



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Oceans PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		117805.71
(b) Cash on Hand at Beginning of Reporting Period.....	93107.06	
(c) Total Receipts (from Line 19) .....	35602.39	63048.57
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	128709.45	180854.28
7. Total Disbursements (from Line 31).....	73148.63	125293.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	55560.82	55560.82
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Oceans PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 03 / 01 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

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).....	31500.00	57624.18
(ii) Unitemized .....	4102.39	5424.39
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	35602.39	63048.57
(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) .....	35602.39	63048.57
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	35602.39	63048.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	35602.39	63048.57

**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 .....	18644.40	45769.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	18644.40	45769.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	54500.00	79500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	4.23	24.23
(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)).....	4.23	24.23
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	73148.63	125293.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	73148.63	125293.46

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	35602.39	63048.57
34. Total Contribution Refunds (from Line 28(d)) .....	4.23	24.23
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	35598.16	63024.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	18644.40	45769.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	18644.40	45769.23

**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 21
<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)  
**Oceans PAC**

Full Name (Last, First, Middle Initial) <b>A. James Cecchi</b>		Date of Receipt MM / DD / YYYY 03 / 28 / 2014 <b>Transaction ID : C9455043</b>
Mailing Address 8 Rensselaer Road		Amount of Each Receipt this Period 5000.00
City Essex Falls	State NJ	Zip Code 07021
FEC ID number of contributing federal political committee. C	Name of Employer Carella Byrne	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Jay W. Eisenhofer</b>		Date of Receipt MM / DD / YYYY 03 / 24 / 2014 <b>Transaction ID : C9455598</b>
Mailing Address 485 Lexington Ave 29th floor		Amount of Each Receipt this Period 5000.00
City New York	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C	Name of Employer Grant & Eisenhofer	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. William Oldaker</b>		Date of Receipt MM / DD / YYYY 03 / 24 / 2014 <b>Transaction ID : C9455602</b>
Mailing Address 11001 Piney Meetinghouse Road		Amount of Each Receipt this Period 1000.00
City Potomac	State MD	Zip Code 20854
FEC ID number of contributing federal political committee. C	Name of Employer Oldaker Law Group, LLP	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 21
	<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
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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial)  
**A. Greg Serrurier**

Mailing Address 528 Berkeley Ave

City Menlo Park State CA Zip Code 94025

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

Name of Employer Dodge & Cox Occupation Investment Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4312.09

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : C9430503**

Amount of Each Receipt this Period  
4000.00

Full Name (Last, First, Middle Initial)  
**B. Nancy Serrurier**

Mailing Address 528 Berkeley Ave

City Menlo Park State CA Zip Code 94025

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

Name of Employer N/A Occupation Community Volunteer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : C9430498**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. Nicholas Godley**

Mailing Address 350 Albany St 12D

City New York State NY Zip Code 10280

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

Name of Employer Godley & Peers Occupation Partner

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  
 03 / 29 / 2014

**Transaction ID : C9464952A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

**A. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
	Conduit total listed in Agg. field

Aggregate Year-to-Date ▼ 5577.39

Receipt For:  
 Primary  General  
 Other (specify) ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : C9464952AB**

Amount of Each Receipt this Period  

500.00
--------

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B. Robert Raben**  
Full Name (Last, First, Middle Initial)  
Mailing Address 213 E Street NE

City Washington	State DC	Zip Code 20002
--------------------	-------------	-------------------

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

Name of Employer The Raben Group	Occupation President/Founder
	Conduit total listed in Agg. field

Aggregate Year-to-Date ▼ 500.00

Receipt For:  
 Primary  General  
 Other (specify) ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : C9464948A**

Amount of Each Receipt this Period  

500.00
--------

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
	Conduit total listed in Agg. field

Aggregate Year-to-Date ▼ 5577.39

Receipt For:  
 Primary  General  
 Other (specify) ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : C9464948AB**

Amount of Each Receipt this Period  

500.00
--------

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial)  
**A. Bernstein, Litowitz, Berger & Grossman, LLP**

Mailing Address 1285 Avenue of the Americas

City	State	Zip Code
New York	NY	10019

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

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	24	/	2014

**Transaction ID : C9465013**

Amount of Each Receipt this Period  
5000.00

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)  
**B. Max Berger**

Mailing Address 1285 Avenue of the Americas

City	State	Zip Code
New York	NY	10019

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

Name of Employer	Occupation
Benstein, Litowitz, Berger & Grossman,	Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	24	/	2014

**Transaction ID : C9465016**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)  
**C. Salvatore Graziano**

Mailing Address 1285 Avenue of the Americas

City	State	Zip Code
New York	NY	10019

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

Name of Employer	Occupation
Benstein, Litowitz, Berger & Grossman,	Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	24	/	2014

**Transaction ID : C9465019**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
\*

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial)  
**A. Mark Lebovitch**

Mailing Address 1285 Avenue of the Americas

City New York	State NY	Zip Code 10019
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FEC ID number of contributing federal political committee. **C**

Name of Employer Benstein, Litowitz, Berger & Grossman,	Occupation Partner
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014

Transaction ID : **C9465032**

Amount of Each Receipt this Period  
1000.00

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)  
**B. Blair Nichols**

Mailing Address 1285 Avenue of the Americas

City New York	State NY	Zip Code 10019
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FEC ID number of contributing federal political committee. **C**

Name of Employer Benstein, Litowitz, Berger & Grossman,	Occupation Partner
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014

Transaction ID : **C9465026**

Amount of Each Receipt this Period  
1000.00

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)  
**C. Gerald Silk**

Mailing Address 1285 Avenue of the Americas

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

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

Name of Employer Benstein, Litowitz, Berger & Grossman,	Occupation Partner
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014

Transaction ID : **C9465023**

Amount of Each Receipt this Period  
1000.00

[MEMO ITEM]  
\*

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial) <b>A. Labaton Sucharow, LLP</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2014 <b>Transaction ID : C9465045</b>
Mailing Address 140 Broadway		Amount of Each Receipt this Period 5000.00
City New York	State NY	Zip Code 10005
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
		PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial) <b>B. Eric Belfi</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2014 <b>Transaction ID : C9484208</b>
Mailing Address 140 Broadway		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10005
FEC ID number of contributing federal political committee. C	Name of Employer Labaton Sucharow, LLP	Occupation Partner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
		[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>C. Joel Bernstein</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2014 <b>Transaction ID : C9484199</b>
Mailing Address 140 Broadway		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10005
FEC ID number of contributing federal political committee. C	Name of Employer Labaton Sucharow, LLP	Occupation Partner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
		[MEMO ITEM] *

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

**A. Tom Dubbs**  
Full Name (Last, First, Middle Initial)  
Mailing Address 140 Broadway  
City New York State NY Zip Code 10005  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Labaton Sucharow, LLP Occupation Partner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
03 / 21 / 2014  
Transaction ID : **C9484198**  
Amount of Each Receipt this Period 1000.00  
[MEMO ITEM]  
\*

**B. Chris Keller**  
Full Name (Last, First, Middle Initial)  
Mailing Address 140 Broadway  
City New York State NY Zip Code 10005  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Labaton Sucharow, LLP Occupation Partner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
03 / 21 / 2014  
Transaction ID : **C9484202**  
Amount of Each Receipt this Period 1000.00  
[MEMO ITEM]  
\*

**C. Lawrence Sucharow**  
Full Name (Last, First, Middle Initial)  
Mailing Address 140 Broadway  
City New York State NY Zip Code 10005  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Labaton Sucharow, LLP Occupation Partner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
03 / 21 / 2014  
Transaction ID : **C9484196**  
Amount of Each Receipt this Period 1000.00  
[MEMO ITEM]  
\*

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	31500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D430229**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D430669**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D430696**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement  
Credit Card Processing Fee

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  
03 / 16 / 2014

Transaction ID : **D430874**

Amount of Each Disbursement this Period

32.38

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement  
Credit Card Processing Fee

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  
03 / 23 / 2014

Transaction ID : **D431255**

Amount of Each Disbursement this Period

16.00

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement  
Credit Card Processing Fee

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  
03 / 31 / 2014

Transaction ID : **D431257**

Amount of Each Disbursement this Period

96.92

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

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

145.30

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Finance Consultants**

Mailing Address 10 G Street, NW  
Suite 570

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Fundraising Consulting & Fundraising Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : D429798**

Amount of Each Disbursement this Period

6858.37

Full Name (Last, First, Middle Initial)

**B. Merchant Account Services**

Mailing Address P.O. Box 6600

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : D432829**

Amount of Each Disbursement this Period

49.95

Full Name (Last, First, Middle Initial)

**C. Perkins Coie, LLP**

Mailing Address 1201 Third Avenue  
Suite 4900

City Seattle State WA Zip Code 98101

Purpose of Disbursement  
Legal & Compliance Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2014

**Transaction ID : D430228**

Amount of Each Disbursement this Period

9047.44

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

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

15955.76

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial)

**A. Trilogy Interactive, LLC**

Mailing Address PO Box 4177

City Mountain View State CA Zip Code 94040

Purpose of Disbursement  
Internet Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : D431140**

Amount of Each Disbursement this Period

2440.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2440.00

18622.42

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial)

**A. Cicilline Committee**

Mailing Address One Park Row  
5th Floor

City Providence State RI Zip Code 02903

Purpose of Disbursement  
Contribution

Candidate Name  
**David N. Cicilline**

Office Sought:  House  
 Senate  
 President  
State: RI District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	4

**Transaction ID : D430931**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**B. Corry Westbrook for Congress**

Mailing Address 1127 21st Street

City Vero Beach State FL Zip Code 32960

Purpose of Disbursement  
Contribution

Candidate Name  
**Corry Westbrook**

Office Sought:  House  
 Senate  
 President  
State: FL District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	4

**Transaction ID : D430933**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Corry Westbrook for Congress**

Mailing Address 1127 21st Street

City Vero Beach State FL Zip Code 32960

Purpose of Disbursement  
Contribution

Candidate Name  
**Corry Westbrook**

Office Sought:  House  
 Senate  
 President  
State: FL District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	4

**Transaction ID : D430934**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial)

**A. Domina for Nebraska Inc.**

Mailing Address 2425 S 144th Street  
1st Floor

City Omaha State NE Zip Code 68144

Purpose of Disbursement  
Contribution

Candidate Name  
**David A. Domina**

Office Sought:  House  
 Senate  
 President  
State: NE District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2014

**Transaction ID : D430932**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Jeff Merkley For Oregon**

Mailing Address PO Box 14172

City Portland State OR Zip Code 97293

Purpose of Disbursement  
Contribution

Candidate Name  
**Jeffrey Merkley**

Office Sought:  House  
 Senate  
 President  
State: OR District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2014

**Transaction ID : D430939**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Jeff Merkley For Oregon**

Mailing Address PO Box 14172

City Portland State OR Zip Code 97293

Purpose of Disbursement  
Contribution

Candidate Name  
**Jeffrey Merkley**

Office Sought:  House  
 Senate  
 President  
State: OR District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2014

**Transaction ID : D430892**

Amount of Each Disbursement this Period

5000.00

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

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

12500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial)

**A. John Tierney for Congress**

Mailing Address 133 Washington Street

City Salem State MA Zip Code 01970

Purpose of Disbursement  
Contribution

Candidate Name

**John F. Tierney**

Office Sought:  House  
 Senate  
 President  
State: MA District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2014

**Transaction ID : D430893**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Nunn for Senate**

Mailing Address PO Box 78936

City Atlanta State GA Zip Code 30357

Purpose of Disbursement  
Contribution

Candidate Name

**Michelle Nunn**

Office Sought:  House  
 Senate  
 President  
State: GA District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

**Transaction ID : D432872**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. People for Rick Weiland**

Mailing Address PO Box 1488

City Sioux Falls State SD Zip Code 57105

Purpose of Disbursement  
Contribution

Candidate Name

**Richard P. Weiland**

Office Sought:  House  
 Senate  
 President  
State: SD District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

**Transaction ID : D430940**

Amount of Each Disbursement this Period

2000.00

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

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

12000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial)

**A. Schatz for Senate**

Mailing Address PO Box 3828

City Honolulu State HI Zip Code 96812

Purpose of Disbursement  
Contribution

Candidate Name

**Brian Schatz**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: HI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			27			2014			

**Transaction ID : D430937**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Steve Israel for Congress Committee**

Mailing Address PO Box 1400

City Melville State NY Zip Code 11747

Purpose of Disbursement  
Contribution

Candidate Name

**Steve J. Israel**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			31			2014			

**Transaction ID : D431614**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Udall For Colorado**

Mailing Address P.O. Box 40158

City Denver State CO Zip Code 80204

Purpose of Disbursement  
Contribution

Candidate Name

**Mark E. Udall**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CO District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			13			2014			

**Transaction ID : D430237**

Amount of Each Disbursement this Period

2500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

12500.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Oceans PAC**

Full Name (Last, First, Middle Initial)

**A. Udall For Us All**

Mailing Address P.O. Box 25766

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement  
Contribution

Candidate Name  
**Tom Udall**

Office Sought:  House  
 Senate  
 President  
State: NM District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2014

**Transaction ID : D430938**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Walsh for Montana**

Mailing Address PO Box 1724

City Helena State MT Zip Code 59624

Purpose of Disbursement  
Contribution

Candidate Name  
**John E. Walsh**

Office Sought:  House  
 Senate  
 President  
State: MT District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2014

**Transaction ID : D430936**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

7500.00
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54500.00
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