

# 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

Guts Political Action Committee a/k/a True Blue Democrats

ADDRESS (number and street) PO Box 224

Check if different than previously reported. (ACC) Catlett VA 20119

2. **FEC IDENTIFICATION NUMBER ▼** C C00481978 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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

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

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |   |                                      |                                       |  |
|---|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2)            | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11)<br><small>(Non-Election Year Only)</small> |
| <input type="checkbox"/> Mar 20 (M3)            | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12)<br><small>(Non-Election Year Only)</small> |
| <input checked="" type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)   |

- (c) 12-Day **PRE-Election** Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on MM / DD / YYYYYY in the State of   

- (d) 30-Day **POST-Election** Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on MM / DD / YYYYYY in the State of   

5. Covering Period MM / DD / YYYYYY through MM / DD / YYYYYY  
03 / 01 / 2016 through 03 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dorothy Grayson

Signature of Treasurer Dorothy Grayson [Electronically Filed] Date MM / DD / YYYYYY  
04 / 20 / 2016

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

Office Use Only								
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Guts Political Action Committee a/k/a True Blue Democrats**

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="2016"/>	<input type="text" value="1074.95"/>	<input type="text" value="1074.95"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9717.78"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="7786.73"/>	<input type="text" value="21533.50"/>
(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="17504.51"/>	<input type="text" value="22608.45"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="618.98"/>	<input type="text" value="5841.12"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="16885.53"/>	<input type="text" value="16767.33"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

Guts Political Action Committee a/k/a True Blue Democrats

Report Covering the Period: From: 03 / 01 / 2016 To: 03 / 31 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5250.00	16250.00
(ii) Unitemized .....	2536.73	5283.41
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7786.73	21533.41
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7786.73	21533.41
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.09
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))..... ▶	7786.73	21533.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7786.73	21533.50

**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 .....	618.98	4841.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	618.98	4841.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	618.98	5841.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	618.98	5841.12

**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) .....	7786.73	21533.41
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7786.73	21533.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	618.98	4841.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	618.98	4841.12

**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 8
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Guts Political Action Committee a/k/a True Blue Democrats**

**A. Vicki Cheikes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23372 Water Cir  
 City Boca Raton State FL Zip Code 33486  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 250.00

Date of Receipt 03 / 11 / 2016  
**Transaction ID : AFA9C7F521E9B4C21B33**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. David Einhorn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 140 East 45th Street 24th  
 City New York State NY Zip Code 10017-3144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Money Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 5000.00

Date of Receipt 03 / 24 / 2016  
**Transaction ID : A4AAE20C02D6E4F6999C**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. David Einhorn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 140 East 45th Street 24th  
 City New York State NY Zip Code 10017-3144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Money Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 5000.00

Date of Receipt 03 / 24 / 2016  
**Transaction ID : A533BD43385C04BA2916**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Guts Political Action Committee a/k/a True Blue Democrats**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 2144

Purpose of Disbursement  
Credit Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2016

Transaction ID : BE16A4E6DF6AC4782951

Amount of Each Disbursement this Period

0.06

Memo Item

Full Name (Last, First, Middle Initial)

**B. Aristotle**

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
FEC Software

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 22 / 2016

Transaction ID : BFE62EA7BC58849F396B

Amount of Each Disbursement this Period

350.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ACTBLUE**

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 2144

Purpose of Disbursement  
Credit Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2016

Transaction ID : BCF621E0A58104555890

Amount of Each Disbursement this Period

197.50

Memo Item

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

547.56

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Guts Political Action Committee a/k/a True Blue Democrats**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 2144

Purpose of Disbursement  
Credit Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

Transaction ID : B47CB7108340F41A5B3B

Amount of Each Disbursement this Period

10.07

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

10.07

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

557.63