

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

GOODWERK

ADDRESS (number and street) PO BOX 81171

Check if different than previously reported. (ACC) CHICAGO IL 60681

2. **FEC IDENTIFICATION NUMBER ▼** C C00650861 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day **POST-Election** Report for the:

General (30G) Runoff (30R) Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2017 through M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Mikva Rosenberg, Jacob, H., ,
Type or Print Name of Treasurer

Signature of Treasurer Mikva Rosenberg, Jacob, H., , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 01 / 27 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

GOODWERK

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="2017"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="91860.11"/>	<input type="text" value="91860.11"/>
(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="91860.11"/>	<input type="text" value="91860.11"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="77482.37"/>	<input type="text" value="77482.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14377.74"/>	<input type="text" value="14377.74"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

GOODWERK

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2017 To: M M / D D / Y Y Y Y 12 / 31 / 2017

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).....	40968.17	40968.17
(ii) Unitemized	459.21	459.21
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	41427.38	41427.38
(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)	41427.38	41427.38
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).....	3.63	3.63
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	50429.10	50429.10
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)).....▶	91860.11	91860.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	91860.11	91860.11

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	15248.96	15248.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15248.96	15248.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	83.55	83.55
(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)).....	83.55	83.55
29. Other Disbursements (Including Non-Federal Donations).....	62149.86	62149.86
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	77482.37	77482.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	77482.37	77482.37

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	41427.38	41427.38
34. Total Contribution Refunds (from Line 28(d))	83.55	83.55
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	41343.83	41343.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	15248.96	15248.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3.63	3.63
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15245.33	15245.33

**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 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Adams, Kenneth, L., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017		
Mailing Address 3514 Overlook Lane NW			Transaction ID : SA11AI.4133		
City Washington	State DC	Zip Code 20016	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Adams Holcomb LLP		Occupation (for Individual) Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cohen, Steven, H., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2017		
Mailing Address 510 W Erie Street #2202			Transaction ID : SA11AI.4135		
City Chicago	State IL	Zip Code 60654	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Cohen Law Group		Occupation (for Individual) Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Costantino, Roseanne, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2017		
Mailing Address 2500 Ivanhoe Dr.			Transaction ID : SA11AI.4377		
City Los Angeles	State CA	Zip Code 90039	Amount of Each Receipt this Period 1.25		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Self-employed		Occupation (for Individual) Graphics			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1.25			

SUBTOTAL of Receipts This Page (optional).....	7501.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 104
	<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)
GOODWERK

A. Frey, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 Primrose Drive
 City Longmeadow State MA Zip Code 01106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OTR LLC Occupation (for Individual) Research Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3.75

Date of Receipt **10 / 30 / 2017**
Transaction ID : SA11AI.4370
 Amount of Each Receipt this Period 3.75
 Memo Item

B. Gaynor, Judith, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 E Lake Shore Dr #17W
 City Chicago State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 12 / 2017**
Transaction ID : SA11AI.4122
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Harris, Myra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1002 Fairway Green
 City Mamaroneck State NY Zip Code 10543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 30 / 2017**
Transaction ID : SA11AI.4344
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 753.75
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 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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)
GOODWERK

A. Hornung, Mark, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5624 S. Harper Avenue
 City Chicago State IL Zip Code 60637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Southwest Community Publishing Occupation (for Individual) COO
 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
 09 / 28 / 2017
Transaction ID : SA11AI.4124
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. Hornung, Ruth, U., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 N. Lake Shore Drive #27
 City Chicago State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 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
 09 / 28 / 2017
Transaction ID : SA11AI.4126
 Amount of Each Receipt this Period
 2500.00
 Memo Item

C. Kinczewski, Greg, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1214 Greenleaf Street
 City Evanston State IL Zip Code 60202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 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
 08 / 30 / 2017
Transaction ID : SA11AI.4114
 Amount of Each Receipt this Period
 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	7500.00
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 104
	<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)
GOODWERK

A. London, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1424 Washington Street
 City Evanston State IL Zip Code 60202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Beth Emet Occupation (for Individual) Rabbi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 24 / 2017
Transaction ID : SA11AI.4337
 Amount of Each Receipt this Period 360.00
 Memo Item

B. Marco, John, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2121 noyes Street
 City Evanston State IL Zip Code 60201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 21 / 2017
Transaction ID : SA11AI.4104
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Mikva, Laurie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 N. Canal #2704
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern University Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 28 / 2017
Transaction ID : SA11AI.4108
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 6360.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 104
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
GOODWERK

A. Mikva, Laurie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 N. Canal #2704
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern University Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt 10 / 28 / 2017
Transaction ID : SA11AI.4376
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Mikva Rosenberg, Jacob, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 E. Lake Street #3001
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GoodWerk Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9000.00

Date of Receipt 09 / 05 / 2017
Transaction ID : SA11AI.4116
 Amount of Each Receipt this Period 2800.00
 Memo Item

C. Mikva Rosenberg, Jacob, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 E. Lake Street #3001
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GoodWerk Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 9000.50

Date of Receipt 09 / 24 / 2017
Transaction ID : SA11AI.4334
 Amount of Each Receipt this Period 0.50
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2815.50
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 104
	<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Mikva Rosenberg, Jacob, H., ,		Date of Receipt
Mailing Address 73 E. Lake Street #3001		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2017"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4319
Name of Employer (for Individual) GoodWerk		Amount of Each Receipt this Period <input type="text" value="2.50"/>
Occupation (for Individual) CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="9003.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mikva Rosenberg, Jacob, H., ,		Date of Receipt
Mailing Address 73 E. Lake Street #3001		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2017"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4342
Name of Employer (for Individual) GoodWerk		Amount of Each Receipt this Period <input type="text" value="5.00"/>
Occupation (for Individual) CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="9008.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mikva Rosenberg, Jacob, H., ,		Date of Receipt
Mailing Address 73 E. Lake Street #3001		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2017"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4346
Name of Employer (for Individual) GoodWerk		Amount of Each Receipt this Period <input type="text" value="5.00"/>
Occupation (for Individual) CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="9013.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="12.50"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 104
	<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Mikva Rosenberg, Jacob, H., ,

Mailing Address 73 E. Lake Street #3001

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GoodWerk	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9018.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

Transaction ID : SA11AI.4347

Amount of Each Receipt this Period

5.00

 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Mikva Rosenberg, Jacob, H., ,

Mailing Address 73 E. Lake Street #3001

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GoodWerk	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9048.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

Transaction ID : SA11AI.4353

Amount of Each Receipt this Period

30.00

 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Mikva Rosenberg, Jacob, H., ,

Mailing Address 73 E. Lake Street #3001

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GoodWerk	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9058.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2017

Transaction ID : SA11AI.4355

Amount of Each Receipt this Period

10.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 104
	<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Mikva Rosenberg, Jacob, H., ,

Mailing Address 73 E. Lake Street #3001

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GoodWerk	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9078.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

Transaction ID : SA11AI.4358

Amount of Each Receipt this Period
20.17

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Mikva Rosenberg, Jacob, H., ,

Mailing Address 73 E. Lake Street #3001

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GoodWerk	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9080.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2017

Transaction ID : SA11AI.4363

Amount of Each Receipt this Period
2.50

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Mikva Rosenberg, Mark, A., ,

Mailing Address 340 E. Randolph Street #4101

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) UBS	Occupation (for Individual) Wealth Advisor
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2017

Transaction ID : SA11AI.4099

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5022.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 104
	<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)
GOODWERK

A. Mikva Rosenberg, Rachel, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 E. Randolph Street #4101
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Theological Seminary Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25100.00

Date of Receipt **10 / 20 / 2017**
Transaction ID : SA11AI.4130
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Miner, Judson, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 850 W. Chalmers Place
 City Chicago State IL Zip Code 60614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Miner Barnhill Galland Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 28 / 2017**
Transaction ID : SA11AI.4128
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Nordlicht, Ira, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 Greenacres Drive
 City Rye State NY Zip Code 10580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 12 / 2017**
Transaction ID : SA11AI.4120
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 104
	<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	<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)
GOODWERK

A. Norman, Naomi, Ruth, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25 Ormond Place

City Rye	State NY	Zip Code 10580
-------------	-------------	-------------------

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

Name of Employer (for Individual) Self-employed	Occupation (for Individual) Yoga Teacher
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	23	/	2017

Transaction ID : SA11AI.4106

Amount of Each Receipt this Period
1000.00

Memo Item

B. Saltzman, Bettylu, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4115 E. North Water Street #605

City Chicago	State IL	Zip Code 60611
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Self-employed	Occupation (for Individual) Homemaker
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	14	/	2017

Transaction ID : SA11AI.4102

Amount of Each Receipt this Period
1750.00

Memo Item

C. Wise, Paula, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 339 W Barry Ave

City Chicago	State IL	Zip Code 60657
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

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
08	/	28	/	2017

Transaction ID : SA11AI.4110

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 104
	<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)
GOODWERK

A. Wolfson, Cynthia, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 471 Lakeside Place

City Highland Park	State IL	Zip Code 60035
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Moraine Township	Occupation (for Individual) Trustee
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2017

Transaction ID : SA11AI.4112

Amount of Each Receipt this Period
1000.00

Memo Item

B. Yanis, Caren, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1240 N. Lake Shore Drive 25B

City Chicago	State IL	Zip Code 60610
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Self-employed	Occupation (for Individual) Consultant
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

Transaction ID : SA11AI.4313

Amount of Each Receipt this Period
207.50

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1207.50
TOTAL This Period (last page this line number only).....	40968.17

**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 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Alesandro, Nick, , ,		Date of Receipt MM / DD / YYYY 09 / 25 / 2017
Mailing Address 1114 Powhattan Ave		Transaction ID : SA17.4330
City San Francisco	State CA	Zip Code 94110
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) Timshel	Occupation (for Individual) Tester	<input type="checkbox"/> Memo Item Earmark to Justin Fairfax (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Brandzel, Joel, , ,		Date of Receipt MM / DD / YYYY 10 / 29 / 2017
Mailing Address 3109 14th St S		Transaction ID : SA17.4446
City Arlington	State VA	Zip Code 22204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Earmark to Kathy Tran (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Brandzel, Joel, , ,		Date of Receipt MM / DD / YYYY 10 / 29 / 2017
Mailing Address 3109 14th St S		Transaction ID : SA17.4448
City Arlington	State VA	Zip Code 22204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Earmark to Melissa Dart (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	26.66
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 104
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Brandzel, Joel, , ,

Mailing Address 3109 14th St S

City Arlington State VA Zip Code 22204

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

Name of Employer (for Individual) Occupation (for Individual)

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
10 / 29 / 2017

Transaction ID : SA17.4449

Amount of Each Receipt this Period
8.34

Memo Item
Earmark to Jennifer Carroll Foy (Virginia)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Costantino, Roseanne, , ,

Mailing Address 2500 Ivanhoe Dr.

City Los Angeles State CA Zip Code 90039

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

Name of Employer (for Individual) Occupation (for Individual)
Self-employed Graphics

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
10 / 31 / 2017

Transaction ID : SA17.4463

Amount of Each Receipt this Period
8.34

Memo Item
Earmark to Kathy Tran (Virginia)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Costantino, Roseanne, , ,

Mailing Address 2500 Ivanhoe Dr.

City Los Angeles State CA Zip Code 90039

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

Name of Employer (for Individual) Occupation (for Individual)
Self-employed Graphics

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
10 / 31 / 2017

Transaction ID : SA17.4465

Amount of Each Receipt this Period
8.33

Memo Item
Earmark to Melissa Dart (Virginia)

SUBTOTAL of Receipts This Page (optional)..... ▶ 25.01

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 104
<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)
GOODWERK

A. Costantino, Roseanne, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2500 Ivanhoe Dr.

City Los Angeles	State CA	Zip Code 90039
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Self-employed	Occupation (for Individual) Graphics
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Transaction ID : SA17.4466

Amount of Each Receipt this Period
8.33

Memo Item
Earmark to Jennifer Carroll Foy (Virginia)

B. Fallsgraff, Toby, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2778 N Milwaukee Ave Apt 405

City Chicago	State IL	Zip Code 60647
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Self-employed	Occupation (for Individual) Freelance Contractor
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

Transaction ID : SA17.4423

Amount of Each Receipt this Period
8.33

Memo Item
Earmark to Kathy Tran (Virginia)

C. Fallsgraff, Toby, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2778 N Milwaukee Ave Apt 405

City Chicago	State IL	Zip Code 60647
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Self-employed	Occupation (for Individual) Freelance Contractor
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

Transaction ID : SA17.4424

Amount of Each Receipt this Period
8.34

Memo Item
Earmark to Melissa Dart (Virginia)

SUBTOTAL of Receipts This Page (optional).....	25.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Fallsgraff, Toby, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2017
Mailing Address 2778 N Milwaukee Ave Apt 405		Transaction ID : SA17.4425
City Chicago	State IL	Zip Code 60647
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual) Self-employed	Occupation (for Individual) Freelance Contractor	<input type="checkbox"/> Memo Item Earmark to Jennifer Carroll Foy (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Faux, Ainsley, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2017
Mailing Address 1841 W North Ave Apt. 3		Transaction ID : SA17.4459
City Chicago	State IL	Zip Code 60622
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Earmark to Kathy Tran (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Faux, Ainsley, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2017
Mailing Address 1841 W North Ave Apt. 3		Transaction ID : SA17.4461
City Chicago	State IL	Zip Code 60622
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Earmark to Melissa Dart (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	24.99
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 21 OF 104
<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)
GOODWERK

A. Faux, Ainsley, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1841 W North Ave Apt. 3

City Chicago	State IL	Zip Code 60622
-----------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

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
10		28		2017

Transaction ID : SA17.4462

Amount of Each Receipt this Period

8.34

Memo Item
Earmark to Jennifer Carroll Foy (Virginia)

B. Frey, Elizabeth, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 Primrose Drive

City Longmeadow	State MA	Zip Code 01106
--------------------	-------------	-------------------

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

Name of Employer (for Individual) OTR LLC	Occupation (for Individual) Research Manager
--	---

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
10		30		2017

Transaction ID : SA17.4434

Amount of Each Receipt this Period

8.33

Memo Item
Earmark to Kathy Tran (Virginia)

C. Frey, Elizabeth, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 Primrose Drive

City Longmeadow	State MA	Zip Code 01106
--------------------	-------------	-------------------

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

Name of Employer (for Individual) OTR LLC	Occupation (for Individual) Research Manager
--	---

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
10		30		2017

Transaction ID : SA17.4435

Amount of Each Receipt this Period

8.34

Memo Item
Earmark to Melissa Dart (Virginia)

SUBTOTAL of Receipts This Page (optional).....	25.01
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 22 OF 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Frey, Elizabeth, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2017
Mailing Address 55 Primrose Drive		Transaction ID : SA17.4436
City Longmeadow	State MA	Zip Code 01106
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual) OTR LLC	Occupation (for Individual) Research Manager	<input type="checkbox"/> Memo Item Earmark to Jennifer Carroll Foy (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3.75	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Greenfield, Larry, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2017
Mailing Address 5050 S East End Ave #8C		Transaction ID : SA17.4437
City Chicago	State IL	Zip Code 60615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual) PoWR	Occupation (for Individual) Minister	<input type="checkbox"/> Memo Item Earmark to Kathy Tran (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Greenfield, Larry, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2017
Mailing Address 5050 S East End Ave #8C		Transaction ID : SA17.4438
City Chicago	State IL	Zip Code 60615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual) PoWR	Occupation (for Individual) Minister	<input type="checkbox"/> Memo Item Earmark to Melissa Dart (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2.50	

SUBTOTAL of Receipts This Page (optional).....	24.99
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 23 OF 104
<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)
GOODWERK

A. Greenfield, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5050 S East End Ave #8C
 City Chicago State IL Zip Code 60615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PoWR Occupation (for Individual) Minister
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.50

Date of Receipt 10 / 30 / 2017
Transaction ID : SA17.4439
 Amount of Each Receipt this Period 8.34
 Memo Item
 Earmark to Jennifer Carroll Foy (Virginia)

B. Johnson, Dan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 West Washington, Suite 1920
 City Chicago State IL Zip Code 60602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Campaign Filer Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1.00

Date of Receipt 09 / 25 / 2017
Transaction ID : SA17.4332
 Amount of Each Receipt this Period 10.00
 Memo Item
 Earmark to Lee Carter (Virginia)

C. Kennedy, Chip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 Lexington Ave, Apt. 2A
 City New York State NY Zip Code 10029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Collectively LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt 09 / 24 / 2017
Transaction ID : SA17.4336
 Amount of Each Receipt this Period 1.00
 Memo Item
 Earmark to Lee Carter (Virginia)

SUBTOTAL of Receipts This Page (optional).....	19.34
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 24 OF 104
<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)
GOODWERK

A. Kennedy, Chip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 Lexington Ave, Apt. 2A
 City New York State NY Zip Code 10029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Collectively LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.21

Date of Receipt **09 / 25 / 2017**
Transaction ID : SA17.4328
 Amount of Each Receipt this Period 3.10
 Memo Item
 Earmark to Ralph Northam (Virginia)

B. Kennedy, Chip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 Lexington Ave, Apt. 2A
 City New York State NY Zip Code 10029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Collectively LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.21

Date of Receipt **10 / 02 / 2017**
Transaction ID : SA17.4315
 Amount of Each Receipt this Period 1.00
 Memo Item
 Earmark to Hala Ayala (Virginia)

C. Kennedy, Chip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 Lexington Ave, Apt. 2A
 City New York State NY Zip Code 10029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Collectively LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.31

Date of Receipt **10 / 04 / 2017**
Transaction ID : SA17.4316
 Amount of Each Receipt this Period 2.00
 Memo Item
 Earmark to Hala Ayala (Virginia)

SUBTOTAL of Receipts This Page (optional).....	6.10
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 25 OF 104
<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)
GOODWERK

A. Kennedy, Chip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 Lexington Ave, Apt. 2A
 City New York State NY Zip Code 10029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Collectively LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.56

Date of Receipt 10 / 04 / 2017
Transaction ID : SA17.4351
 Amount of Each Receipt this Period 1.00
 Memo Item
 Earmark to Mark Herring (Virginia)

B. Kennedy, Chip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 Lexington Ave, Apt. 2A
 City New York State NY Zip Code 10029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Collectively LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.56

Date of Receipt 10 / 06 / 2017
Transaction ID : SA17.4317
 Amount of Each Receipt this Period 1.00
 Memo Item
 Earmark to Hala Ayala (Virginia)

C. Lovejoy, Jessica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 Hanley Drive
 City Sun Prairie State WI Zip Code 53590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 50 plus 1 Strategies Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3.75

Date of Receipt 10 / 23 / 2017
Transaction ID : SA17.4404
 Amount of Each Receipt this Period 8.33
 Memo Item
 Earmark to Kathy Tran (Virginia)

SUBTOTAL of Receipts This Page (optional).....	10.33
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 26 OF 104
<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)
GOODWERK

A. Lovejoy, Jessica, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 709 Hanley Drive

City Sun Prairie	State WI	Zip Code 53590
---------------------	-------------	-------------------

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

Name of Employer (for Individual) 50 plus 1 Strategies	Occupation (for Individual) Consultant
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2017

Transaction ID : SA17.4405

Amount of Each Receipt this Period
8.34

Memo Item
Earmark to Melissa Dart (Virginia)

B. Lovejoy, Jessica, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 709 Hanley Drive

City Sun Prairie	State WI	Zip Code 53590
---------------------	-------------	-------------------

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

Name of Employer (for Individual) 50 plus 1 Strategies	Occupation (for Individual) Consultant
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2017

Transaction ID : SA17.4406

Amount of Each Receipt this Period
8.33

Memo Item
Earmark to Jennifer Carroll Foy (Virginia)

C. Mauro, Patrick, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 Mockingbird Lane

City Oak Brook	State IL	Zip Code 60523
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Self-employed	Occupation (for Individual) Investment Advisor
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2017

Transaction ID : SA17.4440

Amount of Each Receipt this Period
33.34

Memo Item
Earmark to Kathy Tran (Virginia)

SUBTOTAL of Receipts This Page (optional).....	50.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 104
<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)
GOODWERK

A. Mauro, Patrick, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 Mockingbird Lane

City Oak Brook	State IL	Zip Code 60523
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Self-employed	Occupation (for Individual) Investment Advisor
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

Transaction ID : SA17.4441

Amount of Each Receipt this Period
33.33

Memo Item
Earmark to Melissa Dart (Virginia)

B. Mauro, Patrick, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 Mockingbird Lane

City Oak Brook	State IL	Zip Code 60523
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Self-employed	Occupation (for Individual) Investment Advisor
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

Transaction ID : SA17.4442

Amount of Each Receipt this Period
33.33

Memo Item
Earmark to Jennifer Carroll Foy (Virginia)

C. McPike, Andrea, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 W Addison St Unit 1F

City Chicago	State IL	Zip Code 60613
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Deloitte Consulting LLC	Occupation (for Individual) Management Consultant
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : SA17.4414

Amount of Each Receipt this Period
8.34

Memo Item
Earmark to Kathy Tran (Virginia)

SUBTOTAL of Receipts This Page (optional).....	75.00
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 28 OF 104
<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)
GOODWERK

A. McPike, Andrea, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 W Addison St Unit 1F

City Chicago	State IL	Zip Code 60613
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Deloitte Consulting LLC	Occupation (for Individual) Management Consultant
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : SA17.4415

Amount of Each Receipt this Period
8.33

Memo Item
Earmark to Melissa Dart (Virginia)

B. McPike, Andrea, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 815 W Addison St Unit 1F

City Chicago	State IL	Zip Code 60613
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Deloitte Consulting LLC	Occupation (for Individual) Management Consultant
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

Transaction ID : SA17.4416

Amount of Each Receipt this Period
8.33

Memo Item
Earmark to Jennifer Carroll Foy (Virginia)

C. Meyer, Hannah, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1255 S. Michigan Ave PH10

City Chicago	State IL	Zip Code 60605
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Provide	Occupation (for Individual) COO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2017

Transaction ID : SA17.4470

Amount of Each Receipt this Period
8.33

Memo Item
Earmark to Kathy Tran (Virginia)

SUBTOTAL of Receipts This Page (optional).....	24.99
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 29 OF 104
<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)
GOODWERK

A. Meyer, Hannah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1255 S. Michigan Ave PH10
 City Chicago State IL Zip Code 60605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Provide Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.50

Date of Receipt 11 / 01 / 2017
Transaction ID : SA17.4471
 Amount of Each Receipt this Period 8.34
 Memo Item
 Earmark to Melissa Dart (Virginia)

B. Meyer, Hannah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1255 S. Michigan Ave PH10
 City Chicago State IL Zip Code 60605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Provide Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.50

Date of Receipt 11 / 01 / 2017
Transaction ID : SA17.4472
 Amount of Each Receipt this Period 8.33
 Memo Item
 Earmark to Jennifer Carroll Foy (Virginia)

C. Mikva, Laurie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 N. Canal #2704
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern University Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt 10 / 28 / 2017
Transaction ID : SA17.4456
 Amount of Each Receipt this Period 33.33
 Memo Item
 Earmark to Kathy Tran (Virginia)

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 104
<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)
GOODWERK

A. Mikva, Laurie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 N. Canal #2704
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern University Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt 10 / 28 / 2017
Transaction ID : SA17.4457
 Amount of Each Receipt this Period 33.34
 Memo Item
 Earmark to Melissa Dart (Virginia)

B. Mikva, Laurie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 N. Canal #2704
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern University Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt 10 / 28 / 2017
Transaction ID : SA17.4458
 Amount of Each Receipt this Period 33.33
 Memo Item
 Earmark to Jennifer Carroll Foy (Virginia)

C. Mikva, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 W. Erie Apt. 2202
 City Chicago State IL Zip Code 60654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State of Illinois Occupation (for Individual) Judge
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5.00

Date of Receipt 11 / 01 / 2017
Transaction ID : SA17.4473
 Amount of Each Receipt this Period 16.67
 Memo Item
 Earmark to Kathy Tran (Virginia)

SUBTOTAL of Receipts This Page (optional).....	83.34
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 31 OF 104
<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)
GOODWERK

A. Mikva, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 W. Erie Apt. 2202

City Chicago	State IL	Zip Code 60654
-----------------	-------------	-------------------

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

Name of Employer (for Individual) State of Illinois	Occupation (for Individual) Judge
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2017
Transaction ID : SA17.4474

Amount of Each Receipt this Period
 16.66

Memo Item
 Earmark to Melissa Dart (Virginia)

B. Mikva, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 W. Erie Apt. 2202

City Chicago	State IL	Zip Code 60654
-----------------	-------------	-------------------

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

Name of Employer (for Individual) State of Illinois	Occupation (for Individual) Judge
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2017
Transaction ID : SA17.4475

Amount of Each Receipt this Period
 16.67

Memo Item
 Earmark to Jennifer Carroll Foy (Virginia)

C. Mikva Rosenberg, Jacob, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 E. Lake Street #3001

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GoodWerk	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
6200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2017
Transaction ID : SA17.4117

Amount of Each Receipt this Period
 6200.00

Memo Item
 Non-contribution Account

SUBTOTAL of Receipts This Page (optional).....	6233.33
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 32 OF 104
<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)
GOODWERK

A. Mikva Rosenberg, Jacob, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 E. Lake Street #3001

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GoodWerk	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9000.50

Date of Receipt: **09 / 24 / 2017**
Transaction ID : **SA17.4335**

Amount of Each Receipt this Period: 5.00

Memo Item
Earmark to Ralph Northam (Virginia)

B. Mikva Rosenberg, Jacob, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 E. Lake Street #3001

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GoodWerk	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9003.00

Date of Receipt: **09 / 26 / 2017**
Transaction ID : **SA17.4322**

Amount of Each Receipt this Period: 25.00

Memo Item
Earmark to Ralph Northam (Virginia)

C. Mikva Rosenberg, Jacob, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 E. Lake Street #3001

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GoodWerk	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9008.00

Date of Receipt: **10 / 03 / 2017**
Transaction ID : **SA17.4345**

Amount of Each Receipt this Period: 50.00

Memo Item
Earmark to Ralph Northam (Virginia)

SUBTOTAL of Receipts This Page (optional).....	80.00
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 33 OF 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Mikva Rosenberg, Jacob, H., ,

Mailing Address 73 E. Lake Street #3001

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GoodWerk	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9018.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

Transaction ID : SA17.4348

Amount of Each Receipt this Period
25.00

Memo Item
Earmark to Lee Carter (Virginia)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Mikva Rosenberg, Jacob, H., ,

Mailing Address 73 E. Lake Street #3001

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GoodWerk	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9018.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

Transaction ID : SA17.4349

Amount of Each Receipt this Period
25.00

Memo Item
Earmark to Kathy Tran (Virginia)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Mikva Rosenberg, Jacob, H., ,

Mailing Address 73 E. Lake Street #3001

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GoodWerk	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9018.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

Transaction ID : SA17.4352

Amount of Each Receipt this Period
25.00

Memo Item
Earmark to Kathy Tran (Virginia)

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 34 OF 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Mikva Rosenberg, Jacob, H., ,		Date of Receipt
Mailing Address 73 E. Lake Street #3001		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2017"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.4356
Name of Employer (for Individual) GoodWerk		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="9058.00"/>	Earmark to Mark Herring (Virginia)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mikva Rosenberg, Jacob, H., ,		Date of Receipt
Mailing Address 73 E. Lake Street #3001		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.4407
Name of Employer (for Individual) GoodWerk		Amount of Each Receipt this Period <input type="text" value="8.33"/>
Occupation (for Individual) CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="9080.67"/>	Earmark to Kathy Tran (Virginia)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mikva Rosenberg, Jacob, H., ,		Date of Receipt
Mailing Address 73 E. Lake Street #3001		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.4408
Name of Employer (for Individual) GoodWerk		Amount of Each Receipt this Period <input type="text" value="8.33"/>
Occupation (for Individual) CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="9080.67"/>	Earmark to Melissa Dart (Virginia)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="116.66"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Mikva Rosenberg, Jacob, H., ,		Date of Receipt
Mailing Address 73 E. Lake Street #3001		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.4409
Name of Employer (for Individual) GoodWerk		Amount of Each Receipt this Period <input type="text" value="8.34"/>
Occupation (for Individual) CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Earmark to Jennifer Carroll Foy (Virginia)
Aggregate Year-to-Date ▼ <input type="text" value="9080.67"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mikva Rosenberg, Mark, A., ,		Date of Receipt
Mailing Address 340 E. Randolph Street #4101		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2017"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.4101
Name of Employer (for Individual) UBS		Amount of Each Receipt this Period <input type="text" value="20000.00"/>
Occupation (for Individual) Wealth Advisor		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Non-contribution Account
Aggregate Year-to-Date ▼ <input type="text" value="25000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mikva Rosenberg, Rachel, S., ,		Date of Receipt
Mailing Address 340 E. Randolph Street #4101		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2017"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.4132
Name of Employer (for Individual) Chicago Theological Seminary		Amount of Each Receipt this Period <input type="text" value="20000.00"/>
Occupation (for Individual) Professor		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Non-contribution Account
Aggregate Year-to-Date ▼ <input type="text" value="20000.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="40008.34"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 104
<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)
GOODWERK

A. Mikva Rosenberg, Rachel, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 E. Randolph Street #4101
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Theological Seminary Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20100.00

Date of Receipt 09 / 24 / 2017
Transaction ID : SA17.4341
 Amount of Each Receipt this Period 100.00
 Memo Item
 Non-contribution Account

B. Mikva Rosenberg, Rachel, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 E. Randolph Street #4101
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Theological Seminary Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25150.00

Date of Receipt 10 / 25 / 2017
Transaction ID : SA17.4364
 Amount of Each Receipt this Period 50.00
 Memo Item
 Non-contribution Account

C. Mikva Rosenberg, Rachel, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 E. Randolph Street #4101
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Theological Seminary Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25150.00

Date of Receipt 10 / 25 / 2017
Transaction ID : SA17.4410
 Amount of Each Receipt this Period 166.66
 Memo Item
 Earmark to Kathy Tran (Virginia)

SUBTOTAL of Receipts This Page (optional).....	316.66
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 37 OF 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Mikva Rosenberg, Rachel, S., ,		Date of Receipt
Mailing Address 340 E. Randolph Street #4101		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2017"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.4411
Name of Employer (for Individual) Chicago Theological Seminary		Amount of Each Receipt this Period <input type="text" value="166.67"/>
Occupation (for Individual) Professor		<input type="checkbox"/> Memo Item Earmark to Melissa Dart (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="25150.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mikva Rosenberg, Rachel, S., ,		Date of Receipt
Mailing Address 340 E. Randolph Street #4101		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2017"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.4412
Name of Employer (for Individual) Chicago Theological Seminary		Amount of Each Receipt this Period <input type="text" value="166.67"/>
Occupation (for Individual) Professor		<input type="checkbox"/> Memo Item Earmark to Jennifer Carroll Foy (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="25150.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mikva Rosenberg, Rachel, S., ,		Date of Receipt
Mailing Address 340 E. Randolph Street #4101		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2017"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.4374
Name of Employer (for Individual) Chicago Theological Seminary		Amount of Each Receipt this Period <input type="text" value="75.00"/>
Occupation (for Individual) Professor		<input type="checkbox"/> Memo Item Non-contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="25225.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="408.34"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 104
<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)
GOODWERK

A. Mikva Rosenberg, Rachel, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 E. Randolph Street #4101
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Theological Seminary Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25225.00

Date of Receipt 10 / 29 / 2017
Transaction ID : SA17.4450
 Amount of Each Receipt this Period 500.00
 Memo Item
 Earmark to Kathy Tran (Virginia)

B. Mikva Rosenberg, Rachel, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 E. Randolph Street #4101
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Theological Seminary Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25225.00

Date of Receipt 10 / 29 / 2017
Transaction ID : SA17.4451
 Amount of Each Receipt this Period 500.00
 Memo Item
 Earmark to Melissa Dart (Virginia)

C. Mikva Rosenberg, Rachel, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 E. Randolph Street #4101
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Theological Seminary Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25225.00

Date of Receipt 10 / 29 / 2017
Transaction ID : SA17.4452
 Amount of Each Receipt this Period 500.00
 Memo Item
 Earmark to Jennifer Carroll Foy (Virginia)

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 39 OF 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Miller, George, , ,		Date of Receipt MM / DD / YYYY 10 / 20 / 2017
Mailing Address 4304 N. Ashland Ave. #2WA		Transaction ID : SA17.4398
City Chicago	State IL	Zip Code 60613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.34
Name of Employer (for Individual) GoodWerk	Occupation (for Individual) Digital Director	<input type="checkbox"/> Memo Item Earmark to Kathy Tran (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Miller, George, , ,		Date of Receipt MM / DD / YYYY 10 / 20 / 2017
Mailing Address 4304 N. Ashland Ave. #2WA		Transaction ID : SA17.4400
City Chicago	State IL	Zip Code 60613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.33
Name of Employer (for Individual) GoodWerk	Occupation (for Individual) Digital Director	<input type="checkbox"/> Memo Item Earmark to Jennifer Carroll Foy (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Miller, George, , ,		Date of Receipt MM / DD / YYYY 10 / 20 / 2017
Mailing Address 4304 N. Ashland Ave. #2WA		Transaction ID : SA17.4403
City Chicago	State IL	Zip Code 60613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.33
Name of Employer (for Individual) GoodWerk	Occupation (for Individual) Digital Director	<input type="checkbox"/> Memo Item Earmark to Melissa Dart (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1.00	

SUBTOTAL of Receipts This Page (optional).....▶	10.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 40 OF 104
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
GOODWERK

A. Miller, George, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4304 N. Ashland Ave. #2WA
 City Chicago State IL Zip Code 60613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GoodWerk Occupation (for Individual) Digital Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1.50

Date of Receipt 10 / 27 / 2017
Transaction ID : SA17.4420
 Amount of Each Receipt this Period 1.67
 Memo Item
 Earmark to Kathy Tran (Virginia)

B. Miller, George, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4304 N. Ashland Ave. #2WA
 City Chicago State IL Zip Code 60613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GoodWerk Occupation (for Individual) Digital Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1.50

Date of Receipt 10 / 27 / 2017
Transaction ID : SA17.4421
 Amount of Each Receipt this Period 1.67
 Memo Item
 Earmark to Melissa Dart (Virginia)

C. Miller, George, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4304 N. Ashland Ave. #2WA
 City Chicago State IL Zip Code 60613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GoodWerk Occupation (for Individual) Digital Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1.50

Date of Receipt 10 / 27 / 2017
Transaction ID : SA17.4422
 Amount of Each Receipt this Period 1.66
 Memo Item
 Earmark to Jennifer Carroll Foy (Virginia)

SUBTOTAL of Receipts This Page (optional)..... ▶ 5.00
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 41 OF 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Pawlikowski, John, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2017
Mailing Address 323 W. Illinois Street		Transaction ID : SA17.4426
City Chicago	State IL	Zip Code 60654
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual) Catholic Theological Union	Occupation (for Individual) Professor	<input type="checkbox"/> Memo Item Earmark to Kathy Tran (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pawlikowski, John, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2017
Mailing Address 323 W. Illinois Street		Transaction ID : SA17.4428
City Chicago	State IL	Zip Code 60654
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.34
Name of Employer (for Individual) Catholic Theological Union	Occupation (for Individual) Professor	<input type="checkbox"/> Memo Item Earmark to Jennifer Carroll Foy (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pawlikowski, John, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2017
Mailing Address 323 W. Illinois Street		Transaction ID : SA17.4430
City Chicago	State IL	Zip Code 60654
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual) Catholic Theological Union	Occupation (for Individual) Professor	<input type="checkbox"/> Memo Item Earmark to Melissa Dart (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2.50	

SUBTOTAL of Receipts This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 42 OF 104
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
GOODWERK

A. Price, Marilyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 Prairie Avenue
 City Evanston State IL Zip Code 60201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Self-employed Storyteller Educator
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5.00

Date of Receipt
 10 / 31 / 2017
Transaction ID : SA17.4467
 Amount of Each Receipt this Period 16.66
 Memo Item
 Earmark to Kathy Tran (Virginia)

B. Price, Marilyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 Prairie Avenue
 City Evanston State IL Zip Code 60201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Self-employed Storyteller Educator
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5.00

Date of Receipt
 10 / 31 / 2017
Transaction ID : SA17.4468
 Amount of Each Receipt this Period 16.67
 Memo Item
 Earmark to Melissa Dart (Virginia)

C. Price, Marilyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 Prairie Avenue
 City Evanston State IL Zip Code 60201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Self-employed Storyteller Educator
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 5.00

Date of Receipt
 10 / 31 / 2017
Transaction ID : SA17.4469
 Amount of Each Receipt this Period 16.67
 Memo Item
 Earmark to Jennifer Carroll Foy (Virginia)

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 43 OF 104
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
GOODWERK

A. Ratner, Hope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 Ridgemedede Road Apt. 203
 City Baltimore State MD Zip Code 21210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bolton Street Synagogue Occupation (for Individual) Non-profit Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.50

Date of Receipt 10 / 30 / 2017
Transaction ID : SA17.4443
 Amount of Each Receipt this Period 8.33
 Memo Item
 Earmark to Kathy Tran (Virginia)

B. Ratner, Hope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 Ridgemedede Road Apt. 203
 City Baltimore State MD Zip Code 21210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bolton Street Synagogue Occupation (for Individual) Non-profit Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.50

Date of Receipt 10 / 30 / 2017
Transaction ID : SA17.4444
 Amount of Each Receipt this Period 8.34
 Memo Item
 Earmark to Melissa Dart (Virginia)

C. Ratner, Hope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 Ridgemedede Road Apt. 203
 City Baltimore State MD Zip Code 21210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bolton Street Synagogue Occupation (for Individual) Non-profit Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.50

Date of Receipt 10 / 30 / 2017
Transaction ID : SA17.4445
 Amount of Each Receipt this Period 8.33
 Memo Item
 Earmark to Jennifer Carroll Foy (Virginia)

SUBTOTAL of Receipts This Page (optional).....▶ 25.00
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 44 OF 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rollert, John, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2017
Mailing Address 2745 North Hampden Court 2-O		Transaction ID : SA17.4453
City Chicago	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.34
Name of Employer (for Individual) University of Chicago	Occupation (for Individual) Teacher	<input type="checkbox"/> Memo Item Earmark to Kathy Tran (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rollert, John, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2017
Mailing Address 2745 North Hampden Court 2-O		Transaction ID : SA17.4454
City Chicago	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual) University of Chicago	Occupation (for Individual) Teacher	<input type="checkbox"/> Memo Item Earmark to Melissa Dart (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Rollert, John, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2017
Mailing Address 2745 North Hampden Court 2-O		Transaction ID : SA17.4455
City Chicago	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual) University of Chicago	Occupation (for Individual) Teacher	<input type="checkbox"/> Memo Item Earmark to Jennifer Carroll Foy (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2.50	

SUBTOTAL of Receipts This Page (optional).....▶	25.00
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 45 OF 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Smith, Elizabeth, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 3809 Brighton Road		Transaction ID : SA17.4417
City Nashville	State TN	Zip Code 37205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.67
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Earmark to Kathy Tran (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Smith, Elizabeth, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 3809 Brighton Road		Transaction ID : SA17.4418
City Nashville	State TN	Zip Code 37205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.66
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Earmark to Melissa Dart (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Smith, Elizabeth, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2017
Mailing Address 3809 Brighton Road		Transaction ID : SA17.4419
City Nashville	State TN	Zip Code 37205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.67
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Earmark to Jennifer Carrol Foy (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	5.00
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 46 OF 104
<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)
GOODWERK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Torop, Betsy, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2017
Mailing Address 14099 Jennifer Terrace		Transaction ID : SA17.4431
City Largo	State FL	Zip Code 33774
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.34
Name of Employer (for Individual) Congregation Beth Shalom	Occupation (for Individual) Rabbi	<input type="checkbox"/> Memo Item Earmark to Kathy Tran (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Torop, Betsy, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2017
Mailing Address 14099 Jennifer Terrace		Transaction ID : SA17.4432
City Largo	State FL	Zip Code 33774
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual) Congregation Beth Shalom	Occupation (for Individual) Rabbi	<input type="checkbox"/> Memo Item Earmark to Melissa Dart (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Torop, Betsy, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2017
Mailing Address 14099 Jennifer Terrace		Transaction ID : SA17.4433
City Largo	State FL	Zip Code 33774
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.33
Name of Employer (for Individual) Congregation Beth Shalom	Occupation (for Individual) Rabbi	<input type="checkbox"/> Memo Item Earmark to Jennifer Carroll Foy (Virginia)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2.50	

SUBTOTAL of Receipts This Page (optional).....▶	25.00
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 47 OF 104
<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)
GOODWERK

A. Warden, Robert, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1934 N Hudson Ave.
City Chicago State IL Zip Code 60614
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Retired Occupation (for Individual) Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 05 / 2017**
Transaction ID : SA17.4118
Amount of Each Receipt this Period 1000.00
 Memo Item
Non-contribution Account

B. Yanis, Caren, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1240 N. Lake Shore Drive 25B
City Chicago State IL Zip Code 60610
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Self-employed Occupation (for Individual) Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 207.50

Date of Receipt **09 / 27 / 2017**
Transaction ID : SA17.4314
Amount of Each Receipt this Period 50.00
 Memo Item
Earmark to Hala Ayala (Virginia)

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

Date of Receipt
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	50429.10

**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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial)
A. 270 Strategies

Mailing Address 626 W Jackson, Suite 600

City Chicago State IL Zip Code 60661

Purpose of Disbursement Office Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.4267**

Amount of Each Disbursement this Period: 85.00

Memo Item

Full Name (Last, First, Middle Initial)
B. 270 Strategies

Mailing Address 626 W Jackson, Suite 600

City Chicago State IL Zip Code 60661

Purpose of Disbursement Office Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.4279**

Amount of Each Disbursement this Period: 85.00

Memo Item

Full Name (Last, First, Middle Initial)
C. 270 Strategies

Mailing Address 626 W Jackson, Suite 600

City Chicago State IL Zip Code 60661

Purpose of Disbursement Office Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.4284**

Amount of Each Disbursement this Period: 80.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 250.00

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial)

A. 270 Strategies

Mailing Address 626 W Jackson, Suite 600

City Chicago State IL Zip Code 60661

Purpose of Disbursement
Office Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2017

FEC Identification Number

C

Transaction ID : SB21B.4293

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 2 South Michigan Avenue

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Banking Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2017

FEC Identification Number

C

Transaction ID : SB21B.4146

Amount of Each Disbursement this Period

106.47

Memo Item

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 2 South Michigan Avenue

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2017

FEC Identification Number

C

Transaction ID : SB21B.4273

Amount of Each Disbursement this Period

0.60

Memo Item

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

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

112.07

**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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement MM / DD / YYYY 11 / 01 / 2017	
Mailing Address 2 South Michigan Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4275 Amount of Each Disbursement this Period [REDACTED] 0.60	
City Chicago	State IL	Zip Code 60603	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement MM / DD / YYYY 11 / 22 / 2017	
Mailing Address 2 South Michigan Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4289 Amount of Each Disbursement this Period [REDACTED] 0.60	
City Chicago	State IL	Zip Code 60603	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Bank of America		Date of Disbursement MM / DD / YYYY 12 / 13 / 2017	
Mailing Address 2 South Michigan Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4297 Amount of Each Disbursement this Period [REDACTED] 0.60	
City Chicago	State IL	Zip Code 60603	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1.80
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Burroughs, Briana Maia, , ,		Date of Disbursement MM / DD / YYYY 10 / 13 / 2017	
Mailing Address 751 W. Bittersweet Place #2		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4265 Amount of Each Disbursement this Period [REDACTED] 435.00	
City Chicago	State IL	Zip Code 60613	Category/ Type [REDACTED]
Purpose of Disbursement Intern Stipend		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Burroughs, Briana Maia, , ,		Date of Disbursement MM / DD / YYYY 11 / 29 / 2017	
Mailing Address 751 W. Bittersweet Place #2		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4291 Amount of Each Disbursement this Period [REDACTED] 400.00	
City Chicago	State IL	Zip Code 60613	Category/ Type [REDACTED]
Purpose of Disbursement Intern Stipend		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Collectively LLC		Date of Disbursement MM / DD / YYYY 08 / 15 / 2017	
Mailing Address 1505 Lexington Ave, 2A		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4197 Amount of Each Disbursement this Period [REDACTED] 1380.00	
City New York	State NY	Zip Code 10029	Category/ Type [REDACTED]
Purpose of Disbursement Website Design & Development		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2215.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Collectively LLC		Date of Disbursement MM / DD / YYYY 08 / 29 / 2017
Mailing Address 1505 Lexington Ave, 2A		FEC Identification Number C Transaction ID : SB21B.4209 Amount of Each Disbursement this Period 1180.00
City New York	State NY	
Zip Code 10029	Purpose of Disbursement Website Design & Development	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Collectively LLC		Date of Disbursement MM / DD / YYYY 09 / 11 / 2017
Mailing Address 1505 Lexington Ave, 2A		FEC Identification Number C Transaction ID : SB21B.4213 Amount of Each Disbursement this Period 1560.00
City New York	State NY	
Zip Code 10029	Purpose of Disbursement Website Design & Development	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Collectively LLC		Date of Disbursement MM / DD / YYYY 10 / 02 / 2017
Mailing Address 1505 Lexington Ave, 2A		FEC Identification Number C Transaction ID : SB21B.4221 Amount of Each Disbursement this Period 1500.00
City New York	State NY	
Zip Code 10029	Purpose of Disbursement Website Design & Development	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4240.00
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Collectively LLC		Date of Disbursement MM / DD / YYYY 10 / 31 / 2017
Mailing Address 1505 Lexington Ave, 2A		FEC Identification Number C [] Transaction ID : SB21B.4271 Amount of Each Disbursement this Period [] 1105.00
City New York	State NY	Zip Code 10029
Purpose of Disbursement Website Design & Development		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Collectively LLC		Date of Disbursement MM / DD / YYYY 12 / 12 / 2017
Mailing Address 1505 Lexington Ave, 2A		FEC Identification Number C [] Transaction ID : SB21B.4295 Amount of Each Disbursement this Period [] 605.00
City New York	State NY	Zip Code 10029
Purpose of Disbursement Website Design & Development		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Facebook		Date of Disbursement MM / DD / YYYY 10 / 16 / 2017
Mailing Address 1 Hackers Way		FEC Identification Number C [] Transaction ID : SB21B.4299 Amount of Each Disbursement this Period [] 56.78
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Digital Communications		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1766.78
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hackers Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Communications

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
10 / 20 / 2017

FEC Identification Number

C
Transaction ID : SB21B.4301
Amount of Each Disbursement this Period
27.16

Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hackers Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Communications

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
10 / 27 / 2017

FEC Identification Number

C
Transaction ID : SB21B.4303
Amount of Each Disbursement this Period
243.94

Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hackers Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Communications

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
10 / 30 / 2017

FEC Identification Number

C
Transaction ID : SB21B.4305
Amount of Each Disbursement this Period
377.69

Memo Item

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

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

648.79

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial)

A. Facebook

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			31			2017					

Mailing Address 1 Hackers Way

FEC Identification Number

C []

Transaction ID : SB21B.4307
Amount of Each Disbursement this Period

[] 161.29

Memo Item

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Communications

[]

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Facebook

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			03			2017					

Mailing Address 1 Hackers Way

FEC Identification Number

C []

Transaction ID : SB21B.4309
Amount of Each Disbursement this Period

[] 530.50

Memo Item

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Communications

[]

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Facebook

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			09			2017					

Mailing Address 1 Hackers Way

FEC Identification Number

C []

Transaction ID : SB21B.4311
Amount of Each Disbursement this Period

[] 726.63

Memo Item

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Communications

[]

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

[] 1418.42

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Karrar, Ahmed, , ,		Date of Disbursement MM / DD / YYYY 11 / 03 / 2017	
Mailing Address 129 E. Bellevue Place #302		FEC Identification Number C [] Transaction ID : SB21B.4259	
City Chicago	State IL	Zip Code 60611	Amount of Each Disbursement this Period [] 100.00
Purpose of Disbursement Intern Stipend		Category/ Type []	Memo Item <input type="checkbox"/>
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. Karrar, Ahmed, , ,		Date of Disbursement MM / DD / YYYY 11 / 17 / 2017	
Mailing Address 129 E. Bellevue Place #302		FEC Identification Number C [] Transaction ID : SB21B.4261	
City Chicago	State IL	Zip Code 60611	Amount of Each Disbursement this Period [] 100.00
Purpose of Disbursement Intern Stipend		Category/ Type []	Memo Item <input type="checkbox"/>
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) C. Karrar, Ahmed, , ,		Date of Disbursement MM / DD / YYYY 12 / 19 / 2017	
Mailing Address 129 E. Bellevue Place #302		FEC Identification Number C [] Transaction ID : SB21B.4263	
City Chicago	State IL	Zip Code 60611	Amount of Each Disbursement this Period [] 100.00
Purpose of Disbursement Intern Stipend		Category/ Type []	Memo Item <input type="checkbox"/>
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 300.00
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial)
A. Mikva Rosenberg, Jacob, H., ,

Mailing Address 73 E. Lake Street #3001

City Chicago State IL Zip Code 60601

Purpose of Disbursement Website Design & Development

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 13 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.4217**

Amount of Each Disbursement this Period: 618.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Collectively LLC

Mailing Address 1505 Lexington Ave, 2A

City New York State NY Zip Code 10029

Purpose of Disbursement Website Design & Development

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 13 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.4217.c**

Amount of Each Disbursement this Period: 618.00

Memo Item

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

Mailing Address 4304 N. Ashland Ave. #2WA

City Chicago State IL Zip Code 60613

Purpose of Disbursement Digital Communications

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 17 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.4282**

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 818.00

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Murphy, Meaghan, , ,			Date of Disbursement MM / DD / YYYY 08 / 14 / 2017		
Mailing Address 5500 S Everett Ave, #3			FEC Identification Number C [REDACTED]		
City Chicago	State IL	Zip Code 60637	Transaction ID : SB21B.4195		
Purpose of Disbursement Media Consulting		Category/ Type [REDACTED]	Amount of Each Disbursement this Period [REDACTED] 580.00		
Candidate Name			Memo Item <input type="checkbox"/>		
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. Perkins Coie			Date of Disbursement MM / DD / YYYY 08 / 23 / 2017		
Mailing Address 1201 Third Avenue Suite 4900			FEC Identification Number C [REDACTED]		
City Seattle	State WA	Zip Code 98101	Transaction ID : SB21B.4205		
Purpose of Disbursement Legal Services		Category/ Type [REDACTED]	Amount of Each Disbursement this Period [REDACTED] 337.55		
Candidate Name			Memo Item <input type="checkbox"/>		
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) C. Perkins Coie			Date of Disbursement MM / DD / YYYY 10 / 02 / 2017		
Mailing Address 1201 Third Avenue Suite 4900			FEC Identification Number C [REDACTED]		
City Seattle	State WA	Zip Code 98101	Transaction ID : SB21B.4223		
Purpose of Disbursement Legal Services		Category/ Type [REDACTED]	Amount of Each Disbursement this Period [REDACTED] 745.47		
Candidate Name			Memo Item <input type="checkbox"/>		
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:					

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1663.02
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Perkins Coie		Date of Disbursement MM / DD / YYYY 10 / 30 / 2017
Mailing Address 1201 Third Avenue Suite 4900		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4269 Amount of Each Disbursement this Period [REDACTED] 125.10
City Seattle	State WA	Zip Code 98101
Purpose of Disbursement Legal Services		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Pfander, Samantha, , ,		Date of Disbursement MM / DD / YYYY 11 / 03 / 2017
Mailing Address 1837 W. Evergreen Avenue #2F		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4253 Amount of Each Disbursement this Period [REDACTED] 100.00
City Chicago	State IL	Zip Code 60622
Purpose of Disbursement Intern Stipend		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Pfander, Samantha, , ,		Date of Disbursement MM / DD / YYYY 11 / 17 / 2017
Mailing Address 1837 W. Evergreen Avenue #2F		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4255 Amount of Each Disbursement this Period [REDACTED] 100.00
City Chicago	State IL	Zip Code 60622
Purpose of Disbursement Intern Stipend		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 325.10
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Smith, Elizabeth, , ,		Date of Disbursement MM / DD / YYYY 11 / 03 / 2017	
Mailing Address 3809 Brighton Road		FEC Identification Number C [] Transaction ID : SB21B.4247 Amount of Each Disbursement this Period [] 40.00	
City Nashville	State TN	Zip Code 37205	Category/ Type []
Purpose of Disbursement Intern Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Smith, Elizabeth, , ,		Date of Disbursement MM / DD / YYYY 11 / 17 / 2017	
Mailing Address 3809 Brighton Road		FEC Identification Number C [] Transaction ID : SB21B.4249 Amount of Each Disbursement this Period [] 40.00	
City Nashville	State TN	Zip Code 37205	Category/ Type []
Purpose of Disbursement Intern Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Smith, Elizabeth, , ,		Date of Disbursement MM / DD / YYYY 12 / 19 / 2017	
Mailing Address 3809 Brighton Road		FEC Identification Number C [] Transaction ID : SB21B.4152 Amount of Each Disbursement this Period [] 450.00	
City Nashville	State TN	Zip Code 37205	Category/ Type []
Purpose of Disbursement Intern Stipend		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 530.00
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Wasik, Sarah, , ,		Date of Disbursement MM / DD / YYYY 11 / 03 / 2017
Mailing Address 1278 Prairie Orchid Lane		FEC Identification Number C [] Transaction ID : SB21B.4239 Amount of Each Disbursement this Period [] 40.00
City Grayslake	State IL	Zip Code 60030
Purpose of Disbursement Intern Stipend		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Wasik, Sarah, , ,		Date of Disbursement MM / DD / YYYY 11 / 17 / 2017
Mailing Address 1278 Prairie Orchid Lane		FEC Identification Number C [] Transaction ID : SB21B.4241 Amount of Each Disbursement this Period [] 40.00
City Grayslake	State IL	Zip Code 60030
Purpose of Disbursement Intern Stipend		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Wasik, Sarah, , ,		Date of Disbursement MM / DD / YYYY 12 / 05 / 2017
Mailing Address 1278 Prairie Orchid Lane		FEC Identification Number C [] Transaction ID : SB21B.4243 Amount of Each Disbursement this Period [] 90.00
City Grayslake	State IL	Zip Code 60030
Purpose of Disbursement Intern Stipend		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 170.00
TOTAL This Period (last page this line number only).....▶	[] 14458.98

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
GOODWERK

Full Name (Last, First, Middle Initial)
A. 270 Strategies

Mailing Address 626 W Jackson, Suite 600

City Chicago State IL Zip Code 60661

Purpose of Disbursement Office Rent, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 09 / 01 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4212**

Amount of Each Disbursement this Period: 372.90

Memo Item

Full Name (Last, First, Middle Initial)
B. 270 Strategies

Mailing Address 626 W Jackson, Suite 600

City Chicago State IL Zip Code 60661

Purpose of Disbursement Office Rent, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 10 / 16 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4268**

Amount of Each Disbursement this Period: 340.00

Memo Item

Full Name (Last, First, Middle Initial)
C. 270 Strategies

Mailing Address 626 W Jackson, Suite 600

City Chicago State IL Zip Code 60661

Purpose of Disbursement Office Rent, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 11 / 07 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4281**

Amount of Each Disbursement this Period: 340.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1052.90

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial)
A. 270 Strategies

Mailing Address 626 W Jackson, Suite 600

City Chicago State IL Zip Code 60661

Purpose of Disbursement Office Rent, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 11 / 21 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4285**

Amount of Each Disbursement this Period: 320.00

Memo Item

Full Name (Last, First, Middle Initial)
B. 270 Strategies

Mailing Address 626 W Jackson, Suite 600

City Chicago State IL Zip Code 60661

Purpose of Disbursement Office Rent, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 11 / 30 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4294**

Amount of Each Disbursement this Period: 20.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Ayala for Delegate

Mailing Address P.O. Box 7434

City Woodbridge State VA Zip Code 22195

Purpose of Disbursement Earmark by Caren Yanis

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 10 / 09 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4487**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 390.00

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Ayala for Delegate		Date of Disbursement MM / DD / YYYY 10 / 09 / 2017
Mailing Address P.O. Box 7434		FEC Identification Number C [] Transaction ID : SB29.4488
City Woodbridge	State VA	Zip Code 22195
Purpose of Disbursement Earmark by Chip Kennedy		Amount of Each Disbursement this Period [] 4.00
Candidate Name		Memo Item <input type="checkbox"/>
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement MM / DD / YYYY 10 / 31 / 2017
Mailing Address 2 South Michigan Avenue		FEC Identification Number C [] Transaction ID : SB29.4274
City Chicago	State IL	Zip Code 60603
Purpose of Disbursement Bank Fee, Non-contribution Account		Amount of Each Disbursement this Period [] 2.40
Candidate Name		Memo Item <input type="checkbox"/>
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Bank of America		Date of Disbursement MM / DD / YYYY 11 / 01 / 2017
Mailing Address 2 South Michigan Avenue		FEC Identification Number C [] Transaction ID : SB29.4276
City Chicago	State IL	Zip Code 60603
Purpose of Disbursement Bank Fee, Non-contribution Account		Amount of Each Disbursement this Period [] 2.40
Candidate Name		Memo Item <input type="checkbox"/>
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 8.80
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement MM / DD / YYYY 11 / 22 / 2017	
Mailing Address 2 South Michigan Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB29.4290	
City Chicago	State IL	Zip Code 60603	Amount of Each Disbursement this Period [REDACTED] 2.40
Purpose of Disbursement Bank Fee, Non-contribution Account		Category/ Type [REDACTED]	<input type="checkbox"/> Memo Item
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. Bank of America		Date of Disbursement MM / DD / YYYY 12 / 13 / 2017	
Mailing Address 2 South Michigan Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB29.4298	
City Chicago	State IL	Zip Code 60603	Amount of Each Disbursement this Period [REDACTED] 2.40
Purpose of Disbursement Bank Fee, Non-contribution Account		Category/ Type [REDACTED]	<input type="checkbox"/> Memo Item
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) C. Burroughs, Briana Maia, , ,		Date of Disbursement MM / DD / YYYY 10 / 13 / 2017	
Mailing Address 751 W. Bittersweet Place #2		FEC Identification Number C [REDACTED] Transaction ID : SB29.4266	
City Chicago	State IL	Zip Code 60613	Amount of Each Disbursement this Period [REDACTED] 1740.00
Purpose of Disbursement Intern Stipend, Non-contribution Account		Category/ Type [REDACTED]	<input type="checkbox"/> Memo Item
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1744.80
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Burroughs, Briana Maia, , ,		Date of Disbursement MM / DD / YYYY 11 / 29 / 2017	
Mailing Address 751 W. Bittersweet Place #2		FEC Identification Number C [REDACTED] Transaction ID : SB29.4292 Amount of Each Disbursement this Period 1600.00	
City Chicago	State IL	Zip Code 60613	Category/ Type
Purpose of Disbursement Intern Stipend, Non-contribution Account			
Candidate Name		Memo Item <input type="checkbox"/>	
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. Carter for Virginia		Date of Disbursement MM / DD / YYYY 10 / 09 / 2017	
Mailing Address P.O. Box 243		FEC Identification Number C [REDACTED] Transaction ID : SB29.4482 Amount of Each Disbursement this Period 10.00	
City Manassas	State VA	Zip Code 20108	Category/ Type
Purpose of Disbursement Earmark by Dan Johnson			
Candidate Name		Memo Item <input type="checkbox"/>	
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) C. Carter for Virginia		Date of Disbursement MM / DD / YYYY 10 / 09 / 2017	
Mailing Address P.O. Box 243		FEC Identification Number C [REDACTED] Transaction ID : SB29.4483 Amount of Each Disbursement this Period 1.00	
City Manassas	State VA	Zip Code 20108	Category/ Type
Purpose of Disbursement Earmark by Chip Kennedy			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

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

1611.00

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Carter for Virginia		Date of Disbursement MM / DD / YYYY 10 / 09 / 2017
Mailing Address P.O. Box 243		FEC Identification Number C [] Transaction ID : SB29.4485 Amount of Each Disbursement this Period [] 25.00
City Manassas	State VA	Zip Code 20108
Purpose of Disbursement Earmark by Jacob Mikva Rosenberg		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Collectively LLC		Date of Disbursement MM / DD / YYYY 08 / 15 / 2017
Mailing Address 1505 Lexington Ave, 2A		FEC Identification Number C [] Transaction ID : SB29.4198 Amount of Each Disbursement this Period [] 5520.00
City New York	State NY	Zip Code 10029
Purpose of Disbursement Website Design & Development, , Non-contribution Account		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Collectively LLC		Date of Disbursement MM / DD / YYYY 08 / 29 / 2017
Mailing Address 1505 Lexington Ave, 2A		FEC Identification Number C [] Transaction ID : SB29.4210 Amount of Each Disbursement this Period [] 4720.00
City New York	State NY	Zip Code 10029
Purpose of Disbursement Website Design & Development, , Non-contribution Account		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 10265.00
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Collectively LLC		Date of Disbursement MM / DD / YYYY 09 / 11 / 2017
Mailing Address 1505 Lexington Ave, 2A		FEC Identification Number C [] Transaction ID : SB29.4214 Amount of Each Disbursement this Period [] 6240.00
City New York	State NY	Zip Code 10029
Purpose of Disbursement Website Design & Development, , Non-contribution Account		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Collectively LLC		Date of Disbursement MM / DD / YYYY 10 / 02 / 2017
Mailing Address 1505 Lexington Ave, 2A		FEC Identification Number C [] Transaction ID : SB29.4222 Amount of Each Disbursement this Period [] 6000.00
City New York	State NY	Zip Code 10029
Purpose of Disbursement Website Design & Development, , Non-contribution Account		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Collectively LLC		Date of Disbursement MM / DD / YYYY 10 / 31 / 2017
Mailing Address 1505 Lexington Ave, 2A		FEC Identification Number C [] Transaction ID : SB29.4272 Amount of Each Disbursement this Period [] 4420.00
City New York	State NY	Zip Code 10029
Purpose of Disbursement Website Design & Development, Non-contribution Account		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 16660.00
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"/> 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)
GOODWERK

A. Collectively LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1505 Lexington Ave, 2A

City New York State NY Zip Code 10029

Purpose of Disbursement Website Design & Development, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 12 / 12 / 2017

FEC Identification Number: C
Transaction ID : SB29.4296
 Amount of Each Disbursement this Period: 2420.00

Memo Item

B. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hackers Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Internet Post, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 10 / 10 / 2017

FEC Identification Number: C
Transaction ID : SB29.4158
 Amount of Each Disbursement this Period: 250.00

Memo Item

C. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hackers Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Communications, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 10 / 16 / 2017

FEC Identification Number: C
Transaction ID : SB29.4300
 Amount of Each Disbursement this Period: 227.13

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2897.13

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial)

A. Facebook

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2017

Mailing Address 1 Hackers Way

FEC Identification Number

C []

Transaction ID : SB29.4302
Amount of Each Disbursement this Period

[] 108.62

Memo Item

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement
Digital Communications, Non-contribution Account

[]
Category/
Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

B. Facebook

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2017

Mailing Address 1 Hackers Way

FEC Identification Number

C []

Transaction ID : SB29.4304
Amount of Each Disbursement this Period

[] 975.78

Memo Item

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement
Digital Communications, Non-contribution Account

[]
Category/
Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

C. Facebook

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2017

Mailing Address 1 Hackers Way

FEC Identification Number

C []

Transaction ID : SB29.4306
Amount of Each Disbursement this Period

[] 1510.77

Memo Item

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement
Digital Communications, Non-contribution Account

[]
Category/
Type

Candidate Name

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

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

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

[] 2595.17

[]

**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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial)
A. Facebook

Date of Disbursement: / /

Mailing Address: 1 Hackers Way

City: Menlo Park State: CA Zip Code: 94025

Purpose of Disbursement: Digital Communications, Non-contribution Account

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: _____
Transaction ID : SB29.4308
 Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
B. Facebook

Date of Disbursement: / /

Mailing Address: 1 Hackers Way

City: Menlo Park State: CA Zip Code: 94025

Purpose of Disbursement: Digital Communications, Non-contribution Account

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: _____
Transaction ID : SB29.4310
 Amount of Each Disbursement this Period:
 Memo Item

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

Date of Disbursement: / /

Mailing Address: 1 Hackers Way

City: Menlo Park State: CA Zip Code: 94025

Purpose of Disbursement: Digital Communications, Non-contribution Account

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: _____
Transaction ID : SB29.4312
 Amount of Each Disbursement this Period:
 Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
GOODWERK

A. Jennifer Carroll Foy for Delegate

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. Box 5113

M M M	/	D D D	/	Y Y Y Y Y
10		11		2017

City Woodbridge State VA Zip Code 22194

FEC Identification Number

Purpose of Disbursement
Contribution

C

Candidate Name

Category/
Type

Transaction ID : SB29.4144

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

250.00

Memo Item

B. Jennifer Carroll Foy for Delegate

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. Box 5113

M M M	/	D D D	/	Y Y Y Y Y
11		02		2017

City Woodbridge State VA Zip Code 22194

FEC Identification Number

Purpose of Disbursement
Earmark by George Miller

C

Candidate Name

Category/
Type

Transaction ID : SB29.4542

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

3.33

Memo Item

C. Jennifer Carroll Foy for Delegate

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. Box 5113

M M M	/	D D D	/	Y Y Y Y Y
11		02		2017

City Woodbridge State VA Zip Code 22194

FEC Identification Number

Purpose of Disbursement
Earmark by Jessica Lovejoy

C

Candidate Name

Category/
Type

Transaction ID : SB29.4543

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

8.33

Memo Item

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

261.66

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"/> 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)
GOODWERK

A. Jennifer Carroll Foy for Delegate

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 5113

City Woodbridge State VA Zip Code 22194

Purpose of Disbursement
Earmark by Jacob Mikva Rosenberg

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4544**

Amount of Each Disbursement this Period: 8.34

Memo Item

B. Jennifer Carroll Foy for Delegate

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 5113

City Woodbridge State VA Zip Code 22194

Purpose of Disbursement
Earmark by Rachel Mikva Rosenberg

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4545**

Amount of Each Disbursement this Period: 166.67

Memo Item

C. Jennifer Carroll Foy for Delegate

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 5113

City Woodbridge State VA Zip Code 22194

Purpose of Disbursement
Earmark by Rachel Mikva Rosenberg

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4546**

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 675.01

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Jennifer Carroll Foy for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 5113		FEC Identification Number C [] Transaction ID : SB29.4547
City Woodbridge	State VA	Zip Code 22194
Purpose of Disbursement Earmark by Andrea McPike		Amount of Each Disbursement this Period [] 8.33
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jennifer Carroll Foy for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 5113		FEC Identification Number C [] Transaction ID : SB29.4548
City Woodbridge	State VA	Zip Code 22194
Purpose of Disbursement Earmark by Elizabeth Smith		Amount of Each Disbursement this Period [] 1.67
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jennifer Carroll Foy for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 5113		FEC Identification Number C [] Transaction ID : SB29.4549
City Woodbridge	State VA	Zip Code 22194
Purpose of Disbursement Earmark by George Miller		Amount of Each Disbursement this Period [] 1.66
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 11.66
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Jennifer Carroll Foy for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 5113		FEC Identification Number C
City Woodbridge	State VA	
Purpose of Disbursement Earmark by Toby Fallsgraff		Transaction ID : SB29.4550
Candidate Name		Amount of Each Disbursement this Period 8.33
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Jennifer Carroll Foy for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 5113		FEC Identification Number C
City Woodbridge	State VA	
Purpose of Disbursement Earmark by John Pawlikowski		Transaction ID : SB29.4551
Candidate Name		Amount of Each Disbursement this Period 8.34
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Jennifer Carroll Foy for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 5113		FEC Identification Number C
City Woodbridge	State VA	
Purpose of Disbursement Earmark by Betsy Torop		Transaction ID : SB29.4552
Candidate Name		Amount of Each Disbursement this Period 8.33
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	25.00
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"/> 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)
GOODWERK

A. Jennifer Carroll Foy for Delegate

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 5113

City Woodbridge State VA Zip Code 22194

Purpose of Disbursement Earmark by Elizabeth Frey

Candidate Name

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

State: District:

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB29.4554

Amount of Each Disbursement this Period: 8.33

Memo Item

B. Jennifer Carroll Foy for Delegate

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 5113

City Woodbridge State VA Zip Code 22194

Purpose of Disbursement Earmark by Larry Greenfield

Candidate Name

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

State: District:

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB29.4557

Amount of Each Disbursement this Period: 8.34

Memo Item

C. Jennifer Carroll Foy for Delegate

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 5113

City Woodbridge State VA Zip Code 22194

Purpose of Disbursement Earmark by Patrick Mauro

Candidate Name

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

State: District:

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB29.4558

Amount of Each Disbursement this Period: 33.33

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 50.00

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Jennifer Carroll Foy for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 5113		FEC Identification Number C [] Transaction ID : SB29.4559
City Woodbridge	State VA	Zip Code 22194
Purpose of Disbursement Earmark by Hope Ratner		Amount of Each Disbursement this Period [] 8.33
Candidate Name		Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Jennifer Carroll Foy for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 5113		FEC Identification Number C [] Transaction ID : SB29.4562
City Woodbridge	State VA	Zip Code 22194
Purpose of Disbursement Earmark by Laurie Mikva		Amount of Each Disbursement this Period [] 33.33
Candidate Name		Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Jennifer Carroll Foy for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 5113		FEC Identification Number C [] Transaction ID : SB29.4563
City Woodbridge	State VA	Zip Code 22194
Purpose of Disbursement Earmark by Ainsley Faux		Amount of Each Disbursement this Period [] 8.34
Candidate Name		Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 50.00
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Jennifer Carroll Foy for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 5113		FEC Identification Number C [] Transaction ID : SB29.4564
City Woodbridge	State VA	Zip Code 22194
Purpose of Disbursement Earmark by Roseanne Costantino		Amount of Each Disbursement this Period [] 8.33
Candidate Name		Memo Item <input type="checkbox"/>
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jennifer Carroll Foy for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 5113		FEC Identification Number C [] Transaction ID : SB29.4565
City Woodbridge	State VA	Zip Code 22194
Purpose of Disbursement Earmark by Marilyn Price		Amount of Each Disbursement this Period [] 16.67
Candidate Name		Memo Item <input type="checkbox"/>
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jennifer Carroll Foy for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 5113		FEC Identification Number C [] Transaction ID : SB29.4566
City Woodbridge	State VA	Zip Code 22194
Purpose of Disbursement Earmark by Hannah Meyer		Amount of Each Disbursement this Period [] 8.33
Candidate Name		Memo Item <input type="checkbox"/>
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 33.33
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"/> 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)
GOODWERK

A. Jennifer Carroll Foy for Delegate

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 5113

City Woodbridge State VA Zip Code 22194

Purpose of Disbursement Earmark by Mary Mikva

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB29.4567

Amount of Each Disbursement this Period: 16.67

Memo Item

B. Jennifer Carroll Foy for Delegate

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 5113

City Woodbridge State VA Zip Code 22194

Purpose of Disbursement Earmark by John Rollert

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB29.4569

Amount of Each Disbursement this Period: 8.33

Memo Item

C. Jennifer Carroll Foy for Delegate

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 5113

City Woodbridge State VA Zip Code 22194

Purpose of Disbursement Earmark by Joel Brandzel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB29.4571

Amount of Each Disbursement this Period: 8.34

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 33.34

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Justin Fairfax for Lt. Governor		Date of Disbursement MM / DD / YYYY 10 / 09 / 2017
Mailing Address P.O. Box 48		FEC Identification Number C [REDACTED] Transaction ID : SB29.4486
City Fairfax	State VA	Zip Code 22038
Purpose of Disbursement Earmark by Nick Alesandro		Amount of Each Disbursement this Period [REDACTED] 10.00
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Karrar, Ahmed, , ,		Date of Disbursement MM / DD / YYYY 10 / 13 / 2017
Mailing Address 129 E. Bellevue Place #302		FEC Identification Number C [REDACTED] Transaction ID : SB29.4258
City Chicago	State IL	Zip Code 60611
Purpose of Disbursement Intern Stipend, Non-contribution Account		Amount of Each Disbursement this Period [REDACTED] 400.00
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Karrar, Ahmed, , ,		Date of Disbursement MM / DD / YYYY 11 / 03 / 2017
Mailing Address 129 E. Bellevue Place #302		FEC Identification Number C [REDACTED] Transaction ID : SB29.4260
City Chicago	State IL	Zip Code 60611
Purpose of Disbursement Intern Stipend, Non-contribution Account		Amount of Each Disbursement this Period [REDACTED] 400.00
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

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

[REDACTED] 810.00

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

[REDACTED]

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Karrar, Ahmed, , ,		Date of Disbursement MM / DD / YYYY 11 / 17 / 2017	
Mailing Address 129 E. Bellevue Place #302		FEC Identification Number C [] Transaction ID : SB29.4262	
City Chicago	State IL	Zip Code 60611	Amount of Each Disbursement this Period [] 400.00
Purpose of Disbursement Intern Stipend, Non-contribution Account		Category/ Type []	Memo Item <input type="checkbox"/>
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. Karrar, Ahmed, , ,		Date of Disbursement MM / DD / YYYY 12 / 19 / 2017	
Mailing Address 129 E. Bellevue Place #302		FEC Identification Number C [] Transaction ID : SB29.4264	
City Chicago	State IL	Zip Code 60611	Amount of Each Disbursement this Period [] 400.00
Purpose of Disbursement Intern Stipend, Non-contribution Account		Category/ Type []	Memo Item <input type="checkbox"/>
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) C. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 10 / 09 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4491	
City Springfield	State VA	Zip Code 22152	Amount of Each Disbursement this Period [] 50.00
Purpose of Disbursement Earmark by Jacob Mikva Rosenberg		Category/ Type []	Memo Item <input type="checkbox"/>
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:			

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

850.00

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 10 / 11 / 2017
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4142 Amount of Each Disbursement this Period [] 250.00
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Contribution		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4492 Amount of Each Disbursement this Period [] 3.34
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Earmark by George Miller		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4494 Amount of Each Disbursement this Period [] 8.33
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Earmark by Jessica Lovejoy		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 261.67
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4495 Amount of Each Disbursement this Period [] 8.33	
City Springfield	State VA	Zip Code 22152	Category/ Type []
Purpose of Disbursement Earmark by Jacob Mikva Rosenberg		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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4497 Amount of Each Disbursement this Period [] 166.66	
City Springfield	State VA	Zip Code 22152	Category/ Type []
Purpose of Disbursement Earmark by Rachel Mikva Rosenberg		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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4498 Amount of Each Disbursement this Period [] 500.00	
City Springfield	State VA	Zip Code 22152	Category/ Type []
Purpose of Disbursement Earmark by Rachel Mikva Rosenberg		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:	<input type="checkbox"/> Memo Item

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

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

[] 674.99
[]

**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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4499	
City Springfield	State VA	Zip Code 22152	Amount of Each Disbursement this Period [] 8.34
Purpose of Disbursement Earmark by Andrea McPike		Category/ Type []	Memo Item <input type="checkbox"/>
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. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4500	
City Springfield	State VA	Zip Code 22152	Amount of Each Disbursement this Period [] 1.67
Purpose of Disbursement Earmark by Elizabeth Smith		Category/ Type []	Memo Item <input type="checkbox"/>
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) C. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4501	
City Springfield	State VA	Zip Code 22152	Amount of Each Disbursement this Period [] 1.67
Purpose of Disbursement Earmark by George Miller		Category/ Type []	Memo Item <input type="checkbox"/>
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 11.68
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4502 Amount of Each Disbursement this Period [] 8.33	
City Springfield	State VA	Zip Code 22152	Category/ Type []
Purpose of Disbursement Earmark by Toby Fallsgraff		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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4503 Amount of Each Disbursement this Period [] 8.33	
City Springfield	State VA	Zip Code 22152	Category/ Type []
Purpose of Disbursement Earmark by John Pawlikowski		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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4504 Amount of Each Disbursement this Period [] 8.34	
City Springfield	State VA	Zip Code 22152	Category/ Type []
Purpose of Disbursement Earmark by Betsy Torop		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:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶	[] 25.00
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4505 Amount of Each Disbursement this Period [] 8.33
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Earmark by Elizabeth Frey		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4506 Amount of Each Disbursement this Period [] 8.33
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Earmark by Larry Greenfield		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4507 Amount of Each Disbursement this Period [] 33.34
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Earmark by Patrick Mauro		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 50.00
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4508 Amount of Each Disbursement this Period [] 8.33	
City Springfield	State VA	Zip Code 22152	Category/ Type []
Purpose of Disbursement Earmark by Hope Ratner		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) ▼		<input type="checkbox"/> Memo Item
State: []	District: []		

Full Name (Last, First, Middle Initial) B. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4511 Amount of Each Disbursement this Period [] 33.33	
City Springfield	State VA	Zip Code 22152	Category/ Type []
Purpose of Disbursement Earmark by Laurie Mikva		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) ▼		<input type="checkbox"/> Memo Item
State: []	District: []		

Full Name (Last, First, Middle Initial) C. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4512 Amount of Each Disbursement this Period [] 8.33	
City Springfield	State VA	Zip Code 22152	Category/ Type []
Purpose of Disbursement Earmark by Ainsley Faux		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) ▼		<input type="checkbox"/> Memo Item
State: []	District: []		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 49.99
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4513 Amount of Each Disbursement this Period [] 8.34
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Earmark by Roseanne Costantino		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4514 Amount of Each Disbursement this Period [] 16.66
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Earmark by Marilyn Price		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 2731		FEC Identification Number C [] Transaction ID : SB29.4515 Amount of Each Disbursement this Period [] 8.33
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Earmark by Hannah Meyer		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

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

[] 33.33

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 2731		FEC Identification Number C [REDACTED] Transaction ID : SB29.4516 Amount of Each Disbursement this Period 16.67
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Earmark by Mary Mikva		Category/ Type
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 2731		FEC Identification Number C [REDACTED] Transaction ID : SB29.4568 Amount of Each Disbursement this Period 8.34
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Earmark by John Rollert		Category/ Type
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Kathy Tran for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 2731		FEC Identification Number C [REDACTED] Transaction ID : SB29.4570 Amount of Each Disbursement this Period 8.33
City Springfield	State VA	Zip Code 22152
Purpose of Disbursement Earmark by Joel Brandzel		Category/ Type
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	33.34
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 6000		FEC Identification Number C [REDACTED] Transaction ID : SB29.4509
City Glen Allen	State VA	Zip Code 23058
Purpose of Disbursement Earmark by Joel Brandzel		Amount of Each Disbursement this Period [REDACTED] 8.33
Candidate Name		<input type="checkbox"/> Memo Item
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. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 6000		FEC Identification Number C [REDACTED] Transaction ID : SB29.4510
City Glen Allen	State VA	Zip Code 23058
Purpose of Disbursement Earmark by John Rollert		Amount of Each Disbursement this Period [REDACTED] 8.33
Candidate Name		<input type="checkbox"/> Memo Item
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) C. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 6000		FEC Identification Number C [REDACTED] Transaction ID : SB29.4517
City Glen Allen	State VA	Zip Code 23058
Purpose of Disbursement Earmark by George Miller		Amount of Each Disbursement this Period [REDACTED] 3.33
Candidate Name		<input type="checkbox"/> Memo Item
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:		

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

19.99

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 6000		FEC Identification Number C [] Transaction ID : SB29.4518	
City Glen Allen	State VA	Zip Code 23058	Amount of Each Disbursement this Period [] 8.34
Purpose of Disbursement Earmark by Jessica Lovejoy		Category/ Type []	Memo Item <input type="checkbox"/>
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. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 6000		FEC Identification Number C [] Transaction ID : SB29.4519	
City Glen Allen	State VA	Zip Code 23058	Amount of Each Disbursement this Period [] 8.33
Purpose of Disbursement Earmark by Jacob Mikva Rosenberg		Category/ Type []	Memo Item <input type="checkbox"/>
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) C. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 6000		FEC Identification Number C [] Transaction ID : SB29.4520	
City Glen Allen	State VA	Zip Code 23058	Amount of Each Disbursement this Period [] 166.67
Purpose of Disbursement Earmark by Rachel Mikva Rosenberg		Category/ Type []	Memo Item <input type="checkbox"/>
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 183.34
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial)
A. Melissa Dart for Delegate

Mailing Address P.O. Box 6000

City: Glen Allen State: VA Zip Code: 23058

Purpose of Disbursement: Earmark by Rachel Mikva Rosenberg

Candidate Name: _____

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

State: _____ District: _____

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: **C**

Transaction ID : **SB29.4521**

Amount of Each Disbursement this Period: 500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Melissa Dart for Delegate

Mailing Address P.O. Box 6000

City: Glen Allen State: VA Zip Code: 23058

Purpose of Disbursement: Earmark by Andrea McPike

Candidate Name: _____

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

State: _____ District: _____

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: **C**

Transaction ID : **SB29.4522**

Amount of Each Disbursement this Period: 8.33

Memo Item

Full Name (Last, First, Middle Initial)
C. Melissa Dart for Delegate

Mailing Address P.O. Box 6000

City: Glen Allen State: VA Zip Code: 23058

Purpose of Disbursement: Earmark by Elizabeth Smith

Candidate Name: _____

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

State: _____ District: _____

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: **C**

Transaction ID : **SB29.4524**

Amount of Each Disbursement this Period: 1.66

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 509.99

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"/> 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)
GOODWERK

A. Melissa Dart for Delegate

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 6000

City: Glen Allen, State: VA, Zip Code: 23058

Purpose of Disbursement: Earmark by George Miller

Candidate Name: _____

Office Sought: House, Senate, President
State: _____ District: _____

Disbursement For: Primary, General, Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: **C** _____
Transaction ID : **SB29.4525**
Amount of Each Disbursement this Period: 1.67

Memo Item

B. Melissa Dart for Delegate

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 6000

City: Glen Allen, State: VA, Zip Code: 23058

Purpose of Disbursement: Earmark by Toby Fallsgraff

Candidate Name: _____

Office Sought: House, Senate, President
State: _____ District: _____

Disbursement For: Primary, General, Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: **C** _____
Transaction ID : **SB29.4526**
Amount of Each Disbursement this Period: 8.34

Memo Item

C. Melissa Dart for Delegate

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 6000

City: Glen Allen, State: VA, Zip Code: 23058

Purpose of Disbursement: Earmark by John Pawlikowski

Candidate Name: _____

Office Sought: House, Senate, President
State: _____ District: _____

Disbursement For: Primary, General, Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: **C** _____
Transaction ID : **SB29.4527**
Amount of Each Disbursement this Period: 8.33

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 18.34

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 6000		FEC Identification Number C [] Transaction ID : SB29.4528 Amount of Each Disbursement this Period [] 8.33	
City Glen Allen	State VA	Zip Code 23058	Category/ Type []
Purpose of Disbursement Earmark by Betsy Torop			
Candidate Name		Memo Item <input type="checkbox"/>	
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. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 6000		FEC Identification Number C [] Transaction ID : SB29.4529 Amount of Each Disbursement this Period [] 8.34	
City Glen Allen	State VA	Zip Code 23058	Category/ Type []
Purpose of Disbursement Earmark by Elizabeth Frey			
Candidate Name		Memo Item <input type="checkbox"/>	
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) C. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address P.O. Box 6000		FEC Identification Number C [] Transaction ID : SB29.4530 Amount of Each Disbursement this Period [] 8.33	
City Glen Allen	State VA	Zip Code 23058	Category/ Type []
Purpose of Disbursement Earmark by Larry Greenfield			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 25.00
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 6000		FEC Identification Number C
City Glen Allen	State VA	
Purpose of Disbursement Earmark by Patrick Mauro		Transaction ID : SB29.4531
Candidate Name		Amount of Each Disbursement this Period 33.33
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 6000		FEC Identification Number C
City Glen Allen	State VA	
Purpose of Disbursement Earmark by Hope Ratner		Transaction ID : SB29.4532
Candidate Name		Amount of Each Disbursement this Period 8.34
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 6000		FEC Identification Number C
City Glen Allen	State VA	
Purpose of Disbursement Earmark by Laurie Mikva		Transaction ID : SB29.4534
Candidate Name		Amount of Each Disbursement this Period 33.34
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	75.01
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"/> 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)
GOODWERK

A. Melissa Dart for Delegate

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 6000

City: Glen Allen, State: VA, Zip Code: 23058

Purpose of Disbursement: Earmark by Ainsley Faux

Candidate Name: _____

Office Sought: House, Senate, President
State: _____ District: _____

Disbursement For: Primary, General, Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: **C** _____
Transaction ID : **SB29.4535**
Amount of Each Disbursement this Period: 8.33

Memo Item

B. Melissa Dart for Delegate

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 6000

City: Glen Allen, State: VA, Zip Code: 23058

Purpose of Disbursement: Earmark by Roseanne Costantino

Candidate Name: _____

Office Sought: House, Senate, President
State: _____ District: _____

Disbursement For: Primary, General, Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: **C** _____
Transaction ID : **SB29.4536**
Amount of Each Disbursement this Period: 8.33

Memo Item

C. Melissa Dart for Delegate

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 6000

City: Glen Allen, State: VA, Zip Code: 23058

Purpose of Disbursement: Earmark by Marilyn Price

Candidate Name: _____

Office Sought: House, Senate, President
State: _____ District: _____

Disbursement For: Primary, General, Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: **C** _____
Transaction ID : **SB29.4539**
Amount of Each Disbursement this Period: 16.67

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 33.33

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 6000		FEC Identification Number C [] Transaction ID : SB29.4540
City Glen Allen	State VA	Zip Code 23058
Purpose of Disbursement Earmark by Hannah Meyer		Amount of Each Disbursement this Period [] 8.34
Candidate Name		Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Melissa Dart for Delegate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address P.O. Box 6000		FEC Identification Number C [] Transaction ID : SB29.4541
City Glen Allen	State VA	Zip Code 23058
Purpose of Disbursement Earmark by Mary Mikva		Amount of Each Disbursement this Period [] 16.66
Candidate Name		Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Mikva Rosenberg, Jacob, H., ,		Date of Disbursement MM / DD / YYYY 09 / 13 / 2017
Mailing Address 73 E. Lake Street #3001		FEC Identification Number C [] Transaction ID : SB29.4219
City Chicago	State IL	Zip Code 60601
Purpose of Disbursement Website Design & Development, Non-contribution Account		Amount of Each Disbursement this Period [] 2472.00
Candidate Name		Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2497.00
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"/> 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)
GOODWERK

A. Collectively LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1505 Lexington Ave, 2A

City New York State NY Zip Code 10029

Purpose of Disbursement Website Design & Development, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 13 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4219.0**

Amount of Each Disbursement this Period: 2472.00

Memo Item

B. Miller, George, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4304 N. Ashland Ave. #2WA

City Chicago State IL Zip Code 60613

Purpose of Disbursement Digital Communications, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 03 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4278**

Amount of Each Disbursement this Period: 800.00

Memo Item

C. Miller, George, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4304 N. Ashland Ave. #2WA

City Chicago State IL Zip Code 60613

Purpose of Disbursement Digital Communications, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 17 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4283**

Amount of Each Disbursement this Period: 800.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1600.00

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"/> 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)
GOODWERK

A. Murphy, Meaghan, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5500 S Everett Ave, #3

City Chicago State IL Zip Code 60637

Purpose of Disbursement
Media Consulting, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 14 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4196**

Amount of Each Disbursement this Period: 2320.00

Memo Item

B. Northam for Governor

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 16249

City Arlington State VA Zip Code 22215

Purpose of Disbursement
Earmark by Jacob Mikva Rosenberg

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 09 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4476**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. Northam for Governor

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 16249

City Arlington State VA Zip Code 22215

Purpose of Disbursement
Earmark by Chip Kennedy

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 09 / 2017

FEC Identification Number: C

Transaction ID : **SB29.4478**

Amount of Each Disbursement this Period: 3.10

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2348.10

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"/> 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)
GOODWERK

A. Northam for Governor

Full Name (Last, First, Middle Initial)
Northam for Governor

Mailing Address P.O. Box 16249

City Arlington State VA Zip Code 22215

Purpose of Disbursement
Earmark by Jacob Mikva Rosenberg

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 09 / 2017

FEC Identification Number: C
Transaction ID : SB29.4479

Amount of Each Disbursement this Period: 5.00

Memo Item

B. Northam for Governor

Full Name (Last, First, Middle Initial)
Northam for Governor

Mailing Address P.O. Box 16249

City Arlington State VA Zip Code 22215

Purpose of Disbursement
Earmark by Jacob Mikva Rosenberg

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 09 / 2017

FEC Identification Number: C
Transaction ID : SB29.4480

Amount of Each Disbursement this Period: 50.00

Memo Item

C. Perkins Coie

Full Name (Last, First, Middle Initial)
Perkins Coie

Mailing Address 1201 Third Avenue Suite 4900

City Seattle State WA Zip Code 98101

Purpose of Disbursement
Legal Services, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 23 / 2017

FEC Identification Number: C
Transaction ID : SB29.4206

Amount of Each Disbursement this Period: 1350.21

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1405.21

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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Perkins Coie		Date of Disbursement MM / DD / YYYY 10 / 02 / 2017
Mailing Address 1201 Third Avenue Suite 4900		FEC Identification Number C [] Transaction ID : SB29.4225 Amount of Each Disbursement this Period [] 2981.88
City Seattle	State WA	Zip Code 98101
Purpose of Disbursement Legal Services, Non-contribution Account		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Perkins Coie		Date of Disbursement MM / DD / YYYY 10 / 30 / 2017
Mailing Address 1201 Third Avenue Suite 4900		FEC Identification Number C [] Transaction ID : SB29.4270 Amount of Each Disbursement this Period [] 500.40
City Seattle	State WA	Zip Code 98101
Purpose of Disbursement Legal Services, Non-contribution Account		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Pfander, Samantha, , ,		Date of Disbursement MM / DD / YYYY 10 / 13 / 2017
Mailing Address 1837 W. Evergreen Avenue #2F		FEC Identification Number C [] Transaction ID : SB29.4252 Amount of Each Disbursement this Period [] 400.00
City Chicago	State IL	Zip Code 60622
Purpose of Disbursement Intern Stipend, Non-contribution Account		Category/ Type []
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 3882.28
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"/> 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)
GOODWERK

Full Name (Last, First, Middle Initial) A. Pfander, Samantha, , ,		Date of Disbursement MM / DD / YYYY 11 / 03 / 2017	
Mailing Address 1837 W. Evergreen Avenue #2F		FEC Identification Number C [] Transaction ID : SB29.4254 Amount of Each Disbursement this Period [] 400.00	
City Chicago	State IL	Zip Code 60622	Category/ Type []
Purpose of Disbursement Intern Stipend, Non-contribution Account			
Candidate Name		Memo Item <input type="checkbox"/>	
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. Pfander, Samantha, , ,		Date of Disbursement MM / DD / YYYY 11 / 17 / 2017	
Mailing Address 1837 W. Evergreen Avenue #2F		FEC Identification Number C [] Transaction ID : SB29.4256 Amount of Each Disbursement this Period [] 400.00	
City Chicago	State IL	Zip Code 60622	Category/ Type []
Purpose of Disbursement Intern Stipend, Non-contribution Account			
Candidate Name		Memo Item <input type="checkbox"/>	
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) C. Smith, Elizabeth, , ,		Date of Disbursement MM / DD / YYYY 11 / 03 / 2017	
Mailing Address 3809 Brighton Road		FEC Identification Number C [] Transaction ID : SB29.4248 Amount of Each Disbursement this Period [] 160.00	
City Nashville	State TN	Zip Code 37205	Category/ Type []
Purpose of Disbursement Intern Stipend, Non-contribution Account			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 960.00
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"/> 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)
GOODWERK

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

Mailing Address 3809 Brighton Road

City Nashville State TN Zip Code 37205

Purpose of Disbursement
Intern Stipend, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 17 / 2017

FEC Identification Number: C
Transaction ID : **SB29.4250**
Amount of Each Disbursement this Period: 160.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Virginians for Mark Herring

Mailing Address P.O. Box 503

City Richmond State VA Zip Code 23218

Purpose of Disbursement
Earmark by Chip Kennedy

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 09 / 2017

FEC Identification Number: C
Transaction ID : **SB29.4489**
Amount of Each Disbursement this Period: 1.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Virginians for Mark Herring

Mailing Address P.O. Box 503

City Richmond State VA Zip Code 23218

Purpose of Disbursement
Earmark by Jacob Mikva Rosenberg

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 09 / 2017

FEC Identification Number: C
Transaction ID : **SB29.4490**
Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 261.00

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"/> 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)
GOODWERK

A. Wasik, Sarah, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1278 Prairie Orchid Lane

City Grayslake State IL Zip Code 60030

Purpose of Disbursement Intern Stipend, Non-contribution Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB29.4240

Amount of Each Disbursement this Period: 160.00

Memo Item

B. Wasik, Sarah, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1278 Prairie Orchid Lane

City Grayslake State IL Zip Code 60030

Purpose of Disbursement Intern Stipend, Non-contribution Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 17 / 2017

FEC Identification Number: C

Transaction ID : SB29.4242

Amount of Each Disbursement this Period: 160.00

Memo Item

C. Wasik, Sarah, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1278 Prairie Orchid Lane

City Grayslake State IL Zip Code 60030

Purpose of Disbursement Intern Stipend, Non-contribution Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2017

FEC Identification Number: C

Transaction ID : SB29.4244

Amount of Each Disbursement this Period: 360.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 680.00

TOTAL This Period (last page this line number only)..... ▶ 61337.03