

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**
MASSACHUSETTS VICTORY COMMITTEE

ADDRESS (number and street) **310 FIRST STREET, SE**
Check if different than previously reported. (ACC) **WASHINGTON DC 20003**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00549782 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 **11 / 06 / 2018** in the State of **MA**
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period **10 / 01 / 2018** through **10 / 17 / 2018**

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

Signature of Treasurer **CRATE, BRADLEY, T.,** [Electronically Filed] Date **10 / 23 / 2018**

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

MASSACHUSETTS VICTORY COMMITTEE

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="2018"/>		<input type="text" value="337573.12"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="353968.48"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="241050.00"/>	<input type="text" value="3297538.31"/>
(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="595018.48"/>	<input type="text" value="3635111.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="290092.09"/>	<input type="text" value="3330185.04"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="304926.39"/>	<input type="text" value="304926.39"/>
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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

MASSACHUSETTS VICTORY COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2018 To: M M / D D / Y Y Y Y 10 / 17 / 2018

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).....	239050.00	3249050.00
(ii) Unitemized	0.00	400.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	239050.00	3249450.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	46500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	241050.00	3295950.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	1588.31
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	241050.00	3297538.31
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	241050.00	3297538.31

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	51775.67	593494.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	51775.67	593494.30
22. Transfers to Affiliated/Other Party Committees.....	238316.42	2712690.74
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	24000.00
(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	24000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	290092.09	3330185.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	290092.09	3330185.04

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	241050.00	3295950.00
34. Total Contribution Refunds (from Line 28(d))	0.00	24000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	241050.00	3271950.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	51775.67	593494.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1588.31
38. Net Operating Expenditures (subtract Line 37 from Line 36)	51775.67	591905.99

**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 34
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. BENNETT, GEORGE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 280 DUDLEY STREET

City BROOKLINE	State MA	Zip Code 02445
-------------------	-------------	-------------------

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

Name of Employer (for Individual) GOOD MEASURES	Occupation (for Individual) BUSINESS EXECUTIVE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		02		2018

Transaction ID : SA11AI.14826

Amount of Each Receipt this Period
14000.00

Memo Item

B. CAMPBELL, GARY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 PENACOOK PL.

City ANDOVER	State MA	Zip Code 01810
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GILBERT CAMPBELL REAL ESTATE	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2018

Transaction ID : SA11AI.14829

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 120 SEAVER STREET

City BROOKLINE	State MA	Zip Code 02445
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERFACE GROUP	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		16		2018

Transaction ID : SA11AI.14851

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	20000.00
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 7 OF 34
<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)
MASSACHUSETTS VICTORY COMMITTEE

A. CHAFETZ, ROBERTA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SEAVER STREET
 City BROOKLINE State MA Zip Code 02445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JUST THE TWO OF US Occupation (for Individual) JEWELER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 16 / 2018
Transaction ID : SA11AI.14853
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. CHAPMAN, STEPHEN, M, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 GALEN ST SUITE 301
 City WATERTOWN State MA Zip Code 02472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMC MGT CORP. Occupation (for Individual) RE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 16 / 2018
Transaction ID : SA11AI.14855
 Amount of Each Receipt this Period 25000.00
 Memo Item

C. CROSSEN, JOANNE, K, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 97 WHITMARK RD.
 City COTUIT State MA Zip Code 02635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 10 / 2018
Transaction ID : SA11AI.14839
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	31000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 34
<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)
MASSACHUSETTS VICTORY COMMITTEE

A. CUMMINGS, WILLIAM, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 SALISBURY ST.

City WINCHESTER	State MA	Zip Code 01890
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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 ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2018

Transaction ID : SA11AI.14849

Amount of Each Receipt this Period
10000.00

Memo Item

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

Mailing Address PO BOX 167

City HINGHAM	State MA	Zip Code 02090
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2018

Transaction ID : SA11AI.14835

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 8 WESTWOOD ROAD

City WESTWOOD	State MA	Zip Code 02090
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2018

Transaction ID : SA11AI.14833

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	20000.00
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 9 OF 34
	(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)
MASSACHUSETTS VICTORY COMMITTEE

A. KERSHAW, THOMAS, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 84 BEACON ST
 City BOSTON State MA Zip Code 02108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAMPSHIRE HOUSE CORPORATION Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 16 / 2018
Transaction ID : SA11AI.14857
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. MARKLEY, JEFFREY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 SUMMER ST.
 City BOSTON State MA Zip Code 02110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKLEY GROUP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 43900.00

Date of Receipt 10 / 10 / 2018
Transaction ID : SA11AI.14843
 Amount of Each Receipt this Period 43900.00
 Memo Item

C. MAROSITS, HUNTER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 VALLEY VIEW DRIVE
 City WILBRAHAM State MA Zip Code 01095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H & R HOME REMODELING INC Occupation (for Individual) BUILDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 09 / 2018
Transaction ID : SA11AI.14831
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	49150.00
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 34
	<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)
MASSACHUSETTS VICTORY COMMITTEE

A. MASSEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 MOUNT VERNON STREET
 City BOSTON State MA Zip Code 02108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSEY & CO Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 17 / 2018
Transaction ID : SA11AI.14858
 Amount of Each Receipt this Period 10000.00
 Memo Item

B. MELCHIONDA, CAROLINE, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 758
 City DOVER State MA Zip Code 02030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOVER CARES Occupation (for Individual) REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 10 / 2018
Transaction ID : SA11AI.14837
 Amount of Each Receipt this Period 15000.00
 Memo Item

C. MICOZZI, NINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 HUNTINGTON ROAD
 City NEWTON State MA Zip Code 02458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICOZZI MANAGEMENT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 05 / 2018
Transaction ID : SA11AI.14827
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	30000.00
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 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. MICOZZI, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 HUNTINGTON ROAD
 City NEWTON State MA Zip Code 02458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANAGEMENT Occupation (for Individual) MICOZZI MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 05 / 2018
Transaction ID : SA11AI.14828
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. RAMESON, DEVON, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 SUMMER ST.
 City BOSTON State MA Zip Code 02110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKLEY GROUP Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 43900.00

Date of Receipt 10 / 10 / 2018
Transaction ID : SA11AI.14847
 Amount of Each Receipt this Period 43900.00
 Memo Item

C. SALMON, ANDREW, L, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 BELLA ROSE DR
 City MILLBURY State MA Zip Code 01527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SALMON HEALTH & RETIREMENT Occupation (for Individual) DIRECTOR OF NETWORK DEVELOPM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 16 / 2018
Transaction ID : SA11AI.14856
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 53900.00
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 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. WESTHAVER, ADAM, B, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 NORTHWOOD DRIVE
 City BLOOMFIELD State CT Zip Code 06002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED TECHNOLOGIES, LLC Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 10 / 2018
Transaction ID : SA11AI.14845
 Amount of Each Receipt this Period 15000.00
 Memo Item

B. WHITE, PETER, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 870
 City COTUIT State MA Zip Code 02635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J. F. WHITE CONSTRUCTION COMPANY Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 10 / 10 / 2018
Transaction ID : SA11AI.14841
 Amount of Each Receipt this Period 20000.00
 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
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	35000.00
TOTAL This Period (last page this line number only).....▶	239050.00

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 13 OF 34
<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMICA MUTUAL INSURANCE COMPANY/FED-POLITICAL ACTION COMMITTEE

Mailing Address **PO BOX 6008**

City PROVIDENCE	State RI	Zip Code 02940
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00268987**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
10 / 10 / 2018

Transaction ID : SA11C.14824

Amount of Each Receipt this Period
2000.00

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
_____/_____/_____

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
_____/_____/_____

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD.

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14749
Amount of Each Disbursement this Period
173.00

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD.

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14750
Amount of Each Disbursement this Period
221.20

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD.

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14751
Amount of Each Disbursement this Period
248.20

Memo Item

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

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

642.40

**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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. APEX

Mailing Address 138 CONANT STREET
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.14752
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. APEX

Mailing Address 138 CONANT STREET
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.14753
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. APEX

Mailing Address 138 CONANT STREET
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.14754
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. BOSTON TAXI

Mailing Address 37-03 21ST STREET

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement
TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14756
Amount of Each Disbursement this Period
17.50

Memo Item

Full Name (Last, First, Middle Initial)

B. BOSTON TAXI

Mailing Address 37-03 21ST STREET

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement
TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14757
Amount of Each Disbursement this Period
20.25

Memo Item

Full Name (Last, First, Middle Initial)

C. BOSTON TAXI

Mailing Address 37-03 21ST STREET

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement
TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14758
Amount of Each Disbursement this Period
47.82

Memo Item

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

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

85.57

**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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. BRICCO

Mailing Address 241 HANOVER STREET

City BOSTON State MA Zip Code 02113

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14762
Amount of Each Disbursement this Period
139.14

Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITAL GRILLE

Mailing Address 1000 DARDEN CENTER DRIVE

City ORLANDO State FL Zip Code 32837

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14763
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DBP CONSULTING LLC

Mailing Address 500 LINCOLN ST

City ALLSTON State MA Zip Code 02134

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14766
Amount of Each Disbursement this Period
25000.00

Memo Item

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

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

26139.14

**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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. DUNKIN DONUTS

Mailing Address 49 MT AUBURN ST

City WATERTOWN State MA Zip Code 02472

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2018

FEC Identification Number

C

Transaction ID : SB21B.14768
Amount of Each Disbursement this Period

85.48

Memo Item

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS

Mailing Address 301 CONGRESS ST

City BOSTON State MA Zip Code 02210

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 11 / 2018

FEC Identification Number

C

Transaction ID : SB21B.14767
Amount of Each Disbursement this Period

66.08

Memo Item

Full Name (Last, First, Middle Initial)

C. EASTERN STANDARD RESTAURANT

Mailing Address 500 COMMONWEALTH AVE

City BOSTON State MA Zip Code 02215

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2018

FEC Identification Number

C

Transaction ID : SB21B.14765
Amount of Each Disbursement this Period

171.78

Memo Item

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

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

323.34

**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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. EXXONMOBIL

Mailing Address 5959 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14770
Amount of Each Disbursement this Period
55.16

Memo Item

Full Name (Last, First, Middle Initial)

B. GARAGE AT 100 CLARENDON

Mailing Address 100 CLARENDON STREET

City BOSTON State MA Zip Code 02116

Purpose of Disbursement
PARKING SERVICES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14771
Amount of Each Disbursement this Period
36.00

Memo Item

Full Name (Last, First, Middle Initial)

C. GOLWICK, CASSIDY, , ,

Mailing Address 36 ANTWERP ST
#2

City BRIGHTON State MA Zip Code 02135

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14764
Amount of Each Disbursement this Period
2500.00

Memo Item

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

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

2591.16

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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. INSIDE PHILANTHROPY

Mailing Address 846 12TH ST. #2

City SANTA MONICA State CA Zip Code 90403

Purpose of Disbursement
ONLINE SUBSCRIPTIONS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2018

FEC Identification Number

C

Transaction ID : SB21B.14776
Amount of Each Disbursement this Period

47.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KC STRATEGIES

Mailing Address 4 CHARLOTTE DRIVE

City ANDOVER State MA Zip Code 01810

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2018

FEC Identification Number

C

Transaction ID : SB21B.14777
Amount of Each Disbursement this Period

1100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MORTON'S THE STEAKHOUSE

Mailing Address 2 SEAPORT LANE

City BOSTON State MA Zip Code 02210

Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2018

FEC Identification Number

C

Transaction ID : SB21B.14778
Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

3147.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. MORTON'S THE STEAKHOUSE

Mailing Address 2 SEAPORT LANE

City BOSTON State MA Zip Code 02210

Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			10			2018			

FEC Identification Number

C []
Transaction ID : SB21B.14779
 Amount of Each Disbursement this Period
 [] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MORTON'S THE STEAKHOUSE

Mailing Address 2 SEAPORT LANE

City BOSTON State MA Zip Code 02210

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2018			

FEC Identification Number

C []
Transaction ID : SB21B.14780
 Amount of Each Disbursement this Period
 [] 140.03

Memo Item

Full Name (Last, First, Middle Initial)

C. MORTON'S THE STEAKHOUSE

Mailing Address 2 SEAPORT LANE

City BOSTON State MA Zip Code 02210

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2018			

FEC Identification Number

C []
Transaction ID : SB21B.14781
 Amount of Each Disbursement this Period
 [] 561.58

Memo Item

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

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

2701.61

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. O'LEARY, TIM, , ,		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018
Mailing Address 39 HIGH STREET APARTMENT 2		FEC Identification Number C [] Transaction ID : SB21B.14793
City CHARLESTOWN	State MA	Zip Code 02129
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period [] 2500.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018
Mailing Address 138 CONANT STREET 2ND FLOOR		FEC Identification Number C [] Transaction ID : SB21B.14783
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period [] 8044.08
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. SEAFOOD SAM'S		Date of Disbursement MM / DD / YYYY 10 / 09 / 2018
Mailing Address 6 COAST GUARD ROAD		FEC Identification Number C [] Transaction ID : SB21B.14784
City SANDWICH	State MA	Zip Code 02563
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period [] 99.23
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

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

10643.31

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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 1660 SOLDIERS FIELD RD

City BRIGHTON State MA Zip Code 02135

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14785
 Amount of Each Disbursement this Period
 536.54

Memo Item

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 1660 SOLDIERS FIELD RD

City BRIGHTON State MA Zip Code 02135

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14786
 Amount of Each Disbursement this Period
 672.86

Memo Item

Full Name (Last, First, Middle Initial)

C. THE FAIRMONT COPLEY PLAZA

Mailing Address 138 JAMES ST
ATTN: LYNDAY PICCIANO

City BOSTON State MA Zip Code 02116

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.14788
 Amount of Each Disbursement this Period
 79.20

Memo Item

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

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

1288.60

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. THE FAIRMONT COPLEY PLAZA

Mailing Address 138 JAMES ST
ATTN: LYNDAY PICCIANO

City BOSTON State MA Zip Code 02116

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 11 / 2018

FEC Identification Number

C

Transaction ID : SB21B.14789
Amount of Each Disbursement this Period

65.50

Memo Item

Full Name (Last, First, Middle Initial)

B. THE MAYFLOWER HOTEL, AUTOGRAPH COLLECTION

Mailing Address 1127 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
TRAVEL: LOGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 05 / 2018

FEC Identification Number

C

Transaction ID : SB21B.14791
Amount of Each Disbursement this Period

642.57

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES, INC.

Mailing Address 239 CAUSEWAY STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.14794
Amount of Each Disbursement this Period

15.90

Memo Item

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

723.97

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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 03 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14795 Amount of Each Disbursement this Period [] 15.90
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: []	District: []	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 03 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14796 Amount of Each Disbursement this Period [] 22.41
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: []	District: []	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 04 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14797 Amount of Each Disbursement this Period [] 21.46
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: []	District: []	<input type="checkbox"/> Memo Item

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

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

[] 59.77
[]

**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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 05 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14798 Amount of Each Disbursement this Period [] 5.00
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 05 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14799 Amount of Each Disbursement this Period [] 7.11
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 05 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14800 Amount of Each Disbursement this Period [] 28.12
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

40.23

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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 09 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14801 Amount of Each Disbursement this Period [] 9.50	
City BOSTON	State MA	Zip Code 02114	Category/ Type []
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 09 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14802 Amount of Each Disbursement this Period [] 10.00	
City BOSTON	State MA	Zip Code 02114	Category/ Type []
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 10 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14803 Amount of Each Disbursement this Period [] 7.61	
City BOSTON	State MA	Zip Code 02114	Category/ Type []
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 27.11
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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 10 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14804 Amount of Each Disbursement this Period [] 7.94
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 10 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14805 Amount of Each Disbursement this Period [] 25.32
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 11 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14806 Amount of Each Disbursement this Period [] 9.16
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

42.42

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 11 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14807 Amount of Each Disbursement this Period [] 15.16
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 11 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14808 Amount of Each Disbursement this Period [] 19.22
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 11 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14808 Amount of Each Disbursement this Period [] 25.91
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

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

[] 60.29
[]

**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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 12 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C Transaction ID : SB21B.14810 Amount of Each Disbursement this Period 7.50
City BOSTON	State MA	
Zip Code 02114	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION	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. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 12 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C Transaction ID : SB21B.14811 Amount of Each Disbursement this Period 7.71
City BOSTON	State MA	
Zip Code 02114	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION	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. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 12 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C Transaction ID : SB21B.14812 Amount of Each Disbursement this Period 9.54
City BOSTON	State MA	
Zip Code 02114	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION	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)..... ▶

24.75

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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14813 Amount of Each Disbursement this Period [] 7.42
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14814 Amount of Each Disbursement this Period [] 22.06
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14815 Amount of Each Disbursement this Period [] 24.19
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 53.67
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14816 Amount of Each Disbursement this Period [] 36.97
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14817 Amount of Each Disbursement this Period [] 46.04
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES, INC.		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [] Transaction ID : SB21B.14818 Amount of Each Disbursement this Period [] 12.73
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 95.74
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. UBER TECHNOLOGIES, INC.

Full Name (Last, First, Middle Initial)

Mailing Address 239 CAUSEWAY STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14819

Amount of Each Disbursement this Period: 13.19

Memo Item

B. VERIZON WIRELESS

Full Name (Last, First, Middle Initial)

Mailing Address 15505 SAND CANYON AVENUE

City IRVINE State CA Zip Code 92618

Purpose of Disbursement MOBILE PHONE EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 09 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14820

Amount of Each Disbursement this Period: 1222.43

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

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

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

1235.62
51285.70

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 checked="" 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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. MASSACHUSETTS REPUBLICAN PARTY

Mailing Address 85 MERRIMAC ST.
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
TRANSFER

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

FEC Identification Number

C C00042622

Transaction ID : SB22.14748

Amount of Each Disbursement this Period

238316.42

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

238316.42

238316.42