State OR Zip Code 97202

Purpose of Disbursement  
Contribution

Candidate Name

**Jeff Merkley**

Office Sought:  House  Senate  President  
State: OR District:

Disbursement For: 2014  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561096**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Peters For Michigan**

Mailing Address PO Box 226

City Bloomfield Hills State MI Zip Code 48304

Purpose of Disbursement  
Contribution

Candidate Name

**Gary Peters**

Office Sought:  House  Senate  President  
State: MI District:

Disbursement For: 2014  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561106**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Hagan For US Senate Inc**

Mailing Address P.O. Box 29103

City Greensboro State NC Zip Code 27429

Purpose of Disbursement Contribution

Candidate Name

**Kay Hagan**

Office Sought:  House  Senate  President

State: NC District:

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561097**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Braley For Iowa**

Mailing Address PO Box 856

City Des Moines State IA Zip Code 50304

Purpose of Disbursement Contribution

Candidate Name

**Bruce Braley**

Office Sought:  House  Senate  President

State: IA District:

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561107**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Alaskans For Begich 2014**

Mailing Address 1231 W Northern Lights Blvd.  
#605

City Anchorage State AK Zip Code 99503

Purpose of Disbursement Contribution

Candidate Name

**Mark Becich**

Office Sought:  House  Senate  President

State: AK District:

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

**Transaction ID : D561098**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	5	0	0	0	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

Use separate schedule(s) for each category of the Detailed Summary Page	<b>FOR LINE NUMBER:</b> (check only one)	PAGE 40 OF 41
	<input type="checkbox"/> 21b <input type="checkbox"/> 22 <input checked="" type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25 <input type="checkbox"/> 26 <input type="checkbox"/> 27 <input type="checkbox"/> 28a <input type="checkbox"/> 28b <input type="checkbox"/> 28c <input type="checkbox"/> 29 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)  
**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Mark Pryor for U.S. Senate</b>	Date of Disbursement M M / D D / Y Y Y Y Y Y 06 / 25 / 2013
Mailing Address P.O. Box 2720	<b>Transaction ID : D561099</b>
City State Zip Code Little Rock AR 72203	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Contribution	Category/Type
Candidate Name <b>Mark Pryor</b>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AR District:	

Full Name (Last, First, Middle Initial) <b>B.</b>	Date of Disbursement M M / D D / Y Y Y Y Y Y
Mailing Address	Amount of Each Disbursement this Period
City State Zip Code	Category/Type
Purpose of Disbursement	Candidate Name
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.</b>	Date of Disbursement M M / D D / Y Y Y Y Y Y
Mailing Address	Amount of Each Disbursement this Period
City State Zip Code	Category/Type
Purpose of Disbursement	Candidate Name
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).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	95000.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Searchlight Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Terry McAuliffe for Governor**

Mailing Address P.O. Box 13881

City State Zip Code  
Arlington VA 22209

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /   
06 / 11 / 2013

**Transaction ID : D560604**

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

2500.00

2500.00