

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**
L PAC

ADDRESS (number and street) 2120 L Street NW
Suite 850
Washington DC 20037
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00519413 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 [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 / 03 / 2020 in the State of DC

5. Covering Period [MM] / [DD] / [YYYY] 10 / 15 / 2020 through [MM] / [DD] / [YYYY] 11 / 23 / 2020

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

Signature of Treasurer Rosen, Hilary, , , [Electronically Filed] Date 12 / 02 / 2020

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)

Write or Type Committee Name

L 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="2020"/>	<input type="text" value="9498.11"/>	<input type="text" value="9498.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="55945.94"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="96478.04"/>	<input type="text" value="543387.70"/>
(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="152423.98"/>	<input type="text" value="552885.81"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="138035.39"/>	<input type="text" value="538497.22"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14388.59"/>	<input type="text" value="14388.59"/>
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

L PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12130.00	160493.00
(ii) Unitemized	3705.00	17290.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	15835.00	177783.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	12000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	20835.00	189783.50
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.).....	75643.04	353604.20
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)).....▶	96478.04	543387.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	96478.04	543387.70

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	1834.08	11654.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1834.08	11654.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	36500.00
24. Independent Expenditures (use Schedule E)	80000.00	80000.00
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	0.00	600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	600.00
29. Other Disbursements (Including Non-Federal Donations).....	55201.31	409742.38
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)) ..	138035.39	538497.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	138035.39	538497.22

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	20835.00	189783.50
34. Total Contribution Refunds (from Line 28(d))	0.00	600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20835.00	189183.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1834.08	11654.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1834.08	11654.84

**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 42
	<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)
L PAC

A. Allman, Kimberly, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5622 Ogden Rd
 City Bethesda State MD Zip Code 20816-3324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NortonLifeLock Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 26 / 2020
Transaction ID : VNW3HJH9E30
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Aptekar, Denise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Beale St Apt 406
 City San Francisco State CA Zip Code 94105-5004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 10 / 22 / 2020
Transaction ID : VNW3HJH5QQ5
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Boyman, Kym, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1391 Robinson Rd
 City Ferrisburgh State VT Zip Code 05456-9663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vermont Gynecology Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 21 / 2020
Transaction ID : VNW3HJFVSW8
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 7 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Esty, Brittany, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Naples Rd
 City Brookline State MA Zip Code 02446-5851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Boston Childrens Hospital Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 28 / 2020
Transaction ID : VNW3HJHGJF0
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Guthman, Maureen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 395 Riverside Dr Apt 11F
 City New York State NY Zip Code 10025-1892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Black Entertainment Television Occupation (for Individual) SVP Content Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 10 / 23 / 2020
Transaction ID : VNW3HJH6XX2
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Halligan, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 243 Caselli Ave
 City San Francisco State CA Zip Code 94114-2322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Independent Board Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2020
Transaction ID : VNW3HJERP4
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1300.00
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 8 OF 42
	(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

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NAME OF COMMITTEE (In Full)
L PAC

A. Hletko, Valerie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3523 Porter St NW
 City Washington State DC Zip Code 20016-3177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Buckley LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2020
Transaction ID : VNW3HJH7K76
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Hoover, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 Brickell Plz 2912
 City Miami State FL Zip Code 33131-3833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 23 / 2020
Transaction ID : VNW3HJH6XY0
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Hoover, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 Brickell Plz 2912
 City Miami State FL Zip Code 33131-3833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 28 / 2020
Transaction ID : VNW3HJHG991
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 42
	<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)
L PAC

A. Kauffman, Joyce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 Clarendon Park
 City Roslindale State MA Zip Code 02131-4202
 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 250.00

Date of Receipt **10 / 29 / 2020**
Transaction ID : VNW3HJHGZH1
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Kaufmann-Paulman, Sunnie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 Everett St
 City Arlington State MA Zip Code 02474-6904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Greater Boston PFLAG Occupation (for Individual) Executive Director
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 450.00

Date of Receipt **11 / 09 / 2020**
Transaction ID : VNW3HJJC528
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Marks, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Riverside Drive #11 NW Apt 11NW
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Educator Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 600.00

Date of Receipt **10 / 29 / 2020**
Transaction ID : VNW3HJHGYN2
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 42
<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)
L PAC

A. Mattingly, Brett, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 W Newton St
 City Boston State MA Zip Code 02118-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Klocke Estate Holdings, LLC Occupation (for Individual) Farmer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2020
Transaction ID : VNW3HJJC425
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Mondini, Elena J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1326 Laurel Ave
 City Ocean State NJ Zip Code 07712-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2020
Transaction ID : VNW3HJJAKE7
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Morse, Gail, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3739 N Wilton Ave 2
 City Chicago State IL Zip Code 60613-0342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jenner & Block Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 20 / 2020
Transaction ID : VNW3HJD8W26
 Amount of Each Receipt this Period 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1850.00
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 11 OF 42
	(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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Newstat, Joyce, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2020
Mailing Address 1200 California St 27C		Transaction ID : VNW3HJFVV34
City San Francisco	State CA	Zip Code 94109-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Policy Consultant	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pritzker, Jennifer, N, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2020
Mailing Address 104 S Michigan Ave Ste 500		Transaction ID : VNW3HJGN370
City Chicago	State IL	Zip Code 60603-5958
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Tawani Enterprises Inc.	Occupation (for Individual) President & CEO/Retired Army Officer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Roll, Susan, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2020
Mailing Address 19440 Annie Ln		Transaction ID : VNW3HJHDY42
City Reno	State NV	Zip Code 89521-7810
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Self Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
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 12 OF 42
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
L PAC

A. Sarnoff, Rosita, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 180 W 58Th St
8A

City New York	State NY	Zip Code 10019-2145
------------------	-------------	------------------------

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 ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2020

Transaction ID : VNW3HJE6SG5

Amount of Each Receipt this Period
100.00

Memo Item

B. Savarese, Mary, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36 Prospect Ave

City Northampton	State MA	Zip Code 01060-1626
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Northampton MA Teachers Association	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
11	/	18	/	2020

Transaction ID : VNW3HJK9308

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 63 Phillips St
Apt 9G

City Beacon	State NY	Zip Code 12508-4117
----------------	-------------	------------------------

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

Name of Employer (for Individual) W.W. Norton	Occupation (for Individual) Designer
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2020

Transaction ID : VNW3HJF0D23

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
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 13 OF 42
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Sheridan, Dixie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 W 24Th St
 Apt 4D
 City New York State NY Zip Code 10011-1907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 22 / 2020
Transaction ID : VNW3HJGNAA9
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Slavin, Jeffrey, Z., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5706 Warwick Pl
 City Chevy Chase State MD Zip Code 20815-5502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Town Of Somerset, MD Occupation (for Individual) Mayor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1875.00

Date of Receipt 11 / 18 / 2020
Transaction ID : VNW3HJK92Z0
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Spengler, Laurie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7425 Pelican Bay Blvd
 Apt 905
 City Naples State FL Zip Code 34108-8594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Courageous Capital Advisors Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2020
Transaction ID : VNW3HJH7X02
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	405.00
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 14 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Spengler, Laurie, , ,

Mailing Address 7425 Pelican Bay Blvd
Apt 905

City Naples State FL Zip Code 34108-8594

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

Name of Employer (for Individual) Occupation (for Individual)
Courageous Capital Advisors Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2020

Transaction ID : VNW3HJH7X10

Amount of Each Receipt this Period
100.00

Memo Item

B. 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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	12130.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 42
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 Massachusetts Ave NW

City Washington	State DC	Zip Code 20036-1222
--------------------	-------------	------------------------

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

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

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
10	/	29	/	2020

Transaction ID : VNW3HJSZQ89

Amount of Each Receipt this Period
5000.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5025.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2020

Transaction ID : VNW3HJSZQ89E

Amount of Each Receipt this Period
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 42
<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Casella, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Babe Thompson Rd
 City La Selva Beach State CA Zip Code 95076-8527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Netflix Occupation (for Individual) Engineering Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15500.00

Date of Receipt 10 / 22 / 2020
Transaction ID : VNW3HJGNAJ2
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Non-Contribution Account

B. Christy Webber Landscapes
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2900 W Ferdinand St
 City Chicago State IL Zip Code 60612-1640
 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 ▼ 5000.00

Date of Receipt 10 / 16 / 2020
Transaction ID : VNW3HJS3DR4
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Non-Contribution Account

C. Felicio, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 Westchester Rd
 City Jamaica Plain State MA Zip Code 02130-3451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Health Initiative Occupation (for Individual) COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 23 / 2020
Transaction ID : VNW3HJH6ZF7
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ▶ 11000.00
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 17 OF 42
<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Laguens, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2006 Ashby Ave
 City Austin State TX Zip Code 78704-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Planned Parenthood Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 26 / 2020
Transaction ID : VNW3HJH8AW2
 Amount of Each Receipt this Period 100.00
 Memo Item
 Non-Contribution Account

B. Laguens, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2006 Ashby Ave
 City Austin State TX Zip Code 78704-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Planned Parenthood Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 11 / 2020
Transaction ID : VNW3HJJHR02
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non-Contribution Account

C. Reamer, Sue, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Webster St Apt 213
 City Brookline State MA Zip Code 02446-4963
 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 ▼ 40300.00

Date of Receipt 10 / 26 / 2020
Transaction ID : VNW3HJHD7S0
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ▶ 5600.00
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 18 OF 42
<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Ricketts, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 Sheridan Rd
 City Wilmette State IL Zip Code 60091-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Cubs Occupation (for Individual) Co-Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 65797.91

Date of Receipt 10 / 15 / 2020
Transaction ID : VNW3HJSHGD1
 Amount of Each Receipt this Period 7986.79
 Memo Item
 Non-Contribution Account

B. Ricketts, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 Sheridan Rd
 City Wilmette State IL Zip Code 60091-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Cubs Occupation (for Individual) Co-Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 99854.15

Date of Receipt 10 / 29 / 2020
Transaction ID : VNW3HJSXT55
 Amount of Each Receipt this Period 34056.24
 Memo Item
 Non-Contribution Account

C. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 030220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 40000.00

Date of Receipt 10 / 23 / 2020
Transaction ID : VNW3HJH6XV7
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ▶ 47043.03
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 42
<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Trump, Mary, , ,		Date of Receipt MM / DD / YYYY 10 / 20 / 2020
Mailing Address 33 Capitolian Blvd		Transaction ID : VNW3HJS3DS2
City Rockville Centre	State NY	Zip Code 11570-2501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Author	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Weiner, Shari, L, ,		Date of Receipt MM / DD / YYYY 10 / 18 / 2020
Mailing Address 900 Park Ave Apt 17D		Transaction ID : VNW3HJCBGG2
City New York	State NY	Zip Code 10075-0280
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Murphy McKeon	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Weiner, Shari, L, ,		Date of Receipt MM / DD / YYYY 10 / 18 / 2020
Mailing Address 900 Park Ave Apt 17D		Transaction ID : VNW3HJCBGJ8
City New York	State NY	Zip Code 10075-0280
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Murphy McKeon	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 8000.00	Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
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 42
<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Weiner, Shari, L, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2020
Mailing Address 900 Park Ave Apt 17D			Transaction ID : VNW3HJH7RJ5
City New York	State NY	Zip Code 10075-0280	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Murphy McKeon		Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 9000.00	Non-Contribution Account

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

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

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	75643.03

**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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 10 / 25 / 2020
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A1M0r Amount of Each Disbursement this Period 0.99
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Merchant Fee	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. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 10 / 31 / 2020
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A1M0N Amount of Each Disbursement this Period 197.50
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Merchant Fee	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. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 10 / 29 / 2020
Mailing Address 1825 K St NW Frnt 1		FEC Identification Number C Transaction ID : VNV49A1H6f Amount of Each Disbursement this Period 10.21
City Washington	State DC	
Zip Code 20006-1245	Purpose of Disbursement Bank Fee	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).....▶	208.70
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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 10 / 30 / 2020
Mailing Address 1825 K St NW Frnt 1		FEC Identification Number C
City Washington	State DC	Zip Code 20006-1245
Purpose of Disbursement Bank Fee		Transaction ID : VNV49A1M19 Amount of Each Disbursement this Period 10.00
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. Paragon Payment Solutions		Date of Disbursement MM / DD / YYYY 11 / 02 / 2020
Mailing Address 2141 E Broadway Rd		FEC Identification Number C
City Tempe	State AZ	Zip Code 85282-1892
Purpose of Disbursement Merchant Fee		Transaction ID : VNV49A1K9Z Amount of Each Disbursement this Period 1590.38
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.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
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).....▶	1600.38
TOTAL This Period (last page this line number only).....▶	1809.08

**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"/> 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)
L PAC

A. PAT HACKETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 8066

M M M	/	D D D	/	Y Y Y Y Y
10		16		2020

City South Bend State IN Zip Code 46660-8066

FEC Identification Number

Purpose of Disbursement Contribution

C C00659078

Candidate Name HACKETT, MARY PATRICIA, , ,

Category/Type

Transaction ID : VNV49A1H6F

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: IN District: 02

500.00

Memo Item

B. Tracy Mitrano For Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 752

M M M	/	D D D	/	Y Y Y Y Y
10		16		2020

City Penn Yan State NY Zip Code 14527-0752

FEC Identification Number

Purpose of Disbursement Contribution

C C00654525

Candidate Name Mitrano, Tracy, , ,

Category/Type

Transaction ID : VNV49A1H6Q

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: NY District: 23

500.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Category/Type

Amount of Each Disbursement this Period

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

Memo Item

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

1000.00

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

1000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Allison Ikley-Freeman For OK 2020

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 781

City Sand Springs State OK Zip Code 74063-0781

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H6S

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 29 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H74

Amount of Each Disbursement this Period: 25.84 non-contribution account

Memo Item

C. Citizens For Maggie Trevor

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1424

City Arlington Heights State IL Zip Code 60006-1424

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H61

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1025.84

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

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NAME OF COMMITTEE (In Full)
L PAC

A. CNA

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1KA6

Amount of Each Disbursement this Period: 243.77

Memo Item

B. DC Health Link

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H75

Amount of Each Disbursement this Period: 7599.48

Memo Item

C. Elect Renitta Shannon

Full Name (Last, First, Middle Initial)

Mailing Address 2107 N Decatur Rd
717

City Decatur State GA Zip Code 30033-5305

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H6

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8343.25

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Erin Zwiener For Texas House

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 184

City Driftwood State TX Zip Code 78619-0184

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H6R

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Fedex Office

Full Name (Last, First, Middle Initial)

Mailing Address 1350 New York Ave NW

City Washington State DC Zip Code 20005-4709

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 29 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H79

Amount of Each Disbursement this Period: 31.78

non-contribution account

Memo Item

C. Fouracre, Matthew, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2523 13Th St NW Apt 207

City Washington State DC Zip Code 20009-5200

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H6I

Amount of Each Disbursement this Period: 897.27

non-contribution account

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1929.05

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 11 / 13 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C
City Washington	State DC	Zip Code 20009-5200
Purpose of Disbursement Salary		Transaction ID : VNV49A1K9F
Candidate Name		Amount of Each Disbursement this Period 897.28
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. Friends Of Liz Stefanics		Date of Disbursement MM / DD / YYYY 10 / 16 / 2020
Mailing Address PO Box 720		FEC Identification Number C
City Cerrillos	State NM	Zip Code 87010-0720
Purpose of Disbursement Non Federal Contribution		Transaction ID : VNV49A1H6W
Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Friends Of Summer Wesley		Date of Disbursement MM / DD / YYYY 10 / 16 / 2020
Mailing Address PO Box 927		FEC Identification Number C
City Bethany	State OK	Zip Code 73008-0927
Purpose of Disbursement Non Federal Contribution		Transaction ID : VNV49A1H66
Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1897.28
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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement MM / DD / YYYY 11 / 02 / 2020
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C
City Mountain View	State CA	
Zip Code 94043-1351		Transaction ID : VNV49A1KA7
Purpose of Disbursement Software		Amount of Each Disbursement this Period 82.68
Candidate Name		<input type="checkbox"/> non-contribution account
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. Grasshopper.Com		Date of Disbursement MM / DD / YYYY 11 / 04 / 2020
Mailing Address 197 1st Ave Ste 200		FEC Identification Number C
City Needham	State MA	
Zip Code 02494-2873		Transaction ID : VNV49A1KA7
Purpose of Disbursement Software		Amount of Each Disbursement this Period 34.10
Candidate Name		<input type="checkbox"/> NON-CONTRIBUTION ACCOUNT
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. Hoosiers For Ashley Klein		Date of Disbursement MM / DD / YYYY 10 / 21 / 2020
Mailing Address 1028 High Dr		FEC Identification Number C
City Carmel	State IN	
Zip Code 46033-3061		Transaction ID : VNV49A1H67
Purpose of Disbursement Non Federal Contribution		Amount of Each Disbursement this Period 500.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	616.78
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 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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. IPFS Corporation		Date of Disbursement MM / DD / YYYY 11 / 03 / 2020
Mailing Address 30 Montgomery St		FEC Identification Number C [REDACTED] Transaction ID : VNV49A1KA/ Amount of Each Disbursement this Period [REDACTED] 1549.52 non-contribution account <input type="checkbox"/> Memo Item
City Jersey City	State NJ	Zip Code 07302-3829
Purpose of Disbursement Insurance		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:		

Full Name (Last, First, Middle Initial) B. Jenna Wadsworth Committee		Date of Disbursement MM / DD / YYYY 10 / 22 / 2020
Mailing Address 514 Daniels St # 286		FEC Identification Number C [REDACTED] Transaction ID : VNV49A1H6Z Amount of Each Disbursement this Period [REDACTED] 500.00 non-contribution account <input type="checkbox"/> Memo Item
City Raleigh	State NC	Zip Code 27605-1317
Purpose of Disbursement Non Federal Contribution		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lake Research Partners Inc		Date of Disbursement MM / DD / YYYY 11 / 12 / 2020
Mailing Address 1101 17Th St NW Ste 301		FEC Identification Number C [REDACTED] Transaction ID : VNV49A1KA/ Amount of Each Disbursement this Period [REDACTED] 11440.00 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20036-4742
Purpose of Disbursement Research		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:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 13489.52
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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Olive Street Design		Date of Disbursement MM / DD / YYYY 11 / 03 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A1KA1 Amount of Each Disbursement this Period [REDACTED] 34.00 non-contribution account <input type="checkbox"/> Memo Item
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website	Category/Type [REDACTED]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A1H7E Amount of Each Disbursement this Period [REDACTED] 143.86 non-contribution account <input type="checkbox"/> Memo Item
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll Fee	Category/Type [REDACTED]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A1H7F Amount of Each Disbursement this Period [REDACTED] 1920.91 non-contribution account <input type="checkbox"/> Memo Item
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll Taxes	Category/Type [REDACTED]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2098.77
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

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NAME OF COMMITTEE (In Full)
L PAC

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H7C

Amount of Each Disbursement this Period: 133.26

Memo Item

B. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H7G

Amount of Each Disbursement this Period: 1920.92

Memo Item

C. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1KA

Amount of Each Disbursement this Period: 133.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2187.44

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1KA3

Amount of Each Disbursement this Period: 1662.01

NON-CONTRIBUTION ACCOUNT

Memo Item

B. Perkins Kwoka For NH

Full Name (Last, First, Middle Initial)

Mailing Address 37 Langdon St

City Portsmouth State NH Zip Code 03801-3925

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H70

Amount of Each Disbursement this Period: 500.00

Memo Item

C. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H6I

Amount of Each Disbursement this Period: 2910.42

non-contribution account

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5072.43

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Sandberg, Stephanie, , ,		Date of Disbursement MM / DD / YYYY 11 / 13 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] Transaction ID : VNV49A1K9C Amount of Each Disbursement this Period 5370.01 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type
Purpose of Disbursement Reimbursement - See Memo Details			
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. Amtrak		Date of Disbursement MM / DD / YYYY 11 / 13 / 2020	
Mailing Address 201 I St NE		FEC Identification Number C [REDACTED] Transaction ID : VNV49A1KB3 Amount of Each Disbursement this Period 818.00 * <input checked="" type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20002-4449	Category/ Type
Purpose of Disbursement Trainfare			
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. Dinah's Garden Hotel		Date of Disbursement MM / DD / YYYY 11 / 13 / 2020	
Mailing Address 4261 El Camino Real		FEC Identification Number C [REDACTED] Transaction ID : VNV49A1KB. Amount of Each Disbursement this Period 414.65 * <input checked="" type="checkbox"/> Memo Item	
City Palo Alto	State CA	Zip Code 94306-4405	Category/ Type
Purpose of Disbursement Lodging			
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).....▶	5370.01
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

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NAME OF COMMITTEE (In Full)
L PAC

A. Fedex Office

Full Name (Last, First, Middle Initial)

Mailing Address 1350 New York Ave NW

City Washington State DC Zip Code 20005-4709

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1KB

Amount of Each Disbursement this Period: 280.32

Memo Item

B. NY Print Printers

Full Name (Last, First, Middle Initial)

Mailing Address 252 W 38Th St

City New York State NY Zip Code 10018-5806

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1KB

Amount of Each Disbursement this Period: 311.71

Memo Item

C. The Battery

Full Name (Last, First, Middle Initial)

Mailing Address 717 Battery St

City San Francisco State CA Zip Code 94111-1515

Purpose of Disbursement Meal

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1KB

Amount of Each Disbursement this Period: 433.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement
Taxi Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 13 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1KB5

Amount of Each Disbursement this Period: 475.37

Memo Item

B. United Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 233 S Wacker Dr Ste 430

City Chicago State IL Zip Code 60606-6435

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 13 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1KBT

Amount of Each Disbursement this Period: 1775.30

Memo Item

C. US 1 Printing

Full Name (Last, First, Middle Initial)

Mailing Address 100 Overlook Ctr FI 2

City Princeton State NJ Zip Code 08540-7814

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 13 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1KB7

Amount of Each Disbursement this Period: 435.86

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Sandberg, Stephanie, , ,		Date of Disbursement MM / DD / YYYY 11 / 13 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C	
City Princeton	State NJ	Zip Code 08540-6760	Transaction ID : VNV49A1K9S
Purpose of Disbursement Salary		Category/ Type	Amount of Each Disbursement this Period 2361.94
Candidate Name			NON-CONTRIBUTION ACCOUNT
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. Stamps.Com		Date of Disbursement MM / DD / YYYY 11 / 12 / 2020	
Mailing Address 1990 E Grand Ave		FEC Identification Number C	
City El Segundo	State CA	Zip Code 90245-5013	Transaction ID : VNV49A1KAC
Purpose of Disbursement Postage		Category/ Type	Amount of Each Disbursement this Period 17.99
Candidate Name			non-contribution account
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. Stamps.Com		Date of Disbursement MM / DD / YYYY 11 / 16 / 2020	
Mailing Address 1990 E Grand Ave		FEC Identification Number C	
City El Segundo	State CA	Zip Code 90245-5013	Transaction ID : VNV49A1KA
Purpose of Disbursement Postage		Category/ Type	Amount of Each Disbursement this Period 25.00
Candidate Name			non-contribution account
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).....▶	2404.93
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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Stephanie Byers For KS House		Date of Disbursement M M / D D / Y Y Y Y Y 10 / 21 / 2020	
Mailing Address 119 S Chautauqua Ave			
City Wichita	State KS	Zip Code 67211-2102	
Purpose of Disbursement Non Federal Contribution		FEC Identification Number C [REDACTED]	
Candidate Name		Transaction ID : VNV49A1H71 Amount of Each Disbursement this Period [REDACTED] 500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Susan Ruiz For Kansas		Date of Disbursement M M / D D / Y Y Y Y Y 10 / 21 / 2020	
Mailing Address 7306 Bond St			
City Shawnee	State KS	Zip Code 66203-4330	
Purpose of Disbursement Non Federal Contribution		FEC Identification Number C [REDACTED]	
Candidate Name		Transaction ID : VNV49A1H72 Amount of Each Disbursement this Period [REDACTED] 500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. The Turner Group		Date of Disbursement M M / D D / Y Y Y Y Y 10 / 30 / 2020	
Mailing Address PO Box 5373			
City Virginia Beach	State VA	Zip Code 23471-0373	
Purpose of Disbursement Political Strategy Consulting		FEC Identification Number C [REDACTED]	
Candidate Name		Transaction ID : VNV49A1H71 Amount of Each Disbursement this Period [REDACTED] 8125.00 non-contribution account	
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] 9125.00
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

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NAME OF COMMITTEE (In Full)
L PAC

A. Things Remembered

Full Name (Last, First, Middle Initial)

Mailing Address 5500 Avion Park Dr

City Cleveland State OH Zip Code 44143-1911

Purpose of Disbursement Donor Gift

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 23 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1KA

Amount of Each Disbursement this Period: 117.99

Memo Item

B. Things Remembered

Full Name (Last, First, Middle Initial)

Mailing Address 5500 Avion Park Dr

City Cleveland State OH Zip Code 44143-1911

Purpose of Disbursement Donor Gift

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 23 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1KA

Amount of Each Disbursement this Period: 106.63

Memo Item

C. United Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 233 S Wacker Dr Ste 430

City Chicago State IL Zip Code 60606-6435

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1H7

Amount of Each Disbursement this Period: 144.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 368.62

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

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NAME OF COMMITTEE (In Full)
L PAC

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

Mailing Address 1800 M St NW

City Washington State DC Zip Code 20036-5802

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 30 / 2020

FEC Identification Number: **C**

Transaction ID : VNV49A1H7A

Amount of Each Disbursement this Period: 3.33

Memo Item

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

Mailing Address 1800 M St NW

City Washington State DC Zip Code 20036-5802

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 02 / 2020

FEC Identification Number: **C**

Transaction ID : VNV49A1KAE

Amount of Each Disbursement this Period: 150.00

Memo Item

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

Mailing Address 2120 L St NW Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 02 / 2020

FEC Identification Number: **C**

Transaction ID : VNV49A1KAi

Amount of Each Disbursement this Period: 650.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 803.33

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

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NAME OF COMMITTEE (In Full) L PAC

Full Name (Last, First, Middle Initial) A. Zoom.US		Date of Disbursement MM / DD / YYYY 11 / 02 / 2020	
Mailing Address 55 Almaden Blvd			
City San Jose	State CA	Zip Code 95113-1608	
Purpose of Disbursement Software		<input type="checkbox"/> 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:			
		FEC Identification Number C	
		Transaction ID : VNV49A1KAE	
		Amount of Each Disbursement this Period 15.89	
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		<input type="checkbox"/> 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:			
		FEC Identification Number C	
		Amount of Each Disbursement this Period	
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		<input type="checkbox"/> 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:			
		FEC Identification Number C	
		Amount of Each Disbursement this Period	
		<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	15.89
TOTAL This Period (last page this line number only).....▶	54748.14

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) L PAC
FEC IDENTIFICATION NUMBER C C00519413

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee DMFI PAC
Mailing Address 1023 31St St NW Ste 530
City Washington State DC Zip Code 20007-4458
Purpose of Expenditure Television Advertising
Date of Public Distribution/Dissemination 10/26/2020
Amount 20000.00
Transaction ID : VNV49A1FE15
Date of Disbursement or Obligation 10/26/2020

Name of Federal Candidate: JACOBS, SARA, , ,
Support Oppose
Office Sought: House District: 53
President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 25000.00
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee DMFI PAC
Mailing Address 1023 31St St NW Ste 530
City Washington State DC Zip Code 20007-4458
Purpose of Expenditure Television Advertising
Date of Public Distribution/Dissemination 10/28/2020
Amount 5000.00
Transaction ID : VNV49A1FN85
Date of Disbursement or Obligation 10/28/2020

Name of Federal Candidate: JACOBS, SARA, , ,
Support Oppose
Office Sought: House District: 53
President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 25000.00
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 25000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Rosen, Hilary, , , [Electronically Filed] Date 12/02/2020
Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) L PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00519413 </div>
---	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item NEW DIRECTION PAC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2020		
Mailing Address 119 1St Ave S # S320			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div>		
City Seattle	State WA	Zip Code 98104-3416			
Purpose of Expenditure Text Messaging		Category/ Type 	Transaction ID : VNV49A1G2M8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 03 / 2020		
Name of Federal Candidate: Doglio, Beth, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>10</u> State: <u>WA</u>		
Calendar Year-To-Date Per Election for Office Sought 5000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item WOMEN VOTE!			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 26 / 2020		
Mailing Address 1800 M St NW Ste 375N			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50000.00</div>		
City Washington	State DC	Zip Code 20036-5862			
Purpose of Expenditure Television Advertising		Category/ Type 	Transaction ID : VNV49A1FE23 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2020		
Name of Federal Candidate: Ortiz Jones, Gina, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>23</u> State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 50000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">55000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">80000.00</div>

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

Rosen, Hilary, , ,

 Signature

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
 12 / 02 / 2020