

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 PATRIOT VOICES PAC

ADDRESS (number and street) 315 Foxtail Lane Spring City PA 19475

2. FEC IDENTIFICATION NUMBER C C00528307 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, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 03 / 01 / 2014 through 03 / 31 / 2014

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 Nadine Maenza

Signature of Treasurer Nadine Maenza [Electronically Filed] Date 04 / 17 / 2014

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

PATRIOT VOICES PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="35337.65"/>	<input type="text" value="35337.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="17725.97"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="76536.13"/>	<input type="text" value="176270.37"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="94262.10"/>	<input type="text" value="211608.02"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="78453.09"/>	<input type="text" value="195799.01"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="15809.01"/>	<input type="text" value="15809.01"/>
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="32905.24"/>	

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
PATRIOT VOICES PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5250.00	8800.00
(ii) Unitemized	6680.00	30162.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11930.00	38962.00
(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)	11930.00	38962.00
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	33.53
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	64606.13	137274.84
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))..... ▶	76536.13	176270.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	76536.13	176270.37

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	12762.60	52395.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	12762.60	52395.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	4016.19
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	65690.49	139387.11
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)) ..	78453.09	195799.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	78453.09	195799.01

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)	11930.00	38962.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11930.00	38962.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	12762.60	52395.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	33.53
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12762.60	52362.18

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

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

FOR LINE NUMBER: PAGE 6 OF 24
(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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)
PATRIOT VOICES PAC

Full Name (Last, First, Middle Initial)
A. MR. THOMAS DEVLIN

Mailing Address 12635 SW SANTA FE LAKE ROAD

City AUGUSTA	State KS	Zip Code 67010-7601
-----------------	-------------	------------------------

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

Name of Employer DEVLIN ENTERPRISES	Occupation OWNER
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2014

Transaction ID : SA11.80503

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. STEVEN G. MIHAYLO

Mailing Address P.O. BOX 19790

City RENO	State NV	Zip Code 89511-2471
--------------	-------------	------------------------

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

Name of Employer IMERCHANT	Occupation CEO
-------------------------------	-------------------

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
03	/	13	/	2014

Transaction ID : SA11.84160

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	5250.00
TOTAL This Period (last page this line number only).....	5250.00

**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 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
PATRIOT VOICES PAC

A. MS. MARGARET T. ADAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 8240 HEALY DR
 City MOBILE State AL Zip Code 36695-4919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 26 / 2014
Transaction ID : SA11.84172
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT

B. MS. MARGARET T. ADAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 8240 HEALY DR
 City MOBILE State AL Zip Code 36695-4919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 03 / 2014
Transaction ID : SA11.84173
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT

C. MS. HARRIETT S. BALDWIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 CORONADO CIR
 City NORTH LITTLE ROCK State AR Zip Code 72116-5241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 27 / 2014
Transaction ID : SA11.84214
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
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 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
PATRIOT VOICES PAC

Full Name (Last, First, Middle Initial) A. MR. VINAL BOWYER		Date of Receipt MM / DD / YYYY 03 / 17 / 2014
Mailing Address 2539 S WILLOW CREEK DR		Transaction ID : SA11.84486
City PERU	State IN	Zip Code 46970-7202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial) B. MS. MARY A. BURNS		Date of Receipt MM / DD / YYYY 03 / 12 / 2014
Mailing Address 140 NEWTON ST APT 2 APT 2		Transaction ID : SA11.84516
City BRIGHTON	State MA	Zip Code 02135-1524
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial) C. MS. LOIS S. EDGERLY		Date of Receipt MM / DD / YYYY 03 / 26 / 2014
Mailing Address 32 HIGHLAND ST.		Transaction ID : SA11.84731
City CAMBRIDGE	State MA	Zip Code 02138-2210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	650.00
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 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
PATRIOT VOICES PAC

A. GARY GATES
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 457

City AT. HELENA State CA Zip Code 94574-0457

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2014
Transaction ID : SA11.85601

Amount of Each Receipt this Period
 -50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT - CHARGED BACK

B. MR. WILLIAM D. GEORGE
Full Name (Last, First, Middle Initial)

Mailing Address 4957 COBBLER RD

City SCHNECKSVILLE State PA Zip Code 18078-2826

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

Name of Employer IORNTON TELEPHONE COMPANY Occupation TELECOMMUNICATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2014
Transaction ID : SA11.84876

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

C. FRANCES E. LECAT
Full Name (Last, First, Middle Initial)

Mailing Address 1098 MAPLE ST

City TALLMADGE State OH Zip Code 44278-2554

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

Name of Employer LECAT'S VENTRILOSCOPE LLC Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2014
Transaction ID : SA11.85263

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 10 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
PATRIOT VOICES PAC

Full Name (Last, First, Middle Initial) A. MR. STEVEN G. MIHAYLO		Date of Receipt MM / DD / YYYY 03 / 13 / 2014
Mailing Address P.O. BOX 19790		Transaction ID : SA11.84161
City RENO	State NV	Zip Code 89511-2471
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer IMERCHANT	Occupation CEO	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial) B. MS. IRENE M. NAVRATIL		Date of Receipt MM / DD / YYYY 03 / 21 / 2014
Mailing Address 10720 S WASHINGTON ST APT 105		Transaction ID : SA11.84289
City OAK LAWN	State IL	Zip Code 60453-6324
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial) C. MR. DALE OYHUS		Date of Receipt MM / DD / YYYY 03 / 05 / 2014
Mailing Address 13973 FRANKS CREEK RD		Transaction ID : SA11.84318
City MEDORA	State ND	Zip Code 58645-9700
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 180.00
Name of Employer SELF EMPLOYED	Occupation RANCHER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	25280.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
PATRIOT VOICES PAC

A. MS. ANITA RASH
Full Name (Last, First, Middle Initial)
Mailing Address 1310 KING ARTHUR DR
City MECHANICSBURG State PA Zip Code 17050-9154
FEC ID number of contributing federal political committee. **C**
Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt: **03 / 27 / 2014**
Transaction ID : SA11.84375
Amount of Each Receipt this Period: **75.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT

B. MS. ANNE M. RYAN
Full Name (Last, First, Middle Initial)
Mailing Address 5402 PENNOCK POINT ROAD
City JUPITER State FL Zip Code 33458-3448
FEC ID number of contributing federal political committee. **C**
Name of Employer: **SELF EMPLOYED** Occupation: **MUSICIAN**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **225.00**

Date of Receipt: **03 / 26 / 2014**
Transaction ID : SA11.84596
Amount of Each Receipt this Period: **75.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT

C. MS. MARY B. RYSER
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 476
City MELFA State VA Zip Code 23410-0476
FEC ID number of contributing federal political committee. **C**
Name of Employer: **RETIRED** Occupation: **RETIRED**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt: **03 / 24 / 2014**
Transaction ID : SA11.84597
Amount of Each Receipt this Period: **150.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
PATRIOT VOICES PAC

A. MR. KENNETH J. STUDEMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 65523 N CENTERVILLE RD
 City STURGIS State MI Zip Code 49091-9148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 17 / 2014
Transaction ID : SA11.84995
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT

B. MS. BETTY M. WHITEHEAD
 Full Name (Last, First, Middle Initial)
 Mailing Address 5273 HILLDALE RD
 City ALEXANDER State AR Zip Code 72002-9489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 19 / 2014
Transaction ID : SA11.85180
 Amount of Each Receipt this Period 35.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT

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
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	27165.00

**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

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)
PATRIOT VOICES PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2014

Transaction ID : SB21B.I746

Amount of Each Disbursement this Period

12.18

B. AMERICAN EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 53852

City PHOENIZ State AZ Zip Code 85072

Purpose of Disbursement
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2014

Transaction ID : SB21B.I750

Amount of Each Disbursement this Period

1.60

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
PAC CONTRIBUTION PROCESSING & DATABASE SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2014

Transaction ID : SB21B.I743

Amount of Each Disbursement this Period

1184.00

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

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

1197.78

**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

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)
PATRIOT VOICES PAC

Full Name (Last, First, Middle Initial)

A. ELAVON MERCHANT SERVICES

Mailing Address ONE CONCOURSE PKWY

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2014

Transaction ID : SB21B.I745

Amount of Each Disbursement this Period

129.89

Full Name (Last, First, Middle Initial)

B. ELAVON MERCHANT SERVICES

Mailing Address ONE CONCOURSE PKWY

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2014

Transaction ID : SB21B.I748

Amount of Each Disbursement this Period

80.95

Full Name (Last, First, Middle Initial)

C. HSP DIRECT

Mailing Address 13755 SUNRISE VALLEY DRIVE
SUITE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
PAC DIRECT MAIL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2014

Transaction ID : SB21B.I744

Amount of Each Disbursement this Period

6120.00

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

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

6330.84

**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

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)
PATRIOT VOICES PAC

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2632 MARINE WAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
PAC SOFTWARE & DATABASE SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2014

Transaction ID : SB21B.I751

Amount of Each Disbursement this Period

109.98

B. PNC

Full Name (Last, First, Middle Initial)

Mailing Address 825 N. WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAC BANK FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2014

Transaction ID : SB21B.I749

Amount of Each Disbursement this Period

47.00

C. STRATEGY GROUP FOR PHONE LLC

Full Name (Last, First, Middle Initial)

Mailing Address 7669 STAGERS LOOP

City DELAWARE State OH Zip Code 43015

Purpose of Disbursement
TELECONFERENCE SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2014

Transaction ID : SB21B.I747

Amount of Each Disbursement this Period

4900.00

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

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

5056.98

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

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)
PATRIOT VOICES PAC

A. US POSTAL SERVICE

Full Name (Last, First, Middle Initial)

Mailing Address 900 BRENTWOOD ROAD, NW

City WASHINGTON State DC Zip Code 20066

Purpose of Disbursement PAC POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 11 / 2014

Transaction ID : SB21B.I742

Amount of Each Disbursement this Period: 177.00

Category/Type

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 177.00

TOTAL This Period (last page this line number only)..... ▶ 12762.60

**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

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)
PATRIOT VOICES PAC

Full Name (Last, First, Middle Initial)

A. SHELLY AHLERSMEYER

Mailing Address 1690 S. WALNUT DRIVE

City State Zip Code
WARSAW IN 46580

Purpose of Disbursement
PAC GRASSROOTS CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 14 / 2014

Transaction ID : **SB29.I762**

Amount of Each Disbursement this Period

5000.00

NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. NADINE MAENZA

Mailing Address 315 FOXTAIL LANE

City State Zip Code
SPRING CITY PA 19475

Purpose of Disbursement
PAC MGMT & FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 14 / 2014

Transaction ID : **SB29.I763**

Amount of Each Disbursement this Period

4250.00

NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. ACTIVE ENGAGEMENT, LLC

Mailing Address 44084 RIVERSIDE PARKWAY, SUITE 350

City State Zip Code
LANSDOWN VA 20176

Purpose of Disbursement
PAC EMAIL COMMUNICATION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 14 / 2014

Transaction ID : **SB29.I758**

Amount of Each Disbursement this Period

1000.00

NON CONTRIBUTION ACCOUNT

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

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

10250.00

**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

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)
PATRIOT VOICES PAC

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 150 N. COLLEGE STREET

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement
PAC CREDIT CARD & MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2014

Transaction ID : SB29.I754

Amount of Each Disbursement this Period

670.33

NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
PAC DATABASE SERVICES & EMAIL COMMUNICATION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 14 / 2014

Transaction ID : SB29.I759

Amount of Each Disbursement this Period

1523.49

NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. COLON & COMPANY

Mailing Address 3405 EDLOE STREET
SUITE 205A

City HOUSTON State TX Zip Code 77027

Purpose of Disbursement
PAC GRASSROOTS CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 14 / 2014

Transaction ID : SB29.I761

Amount of Each Disbursement this Period

6000.00

NON CONTRIBUTION ACCOUNT

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

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

8193.82

**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

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)
PATRIOT VOICES PAC

Full Name (Last, First, Middle Initial)

A. FIRSTMERIT BANK

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
PAC BANK FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.I756**

Amount of Each Disbursement this Period

NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. INFOCISION

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
PAC TELEMARKETING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.I752**

Amount of Each Disbursement this Period

NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. INFOCISION

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
PAC TELEMARKETING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.I753**

Amount of Each Disbursement this Period

NON CONTRIBUTION ACCOUNT

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
PATRIOT VOICES PAC

Full Name (Last, First, Middle Initial)

A. KEN PAXTON CAMPAIGN

Mailing Address P.O. BOX 3476

City MCKINNEY State TX Zip Code 75070

Purpose of Disbursement
NON-FEDERAL (TX) INKIND CONTRIBUTION

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
03 / 04 / 2014

Transaction ID : SB29.I766

Amount of Each Disbursement this Period

50.32

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. KOCH & HOOS LLC

Mailing Address 901 N WASHINGTON STREET
SUITE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAC ACCOUNTING & COMPLIANCE SERVICES

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
03 / 14 / 2014

Transaction ID : SB29.I760

Amount of Each Disbursement this Period

5811.31

NON CONTRIBUTION ACCOUNT

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)..... ▶

5811.31

65539.13

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 24
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
PATRIOT VOICES PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NADINE MAENZA	Nature of Debt (Purpose): MGMT & FUNDRAISING CONSULTING
Mailing Address 315 FOXTAIL LANE	
City State Zip Code SPRING CITY PA 19475	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.50109	
Amount Incurred This Period 750.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 750.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTIVE ENGAGEMENT	Nature of Debt (Purpose): EMAIL COMMUNICATION
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 1000.00	Transaction ID : SD10.50101	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CMDI	Nature of Debt (Purpose): EMAIL COMMUNICATION/DATABASE SERVICES
Mailing Address 1593 SPRING HILL ROAD SUITE 400	
City State Zip Code TYSONS CORNER VA 22182	

Outstanding Balance Beginning This Period 6547.96	Transaction ID : SD10.50102	
Amount Incurred This Period 2709.63	Payment This Period 2707.49	Outstanding Balance at Close of This Period 6550.10

1) SUBTOTALS This Period This Page (optional)..... ▶	7300.10
2) TOTALS This Period (last page this line number only)..... ▶	
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) ▶	0.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 24
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
PATRIOT VOICES PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLON & COMPANY	Nature of Debt (Purpose): MAILING
Mailing Address 3405 EDLOE SUITE 205A	
City State Zip Code HOUSTON TX 77027	

Outstanding Balance Beginning This Period 2548.22	Transaction ID : SD10.50103	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2548.22

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor HSP DIRECT	Nature of Debt (Purpose): IE DIRECT MAIL
Mailing Address 13755 SUNRISE VALLEY DRIVE SUITE 450	
City State Zip Code HERNDON VA 20171	

Outstanding Balance Beginning This Period 1816.93	Transaction ID : SD10.50105	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1816.93

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor HSP DIRECT	Nature of Debt (Purpose): PAC DIRECT MAIL
Mailing Address 13755 SUNRISE VALLEY DRIVE SUITE 450	
City State Zip Code HERNDON VA 20171	

Outstanding Balance Beginning This Period 21460.55	Transaction ID : SD10.50106	
Amount Incurred This Period 0.00	Payment This Period 6120.00	Outstanding Balance at Close of This Period 15340.55

1) SUBTOTALS This Period This Page (optional)..... ▶	19705.70
2) TOTALS This Period (last page this line number only)..... ▶	
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) ▶	0.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 23 OF 24
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
PATRIOT VOICES PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor KOCH & HOOS	Nature of Debt (Purpose): ACCOUNTING & COMPLIANCE SERVICES
Mailing Address 901 N. WASHINGTON STREET SUITE 450	
City State Zip Code ALEXANDRIA VA 22314	

Outstanding Balance Beginning This Period 7500.75	Transaction ID : SD10.50104	
Amount Incurred This Period 2905.00	Payment This Period 5811.31	Outstanding Balance at Close of This Period 4594.44

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor STRATEGY GROUP FOR PHONES, LLC	Nature of Debt (Purpose): TELECONFERENCE SERVICES
Mailing Address 7699 STAGERS LOOP	
City State Zip Code DELAWARE OH 43015	

Outstanding Balance Beginning This Period 4900.00	Transaction ID : SD10.50107	
Amount Incurred This Period 0.00	Payment This Period 4900.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor SUNRISE DATA SERVICES	Nature of Debt (Purpose): LIST EXPENSE
Mailing Address 44845 FALCON PLACE SUITE 101A	
City State Zip Code DULLES VA 20166	

Outstanding Balance Beginning This Period 915.00	Transaction ID : SD10.50108	
Amount Incurred This Period 390.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1305.00

1) SUBTOTALS This Period This Page (optional)..... ▶	5899.44
2) TOTALS This Period (last page this line number only)..... ▶	32905.24
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) ▶	32905.24

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
PATRIOT VOICES PAC
FEC IDENTIFICATION NUMBER
C C00528307
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
CMDI
[MEMO ITEM]
Mailing Address
1593 SPRING HILL ROAD
SUITE 400
City
TYSONS CORNER
State
VA
Zip Code
22182
Purpose of Expenditure
3/28/14 EMAIL COMMUNICATION
Category/Type

Date of Public Distribution/Dissemination
03 / 28 / 2014
Amount
70.76
Transaction ID : SE24.4001
Date of Disbursement or Obligation

Name of Federal Candidate
MATT SCHULTZ
Support
Office Sought:
House
District: 03
State: IA
Calendar Year-To-Date
Per Election for Office Sought
70.76

Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate
Support
Oppose
Office Sought:
House
Senate
District:
State:
Calendar Year-To-Date
Per Election for Office Sought

Disbursement For:
Primary
General
Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 0.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 0.00

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.

Nadine Maenza [Electronically Filed] Date 04 / 17 / 2014
Signature