

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.

O' Say Can You See PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

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 Martin Cadogan

Signature of Treasurer Martin Cadogan [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

O' Say Can You See 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="2015"/>		579330.07
(b) Cash on Hand at Beginning of Reporting Period.....	579330.07	
(c) Total Receipts (from Line 19)	299421.69	299421.69
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	878751.76	878751.76
7. Total Disbursements (from Line 31).....	525323.49	525323.49
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	353428.27	353428.27
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	2229.32	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

O' Say Can You See 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).....	199815.00	199815.00
(ii) Unitemized	50514.73	50514.73
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	250329.73	250329.73
(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)	250329.73	250329.73
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).....	46579.47	46579.47
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2512.49	2512.49
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))..... ▶	299421.69	299421.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	299421.69	299421.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	292823.49	292823.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	292823.49	292823.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8500.00	8500.00
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	6000.00	6000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	7000.00	7000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	13000.00	13000.00
29. Other Disbursements	211000.00	211000.00
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)) ..	525323.49	525323.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	525323.49	525323.49

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	250329.73	250329.73
34. Total Contribution Refunds (from Line 28(d))	13000.00	13000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	237329.73	237329.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	292823.49	292823.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	46579.47	46579.47
38. Net Operating Expenditures (subtract Line 37 from Line 36)	246244.02	246244.02

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 176
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Anwar Ahmad

Mailing Address 3419 Scottsdale Cir

City Naperville State IL Zip Code 60564-4630

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

Name of Employer Passavant Hospital Occupation Doctor

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
 03 / 21 / 2015
Transaction ID : VQCFK9KJDJ7

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Faheem Ahmad

Mailing Address 3427 Marquis Ct

City Woodridge State IL Zip Code 60517-1457

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

Name of Employer n/a Occupation Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2015
Transaction ID : VQCFK9KJDY2

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Irfan Ahmad

Mailing Address 4200 Winter Ln

City Valparaiso State IN Zip Code 46385-6306

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

Name of Employer La Porte Hospital Occupation Doctor

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
 03 / 21 / 2015
Transaction ID : VQCFK9KJE15

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....	1250.00
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 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Muneeb Ahmad
 Full Name (Last, First, Middle Initial)
 Mailing Address 25737 W Sunnymere Dr
 City Plainfield State IL Zip Code 60585-1290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation n/a
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2015
Transaction ID : VQCFK9KJDS2
 Amount of Each Receipt this Period
 300.00

B. Nadeem Ahmad
 Full Name (Last, First, Middle Initial)
 Mailing Address 3424 Noble Dr
 City Woodridge State IL Zip Code 60517-1414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Doctor
 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
 03 / 21 / 2015
Transaction ID : VQCFK9KJDM3
 Amount of Each Receipt this Period
 250.00

C. Umar T Ahmad
 Full Name (Last, First, Middle Initial)
 Mailing Address 4020 Schillinger Dr
 City Naperville State IL Zip Code 60564-7156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NASHnal Soil Testing, LLC Occupation Chairman/CEO
 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
 03 / 21 / 2015
Transaction ID : VQCFK9KJDW6
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 176
	<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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Mark L. Alderman

Mailing Address 1900 Market St

City Philadelphia State PA Zip Code 19103-3513

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

Name of Employer Cozen O'Connor Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : VQCFK9KJCR1

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Christine Althoff

Mailing Address 5101 Hawthorne Rd

City Little Rock State AR Zip Code 72207-3711

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

Name of Employer self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2015
Transaction ID : VQCFK9JYBC9

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Dwight Anderson

Mailing Address 320 Park Ave
FI 27

City New York State NY Zip Code 10022-6815

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

Name of Employer Ospraie Management, L.P. Occupation Founder

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2015
Transaction ID : VQCFK9KDBP5

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
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 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Akbar Younus Ansari

Mailing Address 13215 Falls Rd

City State Zip Code
Cockeysville MD 21030-1411

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

Name of Employer Occupation
Self Employed Self Employed

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
 03 / 21 / 2015
Transaction ID : VQCFK9KJE57

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Ahmad Ashfaq

Mailing Address PO Box H

City State Zip Code
Hinsdale IL 60522-6008

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

Name of Employer Occupation
Northwestern Memorial Hospital Doctor

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
 03 / 21 / 2015
Transaction ID : VQCFK9KJDT0

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Hasan Abid Askari

Mailing Address 6932 Sandy Creek Ct

City State Zip Code
Clarksville MD 21029-1747

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

Name of Employer Occupation
HASCON President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2015
Transaction ID : VQCFK9KJF26

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Gary L. Attman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3712 Michelle Way
 City Baltimore State MD Zip Code 21208-1742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Future Care Occupation Managing Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2015
Transaction ID : VQCFK9KJB19
 Amount of Each Receipt this Period
 5000.00

B. Sarah Rose Attman
 Full Name (Last, First, Middle Initial)
 Mailing Address 11717 Montana Ave Apt 205
 City Los Angeles State CA Zip Code 90049-4760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sarah Rose Public Relations, LLC Occupation Principal
 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
 03 / 18 / 2015
Transaction ID : VQCFK9JXWJ2
 Amount of Each Receipt this Period
 500.00

C. Salman Banaei
 Full Name (Last, First, Middle Initial)
 Mailing Address 1115 12th St NW Apt 703
 City Washington State DC Zip Code 20005-4658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Markit Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2015
Transaction ID : VQCFK9JYC96
 Amount of Each Receipt this Period
 290.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5790.00
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 11 OF 176		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Andrew E. Bederman

Mailing Address 1111 Bonifant St
Ste 360

City Silver Spring State MD Zip Code 20910-3310

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

Name of Employer self Occupation attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : VQCFK9KDBC6

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Susan Beeghly

Mailing Address 7856 Ames Cir

City Omaha State NE Zip Code 68134-3308

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2015
Transaction ID : VQCFK9JXFT8

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
c. Susan Beeghly

Mailing Address 7856 Ames Cir

City Omaha State NE Zip Code 68134-3308

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2015
Transaction ID : VQCFK9KDTR2

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
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 12 OF 176
	<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	

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Susan Beeghly
Full Name (Last, First, Middle Initial)

Mailing Address 7856 Ames Cir

City Omaha State NE Zip Code 68134-3308

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : VQCFK9KD5J0

Amount of Each Receipt this Period
 50.00

B. Ray Bellamy
Full Name (Last, First, Middle Initial)

Mailing Address 509 Vinnedge Ride

City Tallahassee State FL Zip Code 32303

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

Name of Employer Tallahassee orthopedic clinic Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : VQCFK9KD2X1

Amount of Each Receipt this Period
 250.00

C. Brad Belzak
Full Name (Last, First, Middle Initial)

Mailing Address 1303 Heyward Rd

City Chesterbrook State PA Zip Code 19087-5709

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

Name of Employer CG Occupation Consultant

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
 03 / 18 / 2015
Transaction ID : VQCFK9JXVM7

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 176
	<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	

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. William Benenson
Full Name (Last, First, Middle Initial)

Mailing Address 605 Hightree Rd

City Santa Monica State CA Zip Code 90402-1007

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

Name of Employer Benenson Productions Occupation Filmmaker

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
 04 / 23 / 2015
Transaction ID : VQCFK9KCWZ4

Amount of Each Receipt this Period
 5000.00

B. Walter Bishop
Full Name (Last, First, Middle Initial)

Mailing Address 1345 S Capitol St SW 515

City Washington State DC Zip Code 20003-3571

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

Name of Employer Truman National Security Project Occupation Political Affairs Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2015
Transaction ID : VQCFK9JYMJ5

Amount of Each Receipt this Period
 250.00

C. James J. Blanchard
Full Name (Last, First, Middle Initial)

Mailing Address 1200 N Nash St Apt 1115

City Arlington State VA Zip Code 22209-3612

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

Name of Employer DLA Piper Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2015
Transaction ID : VQCFK9KJDE5

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....▶	7750.00
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 15 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Eric Lee Bryant
 Full Name (Last, First, Middle Initial)
 Mailing Address 3719 Chesholm Rd
 City Baltimore State MD Zip Code 21216-2414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015
Transaction ID : VQCFK9JXFW4
 Amount of Each Receipt this Period
 500.00

B. Rob Cacy
 Full Name (Last, First, Middle Initial)
 Mailing Address 68 Bradhurst Ave Ph 2C
 City New York State NY Zip Code 10039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation writer
 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
 04 / 01 / 2015
Transaction ID : VQCFK9JYD23
 Amount of Each Receipt this Period
 250.00

C. Richard Cahoon
 Full Name (Last, First, Middle Initial)
 Mailing Address 2490 Fairmount Blvd
 City Cleveland State OH Zip Code 44106-3175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2015
Transaction ID : VQCFK9JYM45
 Amount of Each Receipt this Period
 2500.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Richard Cahoon
 Full Name (Last, First, Middle Initial)
 Mailing Address 2490 Fairmount Blvd
 City Cleveland State OH Zip Code 44106-3175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : VQCFK9KDH36
 Amount of Each Receipt this Period
 2500.00

B. Constance R. Caplan
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 Cathedral St
 City Baltimore State MD Zip Code 21201-0815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Time Group Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015
Transaction ID : VQCFK9KDXP2
 Amount of Each Receipt this Period
 2500.00

C. James Cauley
 Full Name (Last, First, Middle Initial)
 Mailing Address 3700 Kernen Cout
 City Louisville State KY Zip Code 40241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Plus1Consulting Occupation Political Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015
Transaction ID : VQCFK9KJDC9
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 7500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 176
	<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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial) A. Isaac Chehebar		Date of Receipt MM / DD / YYYY 04 / 27 / 2015
Mailing Address 1407 Broadway Rm 3805		Transaction ID : VQCFK9KK1X8
City New York	State NY	Zip Code 10018-2324
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Skiva International	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. John P. Coale Esq.		Date of Receipt MM / DD / YYYY 04 / 16 / 2015
Mailing Address 2901 Fessenden St NW		Transaction ID : VQCFK9KKJ03
City Washington	State DC	Zip Code 20008-1026
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 570.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00	* In-Kind: Travel Expenses

Full Name (Last, First, Middle Initial) C. Sally Collins		Date of Receipt MM / DD / YYYY 06 / 11 / 2015
Mailing Address 3083 Arbolado Ct		Transaction ID : VQCFK9KK1Q0
City Walnut Creek	State CA	Zip Code 94598-3803
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Jewelry Maker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	2570.00
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 18 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Brian Coyne

Mailing Address 1325 19th Rd S

City State Zip Code
Arlington VA 22202-1637

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

Name of Employer Occupation
Amerigroup VP of Government Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2015
Transaction ID : VQCFK9KJDD7

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Stephen Cozen

Mailing Address 1900 Market St
FI 3

City State Zip Code
Philadelphia PA 19103-3511

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

Name of Employer Occupation
Cozen O'Connor Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : VQCFK9KJCQ3

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. Ana Lilia Cuevas

Mailing Address 201 Ocean Ave
Unit 903P

City State Zip Code
Santa Monica CA 90402-1422

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

Name of Employer Occupation
Self Personal assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2015
Transaction ID : VQCFK9KD421

Amount of Each Receipt this Period
2700.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6200.00

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 19 OF 176
	<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

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Sean Curran
Full Name (Last, First, Middle Initial)

Mailing Address 59 Highland Ave
Apt 1

City State Zip Code
Sudbury MA 01776

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

Name of Employer Occupation
Waterville Consulting Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2015

Transaction ID : VQCFK9KK219

Amount of Each Receipt this Period
1000.00

B. Clinton Daly
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 686

City State Zip Code
Brooklandville MD 21022-0686

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

Name of Employer Occupation
Brown Advisory Investment Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2015

Transaction ID : VQCFK9KDC04

Amount of Each Receipt this Period
250.00

c. Mark H. Damby
Full Name (Last, First, Middle Initial)

Mailing Address 1301 N 31st St
One Brewery Park

City State Zip Code
Philadelphia PA 19121-4403

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

Name of Employer Occupation
Pennrose Properties LLC real estate developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2015

Transaction ID : VQCFK9KJE23

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	6250.00
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 176
<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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial) A. Greg Daneke		Date of Receipt 03 / 24 / 2015 Transaction ID : VQCFK9JY9H3
Mailing Address 1928 E Laguna Dr		Amount of Each Receipt this Period 500.00
City Tempe	State AZ	Zip Code 85282-5913
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer ASU	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Earl Devaney		Date of Receipt 03 / 08 / 2015 Transaction ID : VQCFK9JYAC6
Mailing Address 746 Via Genova		Amount of Each Receipt this Period 500.00
City Deerfield Beach	State FL	Zip Code 33442-8628
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Manny A Diaz		Date of Receipt 03 / 30 / 2015 Transaction ID : VQCFK9KJAZ3
Mailing Address 1221 Brickell Ave Ste 1020		Amount of Each Receipt this Period 2500.00
City Miami	State FL	Zip Code 33131-3229
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Lydecker Diaz	Occupation Senior Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
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 22 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. James Dougherty

Mailing Address 2510 Bona Rd

City State Zip Code
Wilmington DE 19810-2220

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

Name of Employer Occupation
Boeing Toolmaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2015
Transaction ID : VQCFK9JY0P3

Amount of Each Receipt this Period
625.00

Full Name (Last, First, Middle Initial)
B. James Dougherty

Mailing Address 2510 Bona Rd

City State Zip Code
Wilmington DE 19810-2220

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

Name of Employer Occupation
Boeing Toolmaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2015
Transaction ID : VQCFK9JY1Z7

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. William (Bill) Felmlee

Mailing Address PO Box 35

City State Zip Code
Oakton VA 22124-0035

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

Name of Employer Occupation
N/A Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2015
Transaction ID : VQCFK9KD4X4

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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 23 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Peter Fox-Penner

Mailing Address 300 E Broad St

City Falls Church State VA Zip Code 22046-3503

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

Name of Employer The Brattle Group Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015
Transaction ID : VQCFK9KJB27

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Elaine K Freeman

Mailing Address 1026 Rolandvue Rd

City Ruxton State MD Zip Code 21204-6815

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

Name of Employer N/A Occupation Retired

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
 05 / 22 / 2015
Transaction ID : VQCFK9KD5P2

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Herbert D. Frerichs Jr.

Mailing Address 642 Oak Farm Ct

City Timonium State MD Zip Code 21093-7004

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

Name of Employer Venable LLP Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015
Transaction ID : VQCFK9KDXQ0

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 176
	(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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial) A. Geoffrey R. Garinther		Date of Receipt MM / DD / YYYY 05 / 12 / 2015 Transaction ID : VQCFK9KK1R8
Mailing Address 11529 Falls Rd		Amount of Each Receipt this Period 1000.00
City Timonium	State MD	Zip Code 21093-1610
FEC ID number of contributing federal political committee.	C	
Name of Employer Venable LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Michael C. Gelman		Date of Receipt MM / DD / YYYY 02 / 24 / 2015 Transaction ID : VQCFK9KJCF0
Mailing Address 11 W Lenox St		Amount of Each Receipt this Period 3500.00
City Chevy Chase	State MD	Zip Code 20815-4208
FEC ID number of contributing federal political committee.	C	
Name of Employer Gelman, Rosenberg & Freedman	Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) C. Ralph M. Gindi		Date of Receipt MM / DD / YYYY 04 / 11 / 2015 Transaction ID : VQCFK9KJCB9
Mailing Address		Amount of Each Receipt this Period 1000.00
City Brooklyn	State NY	Zip Code 11223
FEC ID number of contributing federal political committee.	C	
Name of Employer Bluestar Alliance	Occupation COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
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 25 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Stephen Golden

Mailing Address 3047 E Placita Los Siete Adobes

City Tucson State AZ Zip Code 85718-3135

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

Name of Employer N/A Occupation N/A

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
 03 / 29 / 2015
Transaction ID : VQCFK9JYBJ6

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Virginia B. Gorsevski

Mailing Address 2230 47th St NW

City Washington State DC Zip Code 20007-1033

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

Name of Employer IUCN Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2015
Transaction ID : VQCFK9JYDF6

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
C. Virginia B. Gorsevski

Mailing Address 2230 47th St NW

City Washington State DC Zip Code 20007-1033

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

Name of Employer IUCN Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2015
Transaction ID : VQCFK9JXZR6

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

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 26 OF 176
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. William Hall
Full Name (Last, First, Middle Initial)

Mailing Address 15601 Williams Rd SE

City Cumberland State MD Zip Code 21502-7976

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2015
Transaction ID : VQCFK9JY873

Amount of Each Receipt this Period
 250.00

B. Warren Hamel
Full Name (Last, First, Middle Initial)

Mailing Address 160 Rugby Rd

City Arnold State MD Zip Code 21012-2117

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

Name of Employer Venable LLP Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2015
Transaction ID : VQCFK9KDES4

Amount of Each Receipt this Period
 1000.00

C. James J. Hanks Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 1159 Riverside Ave

City Baltimore State MD Zip Code 21230-4119

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

Name of Employer Venable Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2015
Transaction ID : VQCFK9KDXR8

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
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 27 OF 176
	(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)
O' Say Can You See PAC

A. Michael J Heller
Full Name (Last, First, Middle Initial)

Mailing Address 761 Mustin Ln

City Villanova State PA Zip Code 19085-2013

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

Name of Employer Cozen O'Connor Occupation President & CEO

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
 01 / 15 / 2015
Transaction ID : VQCFK9KJCS9

Amount of Each Receipt this Period
 500.00

B. Robert A. Hoffman Esq.
Full Name (Last, First, Middle Initial)

Mailing Address 1005 Fallscroft Way

City Lutherville Timonium State MD Zip Code 21093-1707

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

Name of Employer Venable LLP Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2015
Transaction ID : VQCFK9KED28

Amount of Each Receipt this Period
 1000.00

C. Alexander Iannacio
Full Name (Last, First, Middle Initial)

Mailing Address 4301 Massachusetts Ave NW Apt 6008

City Washington State DC Zip Code 20016-5570

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

Name of Employer N/A Occupation Student

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : VQCFK9JXMT0

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 176
	<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)
O' Say Can You See PAC

A. Atif Javed Ijaz
Full Name (Last, First, Middle Initial)

Mailing Address 1080 Mount Vernon Dr

City Grayslake State IL Zip Code 60030-2643

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

Name of Employer Allstate Insurance Occupation AVP AF O

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
 03 / 21 / 2015
Transaction ID : VQCFK9KJDNO

Amount of Each Receipt this Period
 500.00

B. Stuart Ingis
Full Name (Last, First, Middle Initial)

Mailing Address 7702 Marbury Rd

City Bethesda State MD Zip Code 20817-6227

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

Name of Employer Venable LLP Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2015
Transaction ID : VQCFK9KED36

Amount of Each Receipt this Period
 1000.00

C. Katherine Janeway
Full Name (Last, First, Middle Initial)

Mailing Address 99 Union St
Unit 1902

City Seattle State WA Zip Code 98101-5002

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2015
Transaction ID : VQCFK9KDSJ1

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
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 29 OF 176
	<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)
O' Say Can You See PAC

A. Andrew V. Jezic
 Full Name (Last, First, Middle Initial)
 Mailing Address 2101 Hounds Run Pl
 City Silver Spring State MD Zip Code 20906-6327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **04 / 25 / 2015**
Transaction ID : VQCFK9KDGM8
 Amount of Each Receipt this Period **1000.00**

B. Wayne Jordan
 Full Name (Last, First, Middle Initial)
 Mailing Address 436 14th St Ste 1417
 City Oakland State CA Zip Code 94612-2716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Jordan Real Estate Investments Occupation President & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **02 / 24 / 2015**
Transaction ID : VQCFK9KJCG8
 Amount of Each Receipt this Period **5000.00**

C. Rick Justis
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Pimentel Ct Ste B8
 City Novato State CA Zip Code 94949-5658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cloudbeam Occupation Biz Dev
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **04 / 21 / 2015**
Transaction ID : VQCFK9KD769
 Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 176
	<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

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Rick Justis
Full Name (Last, First, Middle Initial)

Mailing Address 20 Pimentel Ct
Ste B8

City Novato State CA Zip Code 94949-5658

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

Name of Employer Cloudbeam Occupation Biz Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
05 / 20 / 2015
Transaction ID : VQCFK9KDVT0

Amount of Each Receipt this Period
200.00

B. Woody Kaplan
Full Name (Last, First, Middle Initial)

Mailing Address 2 Commonwealth Ave
Apt 14A

City Boston State MA Zip Code 02116-3158

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

Name of Employer Civil Liberties List Occupation Provocateur

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
04 / 27 / 2015
Transaction ID : VQCFK9KK1Y6

Amount of Each Receipt this Period
1000.00

C. Francis X. Kelly
Full Name (Last, First, Middle Initial)

Mailing Address 301 International Cir

City Hunt Valley State MD Zip Code 21030-1334

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

Name of Employer Kelly & Associates Occupation Founder and Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
03 / 29 / 2015
Transaction ID : VQCFK9KJF18

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....▶	3520.00
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 31 OF 176
	<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)
O' Say Can You See PAC

A. Kevin F. Kelly
 Full Name (Last, First, Middle Initial)
 Mailing Address 7819 Montvale Way
 City State Zip Code
 Mc Lean VA 22102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Van Scoyoc Associates Lawyer/Lobbyist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2015
Transaction ID : VQCFK9KJB01
 Amount of Each Receipt this Period
 5000.00

B. Gavan Kennedy
 Full Name (Last, First, Middle Initial)
 Mailing Address 6216 Beachway Dr
 City State Zip Code
 Falls Church VA 22041-1423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Employed Real Estate/Student
 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
 04 / 21 / 2015
Transaction ID : VQCFK9KDP13
 Amount of Each Receipt this Period
 500.00

C. Jeffrey Kerr
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 West Cir
 City State Zip Code
 Concord MA 01742-4916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 N/A Not Employed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2015
Transaction ID : VQCFK9KD601
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	5750.00
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 32 OF 176
	<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	

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Abdul Khan
Full Name (Last, First, Middle Initial)

Mailing Address 1118 La Forestiere Ct

City State Zip Code
Dyer IN 46311-1264

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

Name of Employer Occupation
St. Anthony Medical center Doctor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2015
Transaction ID : VQCFK9KJE07

Amount of Each Receipt this Period
1000.00

B. Kamran Khan
Full Name (Last, First, Middle Initial)

Mailing Address 2612 Cody Ct

City State Zip Code
Aurora IL 60503-6267

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2015
Transaction ID : VQCFK9KJDR4

Amount of Each Receipt this Period
250.00

c. Margery D Knight
Full Name (Last, First, Middle Initial)

Mailing Address 628 Snow Goose Ln

City State Zip Code
Annapolis MD 21409-5757

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

Name of Employer Occupation
Unitarian Universalist Church of Annap Consultant

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
04 / 25 / 2015
Transaction ID : VQCFK9KDBV4

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
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 33 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Margery D Knight
 Full Name (Last, First, Middle Initial)
 Mailing Address 628 Snow Goose Ln
 City Annapolis State MD Zip Code 21409-5757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Unitarian Universalist Church of Annap
 Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2015
Transaction ID : VQCFK9KDVP9
 Amount of Each Receipt this Period
 500.00

B. Margery D Knight
 Full Name (Last, First, Middle Initial)
 Mailing Address 628 Snow Goose Ln
 City Annapolis State MD Zip Code 21409-5757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Unitarian Universalist Church of Annap
 Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : VQCFK9KCYT8
 Amount of Each Receipt this Period
 100.00

C. Egon Lacher
 Full Name (Last, First, Middle Initial)
 Mailing Address 2000 Glades Rd Ste 410
 City Boca Raton State FL Zip Code 33431-8577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JR Bechtle & Co.
 Occupation Executive Recruiter
 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
 03 / 12 / 2015
Transaction ID : VQCFK9JXGX4
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
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 34 OF 176
(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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Michael Laskoff

Mailing Address 320 W 37th St
FI 7

City State Zip Code
New York NY 10018-4232

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

Name of Employer Occupation
AbilTo CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2015

Transaction ID : VQCFK9JYC05

Amount of Each Receipt this Period
2229.32

Full Name (Last, First, Middle Initial)
B. Michael Laskoff

Mailing Address 320 W 37th St
FI 7

City State Zip Code
New York NY 10018-4232

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

Name of Employer Occupation
AbilTo CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2015

Transaction ID : VQCFK9JYC70

Amount of Each Receipt this Period
270.68

Full Name (Last, First, Middle Initial)
C. Edward Lazzarin

Mailing Address 6085 Bird Rd

City State Zip Code
Miami FL 33155-5254

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

Name of Employer Occupation
self surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2015

Transaction ID : VQCFK9JY999

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2750.00

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 35 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Brian P Lee

Mailing Address 517 Overdale Rd

City Baltimore State MD Zip Code 21229-2413

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

Name of Employer Nexion Health Management Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : VQCFK9KD1V2

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Daniel H. Leeds

Mailing Address 3205 R St NW

City Washington State DC Zip Code 20007-2941

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

Name of Employer Fulcrum Investments Occupation executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2015
Transaction ID : VQCFK9KD2E2

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. Frank Lewis jr

Mailing Address 514 Greenbriar Ct

City Stillwater State OK Zip Code 74075

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

Name of Employer land run united country realty Occupation Realtor Commercial

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2015
Transaction ID : VQCFK9JYBM0

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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 36 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Thomas M. Ligan

Mailing Address 15 Steele Ave

City Annapolis State MD Zip Code 21401-2840

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

Name of Employer Venable LLP Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2015
Transaction ID : VQCFK9KED44

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Alan Lunin

Mailing Address 4137 Derby Pl

City Oviedo State FL Zip Code 32765-7561

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

Name of Employer SELF Occupation Arbitrator/Mediator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2015
Transaction ID : VQCFK9JY8P9

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Kaleem Malik

Mailing Address 101 Ambrance Dr

City Burr Ridge State IL Zip Code 60527-0801

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

Name of Employer Meridian Emergency Consultants MD Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2015
Transaction ID : VQCFK9KJDG1

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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

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

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

FOR LINE NUMBER: PAGE 37 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Yasser Malik
 Full Name (Last, First, Middle Initial)
 Mailing Address 839 Chestnut St
 City Hinsdale State IL Zip Code 60521-3008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bank of America Occupation Credit Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2015
Transaction ID : VQCFK9KJDH9
 Amount of Each Receipt this Period
 500.00

B. Kevin Mallon
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 Elm Ave
 City Rahway State NJ Zip Code 07065-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fishman & Mallon, LLP Occupation Attorney
 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
 03 / 23 / 2015
Transaction ID : VQCFK9JY881
 Amount of Each Receipt this Period
 250.00

C. Brendan R. Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 North Carolina Ave
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Book Hill Partners Occupation Public Affairs
 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
 02 / 09 / 2015
Transaction ID : VQCFK9JY705
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
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 38 OF 176
	<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	

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Richard Martin
Full Name (Last, First, Middle Initial)

Mailing Address 1001 Locust St

City Kansas City State MO Zip Code 64106-1904

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

Name of Employer JE Dunn Occupation Director of Govt Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 12 / 2015
Transaction ID : VQCFK9KJDA4

Amount of Each Receipt this Period 250.00

B. Carolyn Mayers
Full Name (Last, First, Middle Initial)

Mailing Address 27430 Cherry Tree Ln

City Onancock State VA Zip Code 23417-3518

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

Name of Employer Self Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2015
Transaction ID : VQCFK9KDRF7

Amount of Each Receipt this Period 250.00

C. Ted McCluskey
Full Name (Last, First, Middle Initial)

Mailing Address 3950 Wyoming St
FI 1

City Saint Louis State MO Zip Code 63116-3918

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

Name of Employer Midwest Kickball LLC Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 16 / 2015
Transaction ID : VQCFK9KDBD4

Amount of Each Receipt this Period 350.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 176
	<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	

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Louis McDonald
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1464

City Manchester	State NH	Zip Code 03105-1464
--------------------	-------------	------------------------

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

Name of Employer O'Malley for President	Occupation Press/Digital Assistant
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2015

Transaction ID : VQCFK9KD1W0

Amount of Each Receipt this Period
300.00

B. Frank McGovern
Full Name (Last, First, Middle Initial)
Mailing Address 5601 Palomar Ln

City Dallas	State TX	Zip Code 75229-6417
----------------	-------------	------------------------

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

Name of Employer Clearview	Occupation Owner
-------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2015

Transaction ID : VQCFK9KDF59

Amount of Each Receipt this Period
1000.00

c. Philip McGuire
Full Name (Last, First, Middle Initial)
Mailing Address 6819 Delaware St

City Chevy Chase	State MD	Zip Code 20815-4165
---------------------	-------------	------------------------

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

Name of Employer CFTC	Occupation Attorney
--------------------------	------------------------

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
04	/	20	/	2015

Transaction ID : VQCFK9KD0K6

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	1800.00
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 40 OF 176
	<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)
O' Say Can You See PAC

A. David McNear
 Full Name (Last, First, Middle Initial)
 Mailing Address 3820 Python St
 City Panama City Beach State FL Zip Code 32408-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Consultant
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2015
Transaction ID : VQCFK9JXVA8
 Amount of Each Receipt this Period
 250.00
 Aggregate Year-to-Date ▼
 250.00

B. James G Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 14144
 City Parkville State MO Zip Code 64152-0644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Small Business Owner
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2015
Transaction ID : VQCFK9JYAA0
 Amount of Each Receipt this Period
 500.00
 Aggregate Year-to-Date ▼
 500.00

C. Josh Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1535 6th St Apt 305
 City Santa Monica State CA Zip Code 90401-2515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Shinnecock Partners Occupation Financial Analyst
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2015
Transaction ID : VQCFK9JYAY8
 Amount of Each Receipt this Period
 100.00
 Aggregate Year-to-Date ▼
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 176
	<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)
O' Say Can You See PAC

A. Josh Miller
Full Name (Last, First, Middle Initial)

Mailing Address 1535 6th St
Apt 305

City Santa Monica State CA Zip Code 90401-2515

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

Name of Employer Shinnecock Partners Occupation Financial Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 28 / 2015
Transaction ID : VQCFK9JYB38

Amount of Each Receipt this Period
400.00

B. Faith C. Millspaugh
Full Name (Last, First, Middle Initial)

Mailing Address 107 Castlewood Rd

City Baltimore State MD Zip Code 21210-1360

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

Name of Employer Mt. Vernon Place Conservancy Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
05 / 12 / 2015
Transaction ID : VQCFK9KED52

Amount of Each Receipt this Period
1000.00

C. Vivikka M. Mouldrem
Full Name (Last, First, Middle Initial)

Mailing Address 4072 Cadle Creek Rd

City Edgewater State MD Zip Code 21037-4514

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

Name of Employer self Occupation consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 16 / 2015
Transaction ID : VQCFK9KDJQ7

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1650.00

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

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

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

FOR LINE NUMBER: PAGE 42 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Sandra P. Moodispaw
 Full Name (Last, First, Middle Initial)
 Mailing Address 103 E Bay View Dr
 City Annapolis State MD Zip Code 21403-4105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Not employed Occupation Not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : VQCFK9KJCH6
 Amount of Each Receipt this Period
 5000.00

B. Munum Naeem
 Full Name (Last, First, Middle Initial)
 Mailing Address 2271 Sable Oaks Dr
 City Naperville State IL Zip Code 60564-5665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Occupation Vice President TEchnical Operations PI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2015
Transaction ID : VQCFK9KJDZ9
 Amount of Each Receipt this Period
 5000.00

C. Elizabeth Naftali
 Full Name (Last, First, Middle Initial)
 Mailing Address 11971 Lockridge Rd
 City Studio City State CA Zip Code 91604-4170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015
Transaction ID : VQCFK9JXFM1
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 12500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 43 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Mir A Naser

Mailing Address 23W281 Foxcroft Dr

City State Zip Code
Glen Ellyn IL 60137-6532

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

Name of Employer Occupation
Kildare & 67th Marathon Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2015
Transaction ID : VQCFK9KJDX4

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Asad Nasim

Mailing Address 196 Hillside Dr

City State Zip Code
Bolingbrook IL 60440-6145

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

Name of Employer Occupation
Microsoft Corporation Sr. Technical Account Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2015
Transaction ID : VQCFK9KJDP8

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Damian C. O'Doherty

Mailing Address 508 W Joppa Rd

City State Zip Code
Towson MD 21204-3832

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

Name of Employer Occupation
KO Public Affairs Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2015
Transaction ID : VQCFK9JWNZ4

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00

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 44 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Andrew S. Offit

Mailing Address 1429 Commonwealth Ave

City State Zip Code
Newton MA 02465-2829

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

Name of Employer Occupation
City of Somerville Special Advisor to the Mayor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : VQCFK9KK227

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
B. Walter Michael Paroby

Mailing Address 1308 Harbor Rd
Apt 51

City State Zip Code
Annapolis MD 21403-4719

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

Name of Employer Occupation
Sprint Nextel Telecommunications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2015
Transaction ID : VQCFK9JY5M7

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Stanley Parry

Mailing Address 2020 Cowper St

City State Zip Code
Palo Alto CA 94301-3809

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

Name of Employer Occupation
Retired Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2015
Transaction ID : VQCFK9KD2R1

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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 45 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Amran Pasha

Mailing Address 7100 Minstrel Way

City Columbia State MD Zip Code 21045-5243

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

Name of Employer Self-Employed Occupation Fuel Service Station

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **03 / 29 / 2015**

Transaction ID : VQCFK9KJF42

Amount of Each Receipt this Period **1000.00**

Full Name (Last, First, Middle Initial)
B. James Passin

Mailing Address 152 W 57th St FI 24

City New York State NY Zip Code 10019-3466

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

Name of Employer Eastern Star Occupation Fund Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2300.00**

Date of Receipt **05 / 22 / 2015**

Transaction ID : VQCFK9KDB27

Amount of Each Receipt this Period **2300.00**

Full Name (Last, First, Middle Initial)
C. Robert Pennoyer

Mailing Address 33 E 70th St

City New York State NY Zip Code 10021-4985

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

Name of Employer Patterson Belknap Webb & Tyler Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 17 / 2015**

Transaction ID : VQCFK9KD471

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **3550.00**

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 46 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

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

Mailing Address 10 High St

City State Zip Code
Jamestown RI 02835

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

Name of Employer Occupation
n/a Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2015
Transaction ID : VQCFK9JY6W3

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Michael J. Perik

Mailing Address 10 High St

City State Zip Code
Jamestown RI 02835-1211

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

Name of Employer Occupation
HEP LLC CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2015
Transaction ID : VQCFK9JY721

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Anthony Phillips

Mailing Address 5246 Lymbar Dr

City State Zip Code
Houston TX 77096-5216

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

Name of Employer Occupation
Vinson, Elkins LLP Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : VQCFK9KCYM1

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 10250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 176
	<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

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Lia Poteet
Full Name (Last, First, Middle Initial)
Mailing Address 1610 G St SE
City Washington State DC Zip Code 20003-3131
FEC ID number of contributing federal political committee. **C**
Name of Employer The Partnership Project Occupation Program Assistant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 02 / 10 / 2015
Transaction ID : VQCFK9JY8E8
Amount of Each Receipt this Period 1600.00

B. Lia Poteet
Full Name (Last, First, Middle Initial)
Mailing Address 1610 G St SE
City Washington State DC Zip Code 20003-3131
FEC ID number of contributing federal political committee. **C**
Name of Employer The Partnership Project Occupation Program Assistant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1640.00

Date of Receipt 02 / 13 / 2015
Transaction ID : VQCFK9JYAM9
Amount of Each Receipt this Period 40.00

c. John C. Poulard
Full Name (Last, First, Middle Initial)
Mailing Address 10516 Stable Ln
City Potomac State MD Zip Code 20854-3866
FEC ID number of contributing federal political committee. **C**
Name of Employer Phillips Electronics Occupation Director of Government Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 19 / 2015
Transaction ID : VQCFK9JY033
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1890.00
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 48 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Stacy Pratt
 Full Name (Last, First, Middle Initial)
 Mailing Address 833 W Lakeside Pl
 City Chicago State IL Zip Code 60640-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Fundraising Consultant
 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
 05 / 16 / 2015
Transaction ID : VQCFK9KD447
 Amount of Each Receipt this Period
 500.00

B. Jane Pyenson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 189
 City Convent Station State NJ Zip Code 07961-0189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2015
Transaction ID : VQCFK9JY9R8
 Amount of Each Receipt this Period
 2500.00

C. Brad Queisser
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 East Forest Trail
 City Crownsville State MD Zip Code 21032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer mCapitol Management Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2015
Transaction ID : VQCFK9JXX03
 Amount of Each Receipt this Period
 250.00

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

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

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

FOR LINE NUMBER: PAGE 49 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Brad Queisser

Mailing Address 300 East Forest Trail

City State Zip Code
Crownsville MD 21032

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

Name of Employer Occupation
mCapitol Management President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2015
Transaction ID : VQCFK9KJEX6

Amount of Each Receipt this Period
65.00

Full Name (Last, First, Middle Initial)
B. Thomas H. Quinn

Mailing Address 575 7th St NW

City State Zip Code
Washington DC 20004-1607

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

Name of Employer Occupation
Venable, LLP Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2015
Transaction ID : VQCFK9KED60

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Jazibeh Qureshi

Mailing Address 5 Dipping Pond Ct

City State Zip Code
Lutherville MD 21093-3518

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2015
Transaction ID : VQCFK9KJF34

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2065.00

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 50 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Oscar T. Ramirez

Mailing Address 306 3rd Street SE
Apt 2413

City Washington State DC Zip Code 20003

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

Name of Employer Podesta Group Occupation Government Relations

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
 03 / 12 / 2015
Transaction ID : VQCFK9JXFR2

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Rick Reiter

Mailing Address 718 N Corona St

City Denver State CO Zip Code 80218-3409

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

Name of Employer self Occupation research consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : VQCFK9JXQR1

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. Anne Marie Rhoades

Mailing Address 2121 Market St
Apt 806

City Philadelphia State PA Zip Code 19103-1319

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

Name of Employer Self Occupation Political Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2015
Transaction ID : VQCFK9JXZJ9

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 176
	<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)
O' Say Can You See PAC

A. Deborah Rose
 Full Name (Last, First, Middle Initial)
 Mailing Address 4414 Harbour Town Dr
 City Beltsville State MD Zip Code 20705-1081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation Health consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 09 / 2015
Transaction ID : VQCFK9JY4Z3
 Amount of Each Receipt this Period
5000.00

B. Jonathan Rose
 Full Name (Last, First, Middle Initial)
 Mailing Address 5405 Tuckerman Ln Apt 513
 City Rockville State MD Zip Code 20852-7316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alston & Bird LLP Occupation Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 16 / 2015
Transaction ID : VQCFK9KJB43
 Amount of Each Receipt this Period
5000.00

C. Peter J. Rose
 Full Name (Last, First, Middle Initial)
 Mailing Address 409 Hanover St
 City Fredericksburg State VA Zip Code 22401-5936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2015
Transaction ID : VQCFK9KK1S6
 Amount of Each Receipt this Period
1250.00

SUBTOTAL of Receipts This Page (optional).....▶	11250.00
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 52 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Jeanne Weaver Ruesch
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Primrose St
 City Chevy Chase State MD Zip Code 20815-4228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ruesch family foundation Occupation COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015
Transaction ID : VQCFK9KJD46
 Amount of Each Receipt this Period
 5000.00

B. Thomas Safran
 Full Name (Last, First, Middle Initial)
 Mailing Address 11812 San Vicente Blvd Ste 600
 City Los Angeles State CA Zip Code 90049-5082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer : Thomas Safran & Associates Occupation Real Estate Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : VQCFK9KD5C3
 Amount of Each Receipt this Period
 5000.00

C. Ramesh C. Sardana DDS, MS, P
 Full Name (Last, First, Middle Initial)
 Mailing Address 6240 Audubon Dr
 City Columbia State MD Zip Code 21044-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Orthodontist
 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
 01 / 15 / 2015
Transaction ID : VQCFK9KJCT7
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 10250.00
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 53 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Stephen Sevigny

Mailing Address 1325 Oak Forest Dr

City Ormond Beach State FL Zip Code 32174-4023

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

Name of Employer Radiology associates Occupation Physician

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
 03 / 12 / 2015
Transaction ID : VQCFK9JXF62

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Adnan Shams

Mailing Address 10 E Ontario St Apt 3105

City Chicago State IL Zip Code 60611-4774

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

Name of Employer Shams, Rodriguez & Mozwecz, P.C. Occupation Lawyer

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
 03 / 21 / 2015
Transaction ID : VQCFK9KJDV8

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. James Shaw

Mailing Address 630 Broadway St

City San Antonio State TX Zip Code 78215-1822

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

Name of Employer Carabin Shaw Law Firm Occupation attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2015
Transaction ID : VQCFK9KDB84

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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 54 OF 176
	<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)
O' Say Can You See PAC

A. Anne Sheridan
 Full Name (Last, First, Middle Initial)
 Mailing Address 12909 Missionwood Way
 City Potomac State MD Zip Code 20854-2366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2015
Transaction ID : VQCFK9JX8W0
 Amount of Each Receipt this Period
 250.00

B. John Sherman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1909 Thames St Ste 201
 City Baltimore State MD Zip Code 21231-3538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Storyfarm Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2015
Transaction ID : VQCFK9JY7H9
 Amount of Each Receipt this Period
 250.00

C. John Sherman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1909 Thames St Ste 201
 City Baltimore State MD Zip Code 21231-3538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Storyfarm Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2015
Transaction ID : VQCFK9KDFA8
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 56 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Kent Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 5300 Waterbury Rd
 City Des Moines State IA Zip Code 50312-1924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Scheldrup Blades Schrock Smith P.C. Occupation Attorney
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : VQCFK9JXKK2
 Amount of Each Receipt this Period
 100.00

B. Kent Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 5300 Waterbury Rd
 City Des Moines State IA Zip Code 50312-1924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Scheldrup Blades Schrock Smith P.C. Occupation Attorney
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : VQCFK9JYB79
 Amount of Each Receipt this Period
 100.00

C. Kent Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 5300 Waterbury Rd
 City Des Moines State IA Zip Code 50312-1924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Scheldrup Blades Schrock Smith P.C. Occupation Attorney
 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
 04 / 10 / 2015
Transaction ID : VQCFK9KD2M0
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
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 57 OF 176
	<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	

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Maureen P. Smith
Full Name (Last, First, Middle Initial)
Mailing Address 57 Blenheim Terrace
City London State NW Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation 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
06 / 11 / 2015
Transaction ID : VQCFK9KK1N4
Amount of Each Receipt this Period
500.00

B. Nina Smith
Full Name (Last, First, Middle Initial)
Mailing Address 2601 Vicarage Ct
City Bowie State MD Zip Code 20721-3182
FEC ID number of contributing federal political committee. **C**
Name of Employer U.S. House of Representatives Occupation Communciations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 18 / 2015
Transaction ID : VQCFK9JXXZ8
Amount of Each Receipt this Period
250.00

C. Anthony Solis
Full Name (Last, First, Middle Initial)
Mailing Address 1055 W 7th St Ste 2140
City Los Angeles State CA Zip Code 90017-2676
FEC ID number of contributing federal political committee. **C**
Name of Employer Anthony M. Solis, APLC Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 23 / 2015
Transaction ID : VQCFK9KD285
Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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 58 OF 176
	(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)
O' Say Can You See PAC

A. Paul F. Strain
Full Name (Last, First, Middle Initial)

Mailing Address 750 E Pratt St
Ste 900

City Baltimore State MD Zip Code 21202-3157

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

Name of Employer Venable LLP Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 12 / 2015

Transaction ID : VQCFK9KED77

Amount of Each Receipt this Period
1000.00

B. Michael J Stratton
Full Name (Last, First, Middle Initial)

Mailing Address 1717 N Downing St

City Denver State CO Zip Code 80218-1056

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

Name of Employer Stratton & Associates Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
MM / DD / YYYY
03 / 21 / 2015

Transaction ID : VQCFK9KJE49

Amount of Each Receipt this Period
1000.00

C. Tracy A. Terrell
Full Name (Last, First, Middle Initial)

Mailing Address 3908 Cotton Tree Lane

City Burtonsville State MD Zip Code 20866

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

Name of Employer DDC Advocacy Occupation Associate Vice President, Client Relat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2015

Transaction ID : VQCFK9JYCT0

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
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 59 OF 176
	<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	

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Tracy A. Terrell
Full Name (Last, First, Middle Initial)

Mailing Address 3908 Cotton Tree Lane

City State Zip Code
Burtonsville MD 20866

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

Name of Employer Occupation
DDC Advocacy Associate Vice President, Client Relat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2015
Transaction ID : VQCFK9KCZH0

Amount of Each Receipt this Period
50.00

B. Robin Townley
Full Name (Last, First, Middle Initial)

Mailing Address 6735 Surreywood Ln

City State Zip Code
Bethesda MD 20817-1567

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

Name of Employer Occupation
Robin Townley Management Consulting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 16 / 2015
Transaction ID : VQCFK9KJB35

Amount of Each Receipt this Period
1000.00

C. Ted J. Trimpa
Full Name (Last, First, Middle Initial)

Mailing Address 1111 Race St
Unit B

City State Zip Code
Denver CO 80206-2834

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

Name of Employer Occupation
trimpa group, llc attorney

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
05 / 19 / 2015
Transaction ID : VQCFK9KDRT4

Amount of Each Receipt this Period
250.00

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 60 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Lauren Turner

Mailing Address 350 N Carmelina Ave

City Los Angeles State CA Zip Code 90049-2702

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

Name of Employer self Occupation interior designer

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
 04 / 09 / 2015
Transaction ID : VQCFK9KD9R5

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Sandra Vieira

Mailing Address 230 Dexter St
Unit D212

City Providence State RI Zip Code 02907-2475

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : VQCFK9KK201

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Judith Wagner

Mailing Address 63 French Rd

City Gilmanton State NH Zip Code 03237-5502

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2015
Transaction ID : VQCFK9KDTZ7

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5350.00

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 61 OF 176
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Judith Wagner
Full Name (Last, First, Middle Initial)
Mailing Address 63 French Rd
City Gilmanton State NH Zip Code 03237-5502
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 150.00

Date of Receipt 05 / 23 / 2015
Transaction ID : VQCFK9KCY03
Amount of Each Receipt this Period 50.00

B. Judith Wagner
Full Name (Last, First, Middle Initial)
Mailing Address 63 French Rd
City Gilmanton State NH Zip Code 03237-5502
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2015
Transaction ID : VQCFK9KDKS4
Amount of Each Receipt this Period 100.00

C. Dennis Walto
Full Name (Last, First, Middle Initial)
Mailing Address 1313 L St NW Ste 220
City Washington State DC Zip Code 20005-4144
FEC ID number of contributing federal political committee. **C**
Name of Employer International Medical Corps Occupation Senior Advisor, Innovations and Revenue
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 03 / 2015
Transaction ID : VQCFK9JYKS8
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00
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 62 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Kathryn White
 Full Name (Last, First, Middle Initial)
 Mailing Address 250 Bowery Apt 2
 City New York State NY Zip Code 10012-3010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation Not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00
 Date of Receipt 02 / 24 / 2015
Transaction ID : VQCFK9JYE84
 Amount of Each Receipt this Period 5000.00

B. Jon David Willingham
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 W 14th St Apt 5E
 City New York State NY Zip Code 10011-7409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Office of Robert F. Kennedy Jr. Occupation Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00
 Date of Receipt 02 / 09 / 2015
Transaction ID : VQCFK9JY7Z0
 Amount of Each Receipt this Period 500.00

C. Douglas B. Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Lakewood Shore Dr.
 City Rehoboth Beach State DE Zip Code 19971
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00
 Date of Receipt 03 / 12 / 2015
Transaction ID : VQCFK9KJD70
 Amount of Each Receipt this Period 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 8000.00
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 63 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Ed Young

Mailing Address 201 Eastern Blvd

City Baltimore State MD Zip Code 21221-6904

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

Name of Employer Young Insurance & Financial, Inc. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2015

Transaction ID : VQCFK9KDKD9

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Edward Young

Mailing Address 9808 Colenbourne Rd

City Perry Hall State MD Zip Code 21128-9808

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

Name of Employer Young Insurance & Financial, Inc. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2015

Transaction ID : VQCFK9KB825

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Ruth Zein

Mailing Address 4601 N Park Ave Apt 112

City Chevy Chase State MD Zip Code 20815-4533

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

Name of Employer ASRC Federal Occupation Competitive Intelligence

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2015

Transaction ID : VQCFK9KD4S3

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **750.00**

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 64 OF 176
	<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)
O' Say Can You See PAC

A. Ruth Zein
 Full Name (Last, First, Middle Initial)
 Mailing Address 4601 N Park Ave
 Apt 112
 City Chevy Chase State MD Zip Code 20815-4533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASRC Federal Occupation Competitive Intelligence
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 19 / 2015
Transaction ID : VQCFK9KCZK5
 Amount of Each Receipt this Period
50.00

B. Gabriel Zeitouni
 Full Name (Last, First, Middle Initial)
 Mailing Address 1948 E 1st St
 City Brooklyn State NY Zip Code 11223-2943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ez Apparel Occupation owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2015
Transaction ID : VQCFK9KJCA1
 Amount of Each Receipt this Period
1000.00

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	199815.00

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

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

FOR LINE NUMBER: PAGE 65 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. O'MALLEY FOR PRESIDENT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1501 Saint Paul St
 Ste 114
 City Baltimore State MD Zip Code 21202-2808
 FEC ID number of contributing federal political committee. **C** C00578658
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 46579.47

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015
Transaction ID : VQCFK9KKHX9
 Amount of Each Receipt this Period
 46579.47
 Expense Reimbursement

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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

SUBTOTAL of Receipts This Page (optional).....▶	46579.47
TOTAL This Period (last page this line number only).....▶	46579.47

: 97 `A -G79 @C B9CI G`H9LH`F9 @ H98 `HC `5 `F9DCFH`G7 <98I @ `CF `H9A -N5 HCB

Form/Schedule: SA15

Transaction ID : VQCFK9KKHX9

O'Malley for President, FEC ID C00578658, reimbursed O' Say Can You See PAC in the amount of \$46,579.47 on June 13, 2015. This transaction represents a reimbursement of O'Malley for President exploratory expenses paid by O'Say Can You See PAC

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 67 OF 176
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. LOEBSACK FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 3013
 City Iowa City State IA Zip Code 52244-3013
 FEC ID number of contributing federal political committee. **C** C00414318
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2512.49

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : VQCFK9KKJ78
 Amount of Each Receipt this Period
 2512.49
 Debt Payment - Refund of prior contribution

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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

SUBTOTAL of Receipts This Page (optional).....▶	2512.49
TOTAL This Period (last page this line number only).....▶	2512.49

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Adam F Goers

Mailing Address 442 M St NW
Apt 3

City Washington State DC Zip Code 20001-4655

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2015

Transaction ID : VQBGB9HJAR3

Amount of Each Disbursement this Period

1156.55

Full Name (Last, First, Middle Initial)

B. Annie Osborne

Mailing Address 2038 18th St NW
Apt PH3

City Washington State DC Zip Code 20009-1849

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2015

Transaction ID : VQBGB9HJBH1

Amount of Each Disbursement this Period

331.51

Full Name (Last, First, Middle Initial)

C. Benjamin Chou

Mailing Address 928 S St NW

City Washington State DC Zip Code 20001-4116

Purpose of Disbursement
Field Consulting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2015

Transaction ID : VQBGB9HJBQ8

Amount of Each Disbursement this Period

1500.00

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

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

2988.06

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Benjamin Chou

Mailing Address 928 S St NW

City Washington State DC Zip Code 20001-4116

Purpose of Disbursement
Travel Expenses

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
0	6		0	1		2	0	1	5

Transaction ID : VQBGB9HJAY1

Amount of Each Disbursement this Period

1	3	1	3	8
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Brad Elkins

Mailing Address 3460 14th St NW
Apt 24

City Washington State DC Zip Code 20010-3493

Purpose of Disbursement
Travel Expenses

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
0	6		0	1		2	0	1	5

Transaction ID : VQBGB9HJBD9

Amount of Each Disbursement this Period

3	8	4	9	5
---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Campaign Compliance Solutions

Mailing Address 1170 Cushing Cir
Apt 119

City Saint Paul State MN Zip Code 55108-5007

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	5

Transaction ID : VQBGB9HJAGO

Amount of Each Disbursement this Period

2	0	0	0	0
---	---	---	---	---

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

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

2	5	1	6	3	3
---	---	---	---	---	---

2	5	1	6	3	3
---	---	---	---	---	---

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Capitol Operations, LLC

Mailing Address 421 M St NW

City Washington State DC Zip Code 20001-4607

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		08		2015

Transaction ID : VQBGB9HJAE4

Amount of Each Disbursement this Period

10324.85

Full Name (Last, First, Middle Initial)

B. Carefirst Blue Cross Blue Shield

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement
Health Insurance

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		26		2015

Transaction ID : VQBGB9HJAN0

Amount of Each Disbursement this Period

4675.51

Full Name (Last, First, Middle Initial)

C. Carlee Griffeth

Mailing Address 159 Sibbald Dr

City Park Ridge State NJ Zip Code 07656-2329

Purpose of Disbursement
Communications Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2015

Transaction ID : VQBGB9HJB22

Amount of Each Disbursement this Period

1064.52

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

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

16064.88

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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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. John P. Coale Esq.

Mailing Address 2901 Fessenden St NW

City Washington State DC Zip Code 20008-1026

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 16 / 2015

Transaction ID : **VQCFK9KKJ03I**

Amount of Each Disbursement this Period

570.00

* In-Kind Received

Full Name (Last, First, Middle Initial)

B. Collin Wojciechowski

Mailing Address 8044 Forest Glen Dr

City Pasadena State MD Zip Code 21122-4805

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : **VQGBG9HJAS1**

Amount of Each Disbursement this Period

443.55

Full Name (Last, First, Middle Initial)

C. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2015

Transaction ID : **VQGBG9HJDN6**

Amount of Each Disbursement this Period

66.87

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

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

1080.42

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2015

Transaction ID : VQBGB9HJDM8

Amount of Each Disbursement this Period

59.04

Full Name (Last, First, Middle Initial)

B. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2015

Transaction ID : VQBGB9HJDP4

Amount of Each Disbursement this Period

75.44

Full Name (Last, First, Middle Initial)

C. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2015

Transaction ID : VQBGB9HJDQ2

Amount of Each Disbursement this Period

206.10

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

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

340.58

**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

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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : **VQBGB9HJDR0**

Amount of Each Disbursement this Period

227.91

Full Name (Last, First, Middle Initial)

B. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2015

Transaction ID : **VQBGB9HJBV0**

Amount of Each Disbursement this Period

10.27

Full Name (Last, First, Middle Initial)

C. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : **VQBGB9HJAF2**

Amount of Each Disbursement this Period

31.55

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

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

269.73

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HJDS8

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HJDE1

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HJCV3

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2015

Transaction ID : **VQBGB9HJD60**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

B. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2015

Transaction ID : **VQBGB9HJDH4**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2015

Transaction ID : **VQBGB9HJB64**

Amount of Each Disbursement this Period

145.00

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

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

185.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : **VQBGB9HJDK0**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : **VQBGB9HJPQ3**

Amount of Each Disbursement this Period

2912.12

Full Name (Last, First, Middle Initial)

C. Daniel Ensing

Mailing Address 475 K St NW
Unit 1125

City Washington State DC Zip Code 20001-5273

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2015

Transaction ID : **VQBGB9HJBX6**

Amount of Each Disbursement this Period

1126.79

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

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

4063.91

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Daniel Ensign

Mailing Address 475 K St NW
Unit 1125

City Washington State DC Zip Code 20001-5273

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : VQBGB9HJBC1

Amount of Each Disbursement this Period

1077.40

Full Name (Last, First, Middle Initial)

B. Daniel Gaynor

Mailing Address 1737 T St NW
Apt 302

City Washington State DC Zip Code 20009-7100

Purpose of Disbursement
Policy Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : VQBGB9HJAX3

Amount of Each Disbursement this Period

2521.30

Full Name (Last, First, Middle Initial)

C. Daniel Goetzel

Mailing Address 7920 Robison Rd

City Bethesda State MD Zip Code 20817-6929

Purpose of Disbursement
Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : VQBGB9HJJC25

Amount of Each Disbursement this Period

4450.00

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

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

8048.70

**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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. The Tidewater Inn

Mailing Address 101 E Dover St

City Easton State MD Zip Code 21601-3001

Purpose of Disbursement
Rental Deposit

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2015

Transaction ID : **VQBGB9HJPH6**

Amount of Each Disbursement this Period

4450.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Daniel Goetzel

Mailing Address 7920 Robison Rd

City Bethesda State MD Zip Code 20817-6929

Purpose of Disbursement
Reimbursements

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2015

Transaction ID : **VQBGB9HJJC75**

Amount of Each Disbursement this Period

8709.81

Full Name (Last, First, Middle Initial)

C. Waterfront Kitchen

Mailing Address 1417 Thames St

City Baltimore State MD Zip Code 21231-3442

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2015

Transaction ID : **VQBGB9HJQ02**

Amount of Each Disbursement this Period

8709.81

[MEMO ITEM]

*

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

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

8709.81

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Daniel Goetzel

Mailing Address 7920 Robison Rd

City Bethesda State MD Zip Code 20817-6929

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : VQBGB9HJB9

Amount of Each Disbursement this Period

1575.95

Full Name (Last, First, Middle Initial)

B. Democratic Governors Association

Mailing Address 1401 K St NW
Ste 200

City Washington State DC Zip Code 20005-3497

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2015

Transaction ID : VQBGB9HJBE7

Amount of Each Disbursement this Period

35211.92

Full Name (Last, First, Middle Initial)

C. Democratic Governors Association

Mailing Address 1401 K St NW
Ste 200

City Washington State DC Zip Code 20005-3497

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2015

Transaction ID : VQBGB9HJAQ5

Amount of Each Disbursement this Period

8802.98

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

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

45590.85

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Elisabeth Smith

Mailing Address 800 5th Ave
Apt 22E

City New York State NY Zip Code 10065-7289

Purpose of Disbursement
Communications Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2015

Transaction ID : VQBGB9HJAM2

Amount of Each Disbursement this Period

4375.00

Full Name (Last, First, Middle Initial)

B. Emelia Dillon

Mailing Address 624 Garden St

City Hoboken State NJ Zip Code 07030-3904

Purpose of Disbursement
Field Consulting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : VQBGB9HJAZ9

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

C. Erin Gorman

Mailing Address 300 L St NE
Apt 410

City Washington State DC Zip Code 20002-3517

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2015

Transaction ID : VQBGB9HJBT2

Amount of Each Disbursement this Period

154.14

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

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

6279.14

**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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Erin Gorman

Mailing Address 300 L St NE
Apt 410

City Washington State DC Zip Code 20002-3517

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2015

Transaction ID : VQBGB9HJB72

Amount of Each Disbursement this Period

437.00

Full Name (Last, First, Middle Initial)

B. Erin Gorman

Mailing Address 300 L St NE
Apt 410

City Washington State DC Zip Code 20002-3517

Purpose of Disbursement
Scheduling Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2015

Transaction ID : VQBGB9HJCT5

Amount of Each Disbursement this Period

3750.00

Full Name (Last, First, Middle Initial)

C. Eychaner Properties Inc

Mailing Address 3839 Merle Hay Rd

City Des Moines State IA Zip Code 50310-1307

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2015

Transaction ID : VQBGB9HJCE0

Amount of Each Disbursement this Period

4800.00

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

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

8987.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Franklin Walker

Mailing Address 6620 Kilmonoch Drive

City State Zip Code
Catonsville MD 02128

Purpose of Disbursement
Event Entertainment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **VQBGB9HJB07**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. H&W Printing

Mailing Address 3616 Oak Ln

City State Zip Code
Mount Rainier MD 20712-2128

Purpose of Disbursement
Printing Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **VQBGB9HJAD6**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. H&W Printing

Mailing Address 3616 Oak Ln

City State Zip Code
Mount Rainier MD 20712-2128

Purpose of Disbursement
Printing Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **VQBGB9HJBN2**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Hannah Burke

Mailing Address 4312 Warren St NW

City Washington State DC Zip Code 20016-2438

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2015

Transaction ID : VQBGB9HJB48

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Hannah Burke

Mailing Address 4312 Warren St NW

City Washington State DC Zip Code 20016-2438

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : VQBGB9HJAT9

Amount of Each Disbursement this Period

136.05

Full Name (Last, First, Middle Initial)

C. Frederick Holl

Mailing Address 1224 Saint Paul St

City Baltimore State MD Zip Code 21202-3025

Purpose of Disbursement
Travel Reimbursements

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2015

Transaction ID : VQBGB9HJ8H4

Amount of Each Disbursement this Period

209.08

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

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

645.13

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Jacob Oeth

Mailing Address 300 Walnut St
Ste 125

City Des Moines State IA Zip Code 50309-2260

Purpose of Disbursement
Field Consulting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	01	/	2015

Transaction ID : VQBGB9HJB80

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. James Eagan

Mailing Address 3017 Fleetwood Ave

City Baltimore State MD Zip Code 21214-1410

Purpose of Disbursement
Event Entertainment

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
03	/	19	/	2015

Transaction ID : VQBGB9HJB56

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. James Singer

Mailing Address 918 Saint Paul St
Apt 3F

City Baltimore State MD Zip Code 21202-2422

Purpose of Disbursement
Research Consulting

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
06	/	08	/	2015

Transaction ID : VQBGB9HJB14

Amount of Each Disbursement this Period

1241.94

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

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

5541.94

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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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. James Wilson

Mailing Address 2801 Goodwood Rd

City Baltimore State MD Zip Code 21214-2205

Purpose of Disbursement
Event Entertainment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2015

Transaction ID : **VQBGB9HJB98**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. JBW Consulting, LLC

Mailing Address 601 E 20th St
Apt 10F

City New York State NY Zip Code 10010-7636

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : **VQBGB9HJAH8**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. Jennifer Casolo

Mailing Address 922 24th St NW
Apt 418

City Washington State DC Zip Code 20037-2232

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : **VQBGB9HJAW5**

Amount of Each Disbursement this Period

1111.38

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

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

4911.38

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Jennifer Casolo

Mailing Address 922 24th St NW
Apt 418

City Washington State DC Zip Code 20037-2232

Purpose of Disbursement
Finance Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : VQBGB9HJB30

Amount of Each Disbursement this Period

1375.00

Full Name (Last, First, Middle Initial)

B. Joe's Stone Crab

Mailing Address 11 Washington Ave

City Miami Beach State FL Zip Code 33139-7395

Purpose of Disbursement
Space Rental / Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2015

Transaction ID : VQBGB9HJKA4

Amount of Each Disbursement this Period

2227.63

Full Name (Last, First, Middle Initial)

C. Joseph O'Hern

Mailing Address 6085 Greywood Cir

City Johnston State IA Zip Code 50131-1688

Purpose of Disbursement
Field Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : VQBGB9HJBPO

Amount of Each Disbursement this Period

1048.00

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

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

4650.63

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Karine Jean-Pierre

Mailing Address 14040 Weeping Cherry Dr

City Rockville State MD Zip Code 20850-5470

Purpose of Disbursement
Policy Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : **VQBGB9HJBZ1**

Amount of Each Disbursement this Period

4354.84

Full Name (Last, First, Middle Initial)

B. Local Politechs Strategies, LLC

Mailing Address 3430 Connecticut Ave NW
Unit 11941

City Washington State DC Zip Code 20008-7556

Purpose of Disbursement
Digital Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2015

Transaction ID : **VQBGB9HJC33**

Amount of Each Disbursement this Period

15460.87

Full Name (Last, First, Middle Initial)

C. Margaret Byron

Mailing Address 1468 Harvard St NW
Apt 22

City Washington State DC Zip Code 20009-4692

Purpose of Disbursement
Policy Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : **VQBGB9HJBY4**

Amount of Each Disbursement this Period

3750.00

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

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

23565.71

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Marshall White

Mailing Address 3307 Lightfoot Dr

City Baltimore State MD Zip Code 21208-4417

Purpose of Disbursement
Event Entertainment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2015

Transaction ID : **VQBGB9HJCD2**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Matthew Corridoni

Mailing Address 767 Princeton PI NW Apt 2

City Washington State DC Zip Code 20010

Purpose of Disbursement
Communications Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2015

Transaction ID : **VQBGB9HJC17**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MCF Capital

Mailing Address 516 N Charles St Ste 400

City Baltimore State MD Zip Code 21201-5044

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2015

Transaction ID : **VQBGB9HJBS4**

Amount of Each Disbursement this Period

1706.25

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

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

3006.25

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Michael Kurtz

Mailing Address 3828 Georgia Ave NW
Apt 316

City Washington State DC Zip Code 20011-5956

Purpose of Disbursement
Travel Expenses

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
0	6		0	1		2	0	1	5

Transaction ID : VQBGB9HJCH4

Amount of Each Disbursement this Period

7	9	6	.	7	6
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. New Hampshire Democratic Party

Mailing Address 105 N State St

City Concord State NH Zip Code 03301-4334

Purpose of Disbursement
Advertising

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
0	4		2	8		2	0	1	5

Transaction ID : VQBGB9HJD02

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. NGP VAN

Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
Database

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
0	1		1	5		2	0	1	5

Transaction ID : VQBGB9HJCY6

Amount of Each Disbursement this Period

1	3	5	.	0	0
---	---	---	---	---	---

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

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

3	1	4	.	7	6
---	---	---	---	---	---

3	1	4	.	7	6
---	---	---	---	---	---

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. NGP VAN

Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement Database

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2015

Transaction ID : VQBGB9HJBW8

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. NGP VAN

Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement Database

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2015

Transaction ID : VQBGB9HJD52

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. NGP VAN

Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement Database

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 27 / 2015

Transaction ID : VQBGB9HJDG7

Amount of Each Disbursement this Period

6350.00

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

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

8150.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. NGP VAN

Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
Database

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
05		26		2015

Transaction ID : VQBGB9HJDD3

Amount of Each Disbursement this Period

2300.00

Full Name (Last, First, Middle Initial)

B. Peter Miller

Mailing Address 1133 Silverleaf Dr

City Arnold State MD Zip Code 21012-1944

Purpose of Disbursement
Event Entertainment

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
03		19		2015

Transaction ID : VQBGB9HJD28

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Professional Bartenders & Servers, Inc

Mailing Address 15710 Pissaro Ter

City North Potomac State MD Zip Code 20878-3480

Purpose of Disbursement
Catering

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
03		03		2015

Transaction ID : VQBGB9HJD93

Amount of Each Disbursement this Period

1141.13

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

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

3741.13

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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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Professional Bartenders & Servers, Inc

Mailing Address 15710 Pissaro Ter

City North Potomac State MD Zip Code 20878-3480

Purpose of Disbursement Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 18 / 2015

Transaction ID : **VQBGB9HJCZ4**

Amount of Each Disbursement this Period: 240.00

Category/Type

Full Name (Last, First, Middle Initial)
B. PSAV Presentation Services

Mailing Address 23918 Network Pl

City Chicago State IL Zip Code 60673-1239

Purpose of Disbursement A/V Equipment Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 15 / 2015

Transaction ID : **VQBGB9HJD44**

Amount of Each Disbursement this Period: 7331.55

Category/Type

Full Name (Last, First, Middle Initial)
C. Richard Abbruzzese

Mailing Address 8511 Country Brooke Way

City Lutherville State MD Zip Code 21093-4767

Purpose of Disbursement Management Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 01 / 2015

Transaction ID : **VQBGB9HJCN5**

Amount of Each Disbursement this Period: 7500.00

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15071.55

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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. The Ink Spot, Inc

Mailing Address 3433 Hampton Ave

City State Zip Code
Saint Louis MO 63139-1940

Purpose of Disbursement
Printing Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2015

Transaction ID : VQBGB9HJDF9

Amount of Each Disbursement this Period

4211.99

Full Name (Last, First, Middle Initial)

B. The Ink Spot, Inc

Mailing Address 3433 Hampton Ave

City State Zip Code
Saint Louis MO 63139-1940

Purpose of Disbursement
Printing Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2015

Transaction ID : VQBGB9HJDC5

Amount of Each Disbursement this Period

827.51

Full Name (Last, First, Middle Initial)

C. Tidewater Inn

Mailing Address 101 E Dover St

City State Zip Code
Easton MD 21601-3001

Purpose of Disbursement
Lodging and Catering

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
04		23		2015

Transaction ID : VQBGB9HJD77

Amount of Each Disbursement this Period

12474.00

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

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

17513.50

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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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. University of Baltimore

Mailing Address 1420 N Charles St

City Baltimore State MD Zip Code 21201-5779

Purpose of Disbursement
Space Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HJBM5

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. University of Baltimore

Mailing Address 1420 N Charles St

City Baltimore State MD Zip Code 21201-5779

Purpose of Disbursement
Space Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HJC67

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HJDV3

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2015

Transaction ID : **VQBGB9HJGY4**

Amount of Each Disbursement this Period

185.10

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. US Airways

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-0664

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2015

Transaction ID : **VQBGB9HJMQ7**

Amount of Each Disbursement this Period

215.10

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-0664

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2015

Transaction ID : **VQBGB9HJN90**

Amount of Each Disbursement this Period

215.10

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2015

Transaction ID : VQBGB9HJE37

Amount of Each Disbursement this Period

4300.00

Full Name (Last, First, Middle Initial)

B. Annapolis Historic Inn

Mailing Address 58 State Cir

City Annapolis State MD Zip Code 21401-1906

Purpose of Disbursement
Space Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 01 / 2015

Transaction ID : VQBGB9HJHX8

Amount of Each Disbursement this Period

4300.00

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

C. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2015

Transaction ID : VQBGB9HJDX9

Amount of Each Disbursement this Period

2000.55

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

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

6300.55

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Capital Grille Restaurant

Mailing Address 500 E Pratt St

City Baltimore State MD Zip Code 21202-3165

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2015

Transaction ID : VQBGB9HJH09

Amount of Each Disbursement this Period

2000.55

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2015

Transaction ID : VQBGB9HJDY7

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Joe's Stone Crab

Mailing Address 11 Washington Ave

City Miami Beach State FL Zip Code 33139-7395

Purpose of Disbursement
Space Rental / Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2015

Transaction ID : VQBGB9HJJ77

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

*

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

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

250.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2015

Transaction ID : VQBGB9HJDZ5

Amount of Each Disbursement this Period

2627.63

Full Name (Last, First, Middle Initial)

B. Hilton hotels

Mailing Address 7930 Jones Branch Dr

City McLean State VA Zip Code 22102-3388

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2015

Transaction ID : VQBGB9HJN82

Amount of Each Disbursement this Period

400.00

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2015

Transaction ID : VQBGB9HJJM0

Amount of Each Disbursement this Period

225.10

[MEMO ITEM]
*

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

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

2627.63

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement
Airfare

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
03		04		2015

Transaction ID : VQBGB9HJK96

Amount of Each Disbursement this Period

225.10

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement
Airfare

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
03		04		2015

Transaction ID : VQBGB9HJM14

Amount of Each Disbursement this Period

241.10

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement
Airfare

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
03		05		2015

Transaction ID : VQBGB9HJH83

Amount of Each Disbursement this Period

185.10

[MEMO ITEM]

*

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

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

0.00

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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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address PO Box 36647

City State Zip Code
Dallas TX 75235-1647

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2015

Transaction ID : **VQBGB9HJMK6**

Amount of Each Disbursement this Period

444.10

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 77 W Wacker Dr

City State Zip Code
Chicago IL 60601-1712

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **VQBGB9HJJT8**

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 77 W Wacker Dr

City State Zip Code
Chicago IL 60601-1712

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2015

Transaction ID : **VQBGB9HJPC6**

Amount of Each Disbursement this Period

402.10

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

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
03		24		2015

Transaction ID : VQBGB9HJE45

Amount of Each Disbursement this Period

198.20

Full Name (Last, First, Middle Initial)

B. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

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
04		14		2015

Transaction ID : VQBGB9HJE03

Amount of Each Disbursement this Period

8147.37

Full Name (Last, First, Middle Initial)

C. Hilton hotels

Mailing Address 7930 Jones Branch Dr

City McLean State VA Zip Code 22102-3388

Purpose of Disbursement
Space Rental / Catering

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
04		02		2015

Transaction ID : VQBGB9HJNF7

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)..... ▶

8345.57

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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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Hilton hotels

Mailing Address 7930 Jones Branch Dr

City McLean State VA Zip Code 22102-3388

Purpose of Disbursement
Space Rental / Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2015

Transaction ID : VQBGB9HJP35

Amount of Each Disbursement this Period

4000.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Hilton hotels

Mailing Address 7930 Jones Branch Dr

City McLean State VA Zip Code 22102-3388

Purpose of Disbursement
Space Rental / Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2015

Transaction ID : VQBGB9HJNR8

Amount of Each Disbursement this Period

2147.37

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2015

Transaction ID : VQBGB9HJE52

Amount of Each Disbursement this Period

372.30

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

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

372.30

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Four Seasons Hotel Houston

Mailing Address 1300 Lamar St

City Houston State TX Zip Code 77010-3098

Purpose of Disbursement
Lodging

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
04 / 03 / 2015

Transaction ID : VQBGB9HJJQ4

Amount of Each Disbursement this Period

372.30

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

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
05 / 24 / 2015

Transaction ID : VQBGB9HJAC9

Amount of Each Disbursement this Period

9720.22

Full Name (Last, First, Middle Initial)

C. Amazon.com

Mailing Address 1200 12th Ave S
Ste 1200

City Seattle State WA Zip Code 98144-2734

Purpose of Disbursement
Office Supplies

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
05 / 05 / 2015

Transaction ID : VQBGB9HJHV3

Amount of Each Disbursement this Period

134.99

[MEMO ITEM]

*

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

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

9720.22

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Amazon.com

Mailing Address 1200 12th Ave S
Ste 1200

City Seattle State WA Zip Code 98144-2734

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2015

Transaction ID : VQBGB9HJJF1

Amount of Each Disbursement this Period

134.99

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Amazon.com

Mailing Address 1200 12th Ave S
Ste 1200

City Seattle State WA Zip Code 98144-2734

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2015

Transaction ID : VQBGB9HJK21

Amount of Each Disbursement this Period

134.99

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Amazon.com

Mailing Address 1200 12th Ave S
Ste 1200

City Seattle State WA Zip Code 98144-2734

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2015

Transaction ID : VQBGB9HJKD8

Amount of Each Disbursement this Period

280.35

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2015

Transaction ID : VQBGB9HJNS6

Amount of Each Disbursement this Period

144.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2015

Transaction ID : VQBGB9HJND1

Amount of Each Disbursement this Period

33.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2015

Transaction ID : VQBGB9HJNH3

Amount of Each Disbursement this Period

42.00

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2015

Transaction ID : **VQBGB9HJP43**

Amount of Each Disbursement this Period

255.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2015

Transaction ID : **VQBGB9HJNP2**

Amount of Each Disbursement this Period

68.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2015

Transaction ID : **VQBGB9HJNX8**

Amount of Each Disbursement this Period

176.00

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Carey

Mailing Address 5300 Spectrum Dr

City Frederick State MD Zip Code 21703-7324

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2015

Transaction ID : **VQBGB9HJMW7**

Amount of Each Disbursement this Period

1483.16

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Carey

Mailing Address 5300 Spectrum Dr

City Frederick State MD Zip Code 21703-7324

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2015

Transaction ID : **VQBGB9HJN74**

Amount of Each Disbursement this Period

773.25

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Courtyard by Marriott

Mailing Address 10400 Fernwood Rd

City Bethesda State MD Zip Code 20817-1102

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 27 / 2015

Transaction ID : **VQBGB9HJN66**

Amount of Each Disbursement this Period

135.66

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Courtyard by Marriott

Mailing Address 10400 Fernwood Rd

City State Zip Code
Bethesda MD 20817-1102

Purpose of Disbursement
Lodging

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
04		27		2015

Transaction ID : VQBGB9HJNK9

Amount of Each Disbursement this Period

135.66

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Dropbox

Mailing Address 76 Market Street

City State Zip Code
San Francisco CA 94111-4801

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2015

Transaction ID : VQBGB9HJPB8

Amount of Each Disbursement this Period

116.46

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Dropbox

Mailing Address 76 Market Street

City State Zip Code
San Francisco CA 94111-4801

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2015

Transaction ID : VQBGB9HJP51

Amount of Each Disbursement this Period

116.12

[MEMO ITEM]

*

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

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

0.00

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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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Dropbox

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement
Subscription Fee

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
0	5		0	5		2	0	1	5

Transaction ID : VQBGB9HJNN4

Amount of Each Disbursement this Period

1	1	4	7	5
---	---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Dropbox

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement
Subscription Fee

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
0	5		0	5		2	0	1	5

Transaction ID : VQBGB9HJNY6

Amount of Each Disbursement this Period

1	1	4	7	5
---	---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Dropbox

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement
Subscription Fee

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
0	5		1	0		2	0	1	5

Transaction ID : VQBGB9HJNC3

Amount of Each Disbursement this Period

1	1	3	9
---	---	---	---

[MEMO ITEM]

*

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

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

0	0
---	---

0	0
---	---

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Dropbox

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2015

Transaction ID : VQBGB9HJN40

Amount of Each Disbursement this Period

111.68

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Dropbox

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2015

Transaction ID : VQBGB9HJKX2

Amount of Each Disbursement this Period

109.97

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Dropbox

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2015

Transaction ID : VQBGB9HJM97

Amount of Each Disbursement this Period

109.97

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Dropbox

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		19		2015

Transaction ID : VQBGB9HJMF4

Amount of Each Disbursement this Period

109.97

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Dropbox

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		19		2015

Transaction ID : VQBGB9HJMN2

Amount of Each Disbursement this Period

109.97

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Dropbox

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2015

Transaction ID : VQBGB9HJKH9

Amount of Each Disbursement this Period

109.63

[MEMO ITEM]

*

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

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

0.00

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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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Dropbox

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	5

Transaction ID : **VQBGB9HJK13**

Amount of Each Disbursement this Period

1	0	8	9	5
---	---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Enterprise Rent-A-Car

Mailing Address 4500 W College Ave

City Appleton State WI Zip Code 54913-8587

Purpose of Disbursement
Travel Expenses

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
0	5		0	7		2	0	1	5

Transaction ID : **VQBGB9HJJB9**

Amount of Each Disbursement this Period

2	3	2	.	1	3
---	---	---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Extra Space Storage

Mailing Address 7722 Fenton St

City Silver Spring State MD Zip Code 20910-4942

Purpose of Disbursement
Storage

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
0	5		0	3		2	0	1	5

Transaction ID : **VQBGB9HJJD5**

Amount of Each Disbursement this Period

1	9	3	.	5	3
---	---	---	---	---	---

[MEMO ITEM]

*

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

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

0	0	0	.	0	0
---	---	---	---	---	---

0	0	0	.	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Google Aps

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2015

Transaction ID : **VQBGB9HJJH6**

Amount of Each Disbursement this Period

121.15

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Iberia Airlines

Mailing Address 10000 W Ohare Ave

City Chicago State IL Zip Code 60666-6000

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2015

Transaction ID : **VQBGB9HJJJP6**

Amount of Each Disbursement this Period

250.44

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Metro Fare

Mailing Address 600 5th St NW

City Washington State DC Zip Code 20001-2610

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2015

Transaction ID : **VQBGB9HJJH90**

Amount of Each Disbursement this Period

86.00

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Radisson Hotel

Mailing Address 11340 Blondo St
Ste 100

City Omaha State NE Zip Code 68164-3814

Purpose of Disbursement
Lodging

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
05		14		2015

Transaction ID : VQBGB9HJJZ7

Amount of Each Disbursement this Period

66.05

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Radisson Hotel

Mailing Address 11340 Blondo St
Ste 100

City Omaha State NE Zip Code 68164-3814

Purpose of Disbursement
Lodging

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
05		14		2015

Transaction ID : VQBGB9HJKM1

Amount of Each Disbursement this Period

246.64

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Travel Services

Mailing Address 1931 Hemmer Rd

City Palmer State AK Zip Code 99645-9690

Purpose of Disbursement
Travel Agency Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		19		2015

Transaction ID : VQBGB9HJKN9

Amount of Each Disbursement this Period

667.47

[MEMO ITEM]

*

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

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

0.00

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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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Travel Services

Mailing Address 1931 Hemmer Rd

City Palmer State AK Zip Code 99645-9690

Purpose of Disbursement
Travel Agency Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 19 / 2015

Transaction ID : **VQBGB9HJMHO**

Amount of Each Disbursement this Period: 852.06

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 27 / 2015

Transaction ID : **VQBGB9HJPD4**

Amount of Each Disbursement this Period: 45.35

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 03 / 2015

Transaction ID : **VQBGB9HJPA0**

Amount of Each Disbursement this Period: 17.61

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2015

Transaction ID : VQBGB9HJPE2

Amount of Each Disbursement this Period

216.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : VQBGB9HJP19

Amount of Each Disbursement this Period

6.82

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 24 / 2015

Transaction ID : VQBGB9HJNM7

Amount of Each Disbursement this Period

0.77

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Walmart

Mailing Address 2701 Port Covington Dr

City Baltimore State MD Zip Code 21230-5004

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2015

Transaction ID : **VQBGB9HJKC0**

Amount of Each Disbursement this Period

64.38

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Walmart

Mailing Address 2701 Port Covington Dr

City Baltimore State MD Zip Code 21230-5004

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2015

Transaction ID : **VQBGB9HJKZ8**

Amount of Each Disbursement this Period

184.68

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Warwick Hotel

Mailing Address 65 W 54th St

City New York State NY Zip Code 10019-5404

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2015

Transaction ID : **VQBGB9HJKK5**

Amount of Each Disbursement this Period

29.84

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Warwick Hotel

Mailing Address 65 W 54th St

City New York State NY Zip Code 10019-5404

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2015

Transaction ID : VQBGB9HJM47

Amount of Each Disbursement this Period

32.44

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Warwick Hotel

Mailing Address 65 W 54th St

City New York State NY Zip Code 10019-5404

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2015

Transaction ID : VQBGB9HJMG2

Amount of Each Disbursement this Period

63.32

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Warwick Hotel

Mailing Address 65 W 54th St

City New York State NY Zip Code 10019-5404

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2015

Transaction ID : VQBGB9HJMV9

Amount of Each Disbursement this Period

273.11

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Warwick Hotel

Mailing Address 65 W 54th St

City New York State NY Zip Code 10019-5404

Purpose of Disbursement
Lodging

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
0	5		1	0		2	0	1	5

Transaction ID : VQBGB9HJN24

Amount of Each Disbursement this Period

3	0	7	.	5	3
---	---	---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

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
0	5		2	4		2	0	1	5

Transaction ID : VQBGB9HJE11

Amount of Each Disbursement this Period

1	5	0	7	.	9	7
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Center Blvd

City Ft Worth State TX Zip Code 76115

Purpose of Disbursement
Airfare

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
0	5		0	1		2	0	1	5

Transaction ID : VQBGB9HJKR3

Amount of Each Disbursement this Period

2	5	9	.	5	6
---	---	---	---	---	---

[MEMO ITEM]

*

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

1	5	0	7	.	9	7
---	---	---	---	---	---	---

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

1	5	0	7	.	9	7
---	---	---	---	---	---	---

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	27	/	2015

Transaction ID : VQBGB9HJMS3

Amount of Each Disbursement this Period

425.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	28	/	2015

Transaction ID : VQBGB9HJMC1

Amount of Each Disbursement this Period

395.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	28	/	2015

Transaction ID : VQBGB9HJN09

Amount of Each Disbursement this Period

478.00

[MEMO ITEM]

*

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

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

0.00

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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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2015

Transaction ID : VQBGB9HJH41

Amount of Each Disbursement this Period

66.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2015

Transaction ID : VQBGB9HJJE3

Amount of Each Disbursement this Period

255.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2015

Transaction ID : VQBGB9HJGK7

Amount of Each Disbursement this Period

12.00

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2015

Transaction ID : VQBGB9HJHP3

Amount of Each Disbursement this Period

66.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2015

Transaction ID : VQBGB9HJJ52

Amount of Each Disbursement this Period

153.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2015

Transaction ID : VQBGB9HJK05

Amount of Each Disbursement this Period

255.00

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2015

Transaction ID : VQBGB9HJM06

Amount of Each Disbursement this Period

389.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2015

Transaction ID : VQBGB9HJMJ8

Amount of Each Disbursement this Period

422.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2015

Transaction ID : VQBGB9HJNB5

Amount of Each Disbursement this Period

510.00

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : VQBGB9HJN32

Amount of Each Disbursement this Period

478.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2015

Transaction ID : VQBGB9HJKF3

Amount of Each Disbursement this Period

255.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Carey

Mailing Address 5300 Spectrum Dr

City Frederick State MD Zip Code 21703-7324

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2015

Transaction ID : VQBGB9HJJS0

Amount of Each Disbursement this Period

201.60

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Carey

Mailing Address 5300 Spectrum Dr

City Frederick State MD Zip Code 21703-7324

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2015

Transaction ID : **VQBGB9HJM39**

Amount of Each Disbursement this Period

302.40

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Courtyard by Marriott

Mailing Address 10400 Fernwood Rd

City Bethesda State MD Zip Code 20817-1102

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **VQBGB9HJJG9**

Amount of Each Disbursement this Period

202.27

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Courtyard by Marriott

Mailing Address 10400 Fernwood Rd

City Bethesda State MD Zip Code 20817-1102

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : **VQBGB9HJKQ5**

Amount of Each Disbursement this Period

202.27

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Courtyard by Marriott

Mailing Address 10400 Fernwood Rd

City State Zip Code
Bethesda MD 20817-1102

Purpose of Disbursement
Lodging

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
05	/	11	/	2015

Transaction ID : VQBGB9HJMT1

Amount of Each Disbursement this Period

235.57

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Frontier Airlines

Mailing Address 7001 Tower Rd

City State Zip Code
Denver CO 80249-7312

Purpose of Disbursement
Airfare

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
04	/	30	/	2015

Transaction ID : VQBGB9HJKE6

Amount of Each Disbursement this Period

218.10

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Hilton hotels

Mailing Address 7930 Jones Branch Dr

City State Zip Code
McLean VA 22102-3388

Purpose of Disbursement
Lodging

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
04	/	27	/	2015

Transaction ID : VQBGB9HJK2

Amount of Each Disbursement this Period

376.29

[MEMO ITEM]

*

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Hilton hotels

Mailing Address 7930 Jones Branch Dr

City McLean State VA Zip Code 22102-3388

Purpose of Disbursement
Lodging

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
04		27		2015

Transaction ID : VQBGB9HJKY0

Amount of Each Disbursement this Period

376.29

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Hilton hotels

Mailing Address 7930 Jones Branch Dr

City McLean State VA Zip Code 22102-3388

Purpose of Disbursement
Lodging

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
04		27		2015

Transaction ID : VQBGB9HJMX5

Amount of Each Disbursement this Period

376.29

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Le Meridien

Mailing Address 1121 19th St N

City Arlington State VA Zip Code 22209-1704

Purpose of Disbursement
Catering

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
04		28		2015

Transaction ID : VQBGB9HJKP7

Amount of Each Disbursement this Period

724.62

[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 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

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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Metro Fare

Mailing Address 600 5th St NW

City Washington State DC Zip Code 20001-2610

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2015

Transaction ID : **VQBGB9HJGG3**

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Metro Fare

Mailing Address 600 5th St NW

City Washington State DC Zip Code 20001-2610

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2015

Transaction ID : **VQBGB9HJGV0**

Amount of Each Disbursement this Period

146.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Quality Inn

Mailing Address 1 Choice Hotels Cir # 400

City Rockville State MD Zip Code 20850-5140

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2015

Transaction ID : **VQBGB9HJHW1**

Amount of Each Disbursement this Period

173.31

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Quality Inn

Mailing Address 1 Choice Hotels Cir
400

City Rockville State MD Zip Code 20850-5140

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2015

Transaction ID : **VQBGB9HJK54**

Amount of Each Disbursement this Period

346.62

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Quality Inn

Mailing Address 1 Choice Hotels Cir
400

City Rockville State MD Zip Code 20850-5140

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2015

Transaction ID : **VQBGB9HJM89**

Amount of Each Disbursement this Period

346.62

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2015

Transaction ID : **VQBGB9HJHN5**

Amount of Each Disbursement this Period

206.00

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2015

Transaction ID : VQBGB9HJJ60

Amount of Each Disbursement this Period

206.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2015

Transaction ID : VQBGB9HJMD8

Amount of Each Disbursement this Period

378.99

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Strip House

Mailing Address 12 E 13th St

City New York State NY Zip Code 10003-4406

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2015

Transaction ID : VQBGB9HJJ44

Amount of Each Disbursement this Period

536.59

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Truluck's Seafood Steak Crab House

Mailing Address 2401 McKinney Ave

City Dallas State TX Zip Code 75201-1938

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2015

Transaction ID : VQBGB9HJJA1

Amount of Each Disbursement this Period

303.80

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2015

Transaction ID : VQBGB9HJGZ1

Amount of Each Disbursement this Period

5.44

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2015

Transaction ID : VQBGB9HJNJ1

Amount of Each Disbursement this Period

53.80

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Transportation Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 03 / 2015

Transaction ID : **VQBGB9HJHM7**

Amount of Each Disbursement this Period: 6.76

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Transportation Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 03 / 2015

Transaction ID : **VQBGB9HJP27**

Amount of Each Disbursement this Period: 145.82

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Transportation Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 04 / 2015

Transaction ID : **VQBGB9HJNV2**

Amount of Each Disbursement this Period: 94.48

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2015

Transaction ID : VQBGB9HJM63

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2015

Transaction ID : VQBGB9HJNE9

Amount of Each Disbursement this Period

49.57

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2015

Transaction ID : VQBGB9HJNQ0

Amount of Each Disbursement this Period

91.10

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2015

Transaction ID : VQBGB9HJKS0

Amount of Each Disbursement this Period

12.98

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2015

Transaction ID : VQBGB9HJHD2

Amount of Each Disbursement this Period

5.88

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2015

Transaction ID : VQBGB9HJJV5

Amount of Each Disbursement this Period

11.15

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Transportation Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 07 / 2015

Transaction ID : **VQBGB9HJK88**

Amount of Each Disbursement this Period: 12.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Transportation Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 07 / 2015

Transaction ID : **VQBGB9HJN16**

Amount of Each Disbursement this Period: 41.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Transportation Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 08 / 2015

Transaction ID : **VQBGB9HJGD1**

Amount of Each Disbursement this Period: 4.00

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2015

Transaction ID : VQBGB9HJME6

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2015

Transaction ID : VQBGB9HJMM4

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Transportation Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2015

Transaction ID : VQBGB9HJMR5

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Transportation Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 13 / 2015

Transaction ID : **VQBGB9HJMY3**

Amount of Each Disbursement this Period: 27.26

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Transportation Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 15 / 2015

Transaction ID : **VQBGB9HJNA8**

Amount of Each Disbursement this Period: 44.11

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Transportation Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 27 / 2015

Transaction ID : **VQBGB9HJHZ4**

Amount of Each Disbursement this Period: 11.02

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. United Airlines

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2015

Mailing Address 77 W Wacker Dr

Transaction ID : VQBGB9HJNT4

City Chicago State IL Zip Code 60601-1712

Amount of Each Disbursement this Period

345.59

Purpose of Disbursement
Airfare

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. United Airlines

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2015

Mailing Address 77 W Wacker Dr

Transaction ID : VQBGB9HJMP0

City Chicago State IL Zip Code 60601-1712

Amount of Each Disbursement this Period

77.00

Purpose of Disbursement
Airfare

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. United Airlines

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2015

Mailing Address 77 W Wacker Dr

Transaction ID : VQBGB9HJN58

City Chicago State IL Zip Code 60601-1712

Amount of Each Disbursement this Period

327.10

Purpose of Disbursement
Airfare

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

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

0.00

--

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 77 W Wacker Dr

City Chicago State IL Zip Code 60601-1712

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2015

Transaction ID : **VQBGB9HJNG5**

Amount of Each Disbursement this Period

327.10

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 77 W Wacker Dr

City Chicago State IL Zip Code 60601-1712

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2015

Transaction ID : **VQBGB9HJP01**

Amount of Each Disbursement this Period

379.10

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 77 W Wacker Dr

City Chicago State IL Zip Code 60601-1712

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2015

Transaction ID : **VQBGB9HJP69**

Amount of Each Disbursement this Period

379.10

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-0664

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2015

Transaction ID : **VQBGB9HJHR9**

Amount of Each Disbursement this Period

148.10

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. US Airways

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-0664

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2015

Transaction ID : **VQBGB9HJJN8**

Amount of Each Disbursement this Period

210.10

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-0664

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2015

Transaction ID : **VQBGB9HJKV6**

Amount of Each Disbursement this Period

210.10

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

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
0	5		2	9		2	0	1	5

Transaction ID : VQBGB9HJDT6

Amount of Each Disbursement this Period

5	7	1	9	.	2	7
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Amazon.com

Mailing Address 1200 12th Ave S Ste 1200

City Seattle State WA Zip Code 98144-2734

Purpose of Disbursement
Office Supplies

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
0	5		2	1		2	0	1	5

Transaction ID : VQBGB9HJEB0

Amount of Each Disbursement this Period

8	2	.	0	8
---	---	---	---	---

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

C. Amazon.com

Mailing Address 1200 12th Ave S Ste 1200

City Seattle State WA Zip Code 98144-2734

Purpose of Disbursement
Office Supplies

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
0	5		2	7		2	0	1	5

Transaction ID : VQBGB9HJEA2

Amount of Each Disbursement this Period

5	6	.	1	0
---	---	---	---	---

[MEMO ITEM]
*

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

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

5	7	1	9	.	2	7
---	---	---	---	---	---	---

5	7	1	9	.	2	7
---	---	---	---	---	---	---

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Amazon.com

Date of Disbursement: MM / DD / YYYY
05 / 29 / 2015

Mailing Address: 1200 12th Ave S
Ste 1200

City: Seattle State: WA Zip Code: 98144-2734

Purpose of Disbursement: Office Supplies

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID : **VQBGB9HJE78**

Amount of Each Disbursement this Period: 5.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Amazon.com

Date of Disbursement: MM / DD / YYYY
06 / 21 / 2015

Mailing Address: 1200 12th Ave S
Ste 1200

City: Seattle State: WA Zip Code: 98144-2734

Purpose of Disbursement: Office Supplies

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID : **VQBGB9HJE94**

Amount of Each Disbursement this Period: 25.42

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Amazon.com

Date of Disbursement: MM / DD / YYYY
06 / 22 / 2015

Mailing Address: 1200 12th Ave S
Ste 1200

City: Seattle State: WA Zip Code: 98144-2734

Purpose of Disbursement: Office Supplies

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID : **VQBGB9HJE86**

Amount of Each Disbursement this Period: 5.00

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address PO Box 2971

City Omaha State NE Zip Code 68103-2971

Purpose of Disbursement
Telecom

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
05 / 24 / 2015

Transaction ID : VQBGB9HJEC8

Amount of Each Disbursement this Period

947.36

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Costco

Mailing Address 7077 Arundel Mills Cir

City Hanover State MD Zip Code 21076-1387

Purpose of Disbursement
Office Supplies

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
06 / 02 / 2015

Transaction ID : VQBGB9HJED6

Amount of Each Disbursement this Period

320.64

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Honest Editor

Mailing Address Information Requested

City Philadelphia State PA Zip Code 19122

Purpose of Disbursement
Editing Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2015

Transaction ID : VQBGB9HJES0

Amount of Each Disbursement this Period

103.20

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Honest Editor

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		26		2015

Mailing Address Information Requested

Transaction ID : VQBGB9HJEZ8

City Philadelphia State PA Zip Code 19122

Amount of Each Disbursement this Period

154.65

Purpose of Disbursement
Editing Services

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. LAZ Parking

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		19		2015

Mailing Address 300 E Lombard St

Transaction ID : VQBGB9HJEQ5

City Baltimore State MD Zip Code 21202-3219

Amount of Each Disbursement this Period

16.00

Purpose of Disbursement
Travel Expenses

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. LAZ Parking

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2015

Mailing Address 300 E Lombard St

Transaction ID : VQBGB9HJEW4

City Baltimore State MD Zip Code 21202-3219

Amount of Each Disbursement this Period

230.00

Purpose of Disbursement
Travel Expenses

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

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

0.00

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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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Pen & Quill

Mailing Address 1701 N Charles St

City Baltimore State MD Zip Code 21201-5801

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2015

Transaction ID : VQBGB9HJEG9

Amount of Each Disbursement this Period

640.07

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 1901 L St NW

City Washington State DC Zip Code 20036-3509

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 28 / 2015

Transaction ID : VQBGB9HJF47

Amount of Each Disbursement this Period

258.03

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 1901 L St NW

City Washington State DC Zip Code 20036-3509

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2015

Transaction ID : VQBGB9HJF06

Amount of Each Disbursement this Period

5.59

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 29 / 2015

Transaction ID : **VQBGB9HJFX5**

Amount of Each Disbursement this Period: 41.28

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 31 / 2015

Transaction ID : **VQBGB9HJFD8**

Amount of Each Disbursement this Period: 15.00

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 02 / 2015

Transaction ID : **VQBGB9HJF71**

Amount of Each Disbursement this Period: 5.63

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2015

Transaction ID : VQBGB9HJG82

Amount of Each Disbursement this Period

86.34

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2015

Transaction ID : VQBGB9HJFV9

Amount of Each Disbursement this Period

34.56

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2015

Transaction ID : VQBGB9HJFT1

Amount of Each Disbursement this Period

34.53

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2015

Transaction ID : VQBGB9HJG58

Amount of Each Disbursement this Period

78.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2015

Transaction ID : VQBGB9HJF39

Amount of Each Disbursement this Period

5.05

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2015

Transaction ID : VQBGB9HJG90

Amount of Each Disbursement this Period

143.99

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 12 / 2015

Transaction ID : **VQBGB9HJFS3**

Amount of Each Disbursement this Period

27.55

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2015

Transaction ID : **VQBGB9HJG09**

Amount of Each Disbursement this Period

58.25

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 17 / 2015

Transaction ID : **VQBGB9HJFW7**

Amount of Each Disbursement this Period

37.26

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 17 / 2015

Transaction ID : VQBGB9HJG66

Amount of Each Disbursement this Period

78.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2015

Transaction ID : VQBGB9HJFC1

Amount of Each Disbursement this Period

12.40

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2015

Transaction ID : VQBGB9HJG40

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : **VQBGB9HJER3**

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : **VQBGB9HJF89**

Amount of Each Disbursement this Period

7.10

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : **VQBGB9HJFE6**

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : VQBGB9HJFY3

Amount of Each Disbursement this Period

55.59

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2015

Transaction ID : VQBGB9HJF97

Amount of Each Disbursement this Period

7.47

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2015

Transaction ID : VQBGB9HJFP0

Amount of Each Disbursement this Period

18.36

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2015

Transaction ID : **VQBGB9HJFQ7**

Amount of Each Disbursement this Period

18.66

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2015

Transaction ID : **VQBGB9HJFR5**

Amount of Each Disbursement this Period

19.16

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2015

Transaction ID : **VQBGB9HJG32**

Amount of Each Disbursement this Period

68.85

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2015

Transaction ID : **VQBGB9HJFF4**

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2015

Transaction ID : **VQBGB9HJFZ1**

Amount of Each Disbursement this Period

55.88

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2015

Transaction ID : **VQBGB9HJG74**

Amount of Each Disbursement this Period

80.24

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2015

Transaction ID : **VQBGB9HJFB3**

Amount of Each Disbursement this Period

11.74

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2015

Transaction ID : **VQBGB9HJFM4**

Amount of Each Disbursement this Period

17.39

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2015

Transaction ID : **VQBGB9HJF55**

Amount of Each Disbursement this Period

5.56

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

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
0	6		2	8		2	0	1	5

Transaction ID : **VQBGB9HJF63**

Amount of Each Disbursement this Period

5	.	6	2
---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

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
0	6		2	8		2	0	1	5

Transaction ID : **VQBGB9HJFH0**

Amount of Each Disbursement this Period

1	5	.	1	6
---	---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

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
0	6		2	8		2	0	1	5

Transaction ID : **VQBGB9HJFJ8**

Amount of Each Disbursement this Period

1	6	.	3	7
---	---	---	---	---

[MEMO ITEM]

*

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

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

0	.	0	0
---	---	---	---

0	.	0	0
---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2015

Transaction ID : **VQBGB9HJFK6**

Amount of Each Disbursement this Period

17.18

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2015

Transaction ID : **VQBGB9HJG16**

Amount of Each Disbursement this Period

59.60

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : **VQBGB9HJEY0**

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : **VQBGB9HJFA5**

Amount of Each Disbursement this Period

10.69

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : **VQBGB9HJFG2**

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : **VQBGB9HJFN2**

Amount of Each Disbursement this Period

18.00

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : **VQBGB9HJG24**

Amount of Each Disbursement this Period

65.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 77 W Wacker Dr

City Chicago State IL Zip Code 60601-1712

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 27 / 2015

Transaction ID : **VQBGB9HJEH7**

Amount of Each Disbursement this Period

617.20

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address PO Box 17464

City Baltimore State MD Zip Code 21297-1464

Purpose of Disbursement
Telecom

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 12 / 2015

Transaction ID : **VQBGB9HJEP7**

Amount of Each Disbursement this Period

691.02

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2015

Transaction ID : VQBGB9HJE29

Amount of Each Disbursement this Period

430.58

Full Name (Last, First, Middle Initial)

B. Maestro

Mailing Address 1703 Bronxdale Ave

City Bronx State NY Zip Code 10462-3311

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2015

Transaction ID : VQBGB9HJJ85

Amount of Each Disbursement this Period

247.00

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

C. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2015

Transaction ID : VQBGB9HJE60

Amount of Each Disbursement this Period

2690.93

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

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

3121.51

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)
A. Aer Lingus

Date of Disbursement: MM / DD / YYYY
05 / 25 / 2015

Mailing Address 300 Jericho Quadrangle

City Jericho State NY Zip Code 11753

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **VQBGB9HJHF8**

Amount of Each Disbursement this Period: 1164.16

[MEMO ITEM]

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

Date of Disbursement: MM / DD / YYYY
05 / 24 / 2015

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **VQBGB9HJP92**

Amount of Each Disbursement this Period: 284.00

[MEMO ITEM]

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

Date of Disbursement: MM / DD / YYYY
05 / 28 / 2015

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **VQBGB9HJNZ3**

Amount of Each Disbursement this Period: 201.00

[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 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Dropbox

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	02	/	2015

Transaction ID : VQBGB9HJJC7

Amount of Each Disbursement this Period

105.19

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Extra Space Storage

Mailing Address 7722 Fenton St

City Silver Spring State MD Zip Code 20910-4942

Purpose of Disbursement
Storage

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
06	/	03	/	2015

Transaction ID : VQBGB9HJJY9

Amount of Each Disbursement this Period

193.53

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Google Aps

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	03	/	2015

Transaction ID : VQBGB9HJK70

Amount of Each Disbursement this Period

341.88

[MEMO ITEM]

*

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

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

0.00

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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"/> 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. The Merrion Hotel

Mailing Address Merrion Street Upper

City Dublin 2 State Zip Code

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2015

Transaction ID : **VQBGB9HJKG1**

Amount of Each Disbursement this Period

83.57

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. The Merrion Hotel

Mailing Address Merrion Street Upper

City Dublin 2 State Zip Code

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 25 / 2015

Transaction ID : **VQBGB9HJM22**

Amount of Each Disbursement this Period

318.02

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2015

Transaction ID : **VQBGB9HJP85**

Amount of Each Disbursement this Period

6.35

[MEMO ITEM]

*

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

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

0.00

**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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	1	5

Transaction ID : VQBGB9HJP77

Amount of Each Disbursement this Period

1	2	.	1	2
---	---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	5

Transaction ID : VQBGB9HJNW0

Amount of Each Disbursement this Period

3	.	6	8
---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Wagtech Sound Productions

Mailing Address 9000 Flower Ave

City Silver Spring State MD Zip Code 20901-4042

Purpose of Disbursement
Equipment Rental

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
0	3		1	9		2	0	1	5

Transaction ID : VQBGB9HJD36

Amount of Each Disbursement this Period

1	8	0	0	.	0	0
---	---	---	---	---	---	---

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

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

1	8	0	0	.	0	0
---	---	---	---	---	---	---

1	8	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Washington Parks and People

Mailing Address 2437 15th St NW

City Washington State DC Zip Code 20009-4101

Purpose of Disbursement
Space Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2015

Transaction ID : VQBGB9HJCA8

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

B. Washington Parks and People

Mailing Address 2437 15th St NW

City Washington State DC Zip Code 20009-4101

Purpose of Disbursement
Space Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2015

Transaction ID : VQBGB9HJCS7

Amount of Each Disbursement this Period

2075.00

Full Name (Last, First, Middle Initial)

C. Welldoc

Mailing Address 1501 Saint Paul St Ste 118

City Baltimore State MD Zip Code 21202-2861

Purpose of Disbursement
Office Rental Deposit

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2015

Transaction ID : VQBGB9HJC09

Amount of Each Disbursement this Period

19218.67

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

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

22543.67

292259.37

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. MONICA VERNON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		15		2015

Mailing Address PO Box 1635

Transaction ID : VQBGB9HJC59

City State Zip Code
Cedar Rapids IA 52406-1635

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name

MONICA W VERNON

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IA District: 01

Full Name (Last, First, Middle Initial)

B. New Hampshire Democratic Party

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2015

Mailing Address 105 N State St

Transaction ID : VQBGB9HJCB6

City State Zip Code
Concord NH 03301-4334

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name

New Hampshire Democratic Party

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. STRICKLAND FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2015

Mailing Address PO Box 2196

Transaction ID : VQBGB9HJCQ1

City State Zip Code
Columbus OH 43216-2196

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name

TED STRICKLAND

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 00

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

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

8500.00

8500.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Thomas Fay

Mailing Address 2048 Merrifields Dr

City Silver Spring State MD Zip Code 20906-1256

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HJPR9

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Michael J Stratton

Mailing Address 1717 N Downing St

City Denver State CO Zip Code 80218-1056

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HJJPY6

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Baltimore Gas And Electric PAC

Mailing Address 110 W Fayette St
FI 13

City Baltimore State MD Zip Code 21201-3708

Purpose of Disbursement
Contribution Refund

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
04	/	30	/	2015

Transaction ID : VQBGB9HJPS7

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Laborer's Political League

Mailing Address 905 16th St NW

City Washington State DC Zip Code 20006-1703

Purpose of Disbursement
Contribution Refund

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
04	/	30	/	2015

Transaction ID : VQBGB9HJPV3

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

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

7000.00

7000.00

**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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Cedar County Democratic Party

Mailing Address 210E 6th Street

City Tipton State IA Zip Code 52772

Purpose of Disbursement
Contribution

Candidate Name

Cedar County Democratic Party

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	16	/	2015

Transaction ID : VQBGB9HJBA6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Dan Toto For NJ Assembly

Mailing Address PO Box 5232

City Trenton State NJ Zip Code 08638-0232

Purpose of Disbursement
Contribution

Candidate Name

Dan Toto For NJ Assembly

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	20	/	2015

Transaction ID : VQBGB9HJAP8

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Emerge Maryland

Mailing Address PO Box 185

City Monrovia State MD Zip Code 21770-0185

Purpose of Disbursement
Contribution

Candidate Name

Emerge Maryland

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	10	/	2015

Transaction ID : VQBGB9HJAV7

Amount of Each Disbursement this Period

1000.00

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

2500.00

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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Iowa House Truman Fund

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Contribution

Candidate Name
Iowa House Truman Fund

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

Date of Disbursement

/ /

Transaction ID : VQBGB9HJBB3

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Merrimack County Democrats

Mailing Address PO Box 1741

City Concord State NH Zip Code 03302-1741

Purpose of Disbursement
Contribution

Candidate Name
Merrimack County Democrats

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

Date of Disbursement

/ /

Transaction ID : VQBGB9HJCM7

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. New Hampshire Young Democrats

Mailing Address 105 N State St

City Concord State NH Zip Code 03301-4334

Purpose of Disbursement
Contribution

Candidate Name
New Hampshire Young Democrats

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

Date of Disbursement

/ /

Transaction ID : VQBGB9HJCJ2

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. O' Say Can You See - NonFederal

Mailing Address PO Box 468

City Annapolis State MD Zip Code 21404-0468

Purpose of Disbursement
Transfer to Non-Federal Account

Candidate Name
O' Say Can You See - NonFederal

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : VQBGB9HJPG8

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Polk County Democrats

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Contribution

Candidate Name
Polk County Democrats

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

State: District:

Date of Disbursement

/ /

Transaction ID : VQBGB9HJC83

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Pottawattamie County Democrats

Mailing Address PO Box 233

City Council Bluffs State IA Zip Code 51502-0233

Purpose of Disbursement
Contribution

Candidate Name
Pottawattamie County Democrats

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

State: District:

Date of Disbursement

/ /

Transaction ID : VQBGB9HJC90

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Progress Iowa

Mailing Address PO Box 548

City Des Moines State IA Zip Code 50302-0548

Purpose of Disbursement
Contribution

Candidate Name

Progress Iowa

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	5

Transaction ID : VQBGB9HJCC4

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Scott County Democratic Party

Mailing Address PO Box 2009

City Davenport State IA Zip Code 52809-2009

Purpose of Disbursement
Contribution

Candidate Name

Scott County Democratic Party

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	1	5

Transaction ID : VQBGB9HJCG6

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Scott Ourth for Senate Representative

Mailing Address PO Box 395

City Indianola State IA Zip Code 50125-0395

Purpose of Disbursement
Contribution

Candidate Name

Scott Ourth for Senate Representative

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	5

Transaction ID : VQBGB9HJCF8

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

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

3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. The Committee to Elect House Democrats

Date of Disbursement

Mailing Address 105 N State St

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2015

City Concord State NH Zip Code 03301-4334

Transaction ID : VQBGB9HJD85

Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

Candidate Name

The Committee to Elect House Democrats

Category/
Type

1000.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

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

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

--

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

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

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

--

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

1000.00

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

211000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 176 OF 176
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LOEBSACK FOR CONGRESS	Nature of Debt (Purpose): Refund of Excessive Contribution
Mailing Address PO Box 3013	
City State Zip Code Iowa City IA 52244-3013	

Outstanding Balance Beginning This Period <input type="text" value="2512.49"/>	Transaction ID : VQ9HV9H5M12	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2512.49"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PAT MURPHY FOR IOWA	Nature of Debt (Purpose): Refund of Excessive Contribution
Mailing Address PO Box 692	
City State Zip Code Dubuque IA 52004-0692	

Outstanding Balance Beginning This Period <input type="text" value="2229.32"/>	Transaction ID : VQ9HV9H5M04	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2229.32"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="2229.32"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="2229.32"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="2229.32"/>