



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Make It Work 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"/>	<input type="text" value="5172.86"/>	<input type="text" value="5172.86"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3072.56"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="34000.00"/>	<input type="text" value="44000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="37072.56"/>	<input type="text" value="49172.86"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="29620.00"/>	<input type="text" value="41720.30"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7452.56"/>	<input type="text" value="7452.56"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="25404.65"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Make It Work 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).....	0.00	500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	34000.00	43500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	34000.00	44000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	34000.00	44000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	34000.00	44000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	24620.00	36720.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	24620.00	36720.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	29620.00	41720.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29620.00	41720.30

**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) .....	34000.00	44000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	34000.00	44000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	24620.00	36720.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24620.00	36720.30

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

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

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)  
**Make It Work PAC**

Full Name (Last, First, Middle Initial)  
**A. National Multifamily Housing Council PAC**

Mailing Address 1850 M St NW  
Ste 540

City Washington State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

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  
11 / 06 / 2015  
**Transaction ID : VNHYE44XG0**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. International Paper Political Action Committee**

Mailing Address 1101 Pennsylvania Ave NW  
Ste 200

City Washington State DC Zip Code 20004-2514

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

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  
09 / 29 / 2015  
**Transaction ID : VNHYE2HRW0**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**C. Lockheed Martin Corporation Employees' PAC**

Mailing Address 2121 Crystal Dr  
Ste 100

City Arlington State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2015  
**Transaction ID : VNHYE31YD1**

Amount of Each Receipt this Period  
5000.00

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

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

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

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

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NAME OF COMMITTEE (In Full)  
**Make It Work PAC**

Full Name (Last, First, Middle Initial)  
**A. International Brotherhood of Electrical Workers PAC**

Mailing Address 900 7th St NW

City Washington State DC Zip Code 20001-3886

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

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  
 12 / 16 / 2015  
**Transaction ID : VNHYE6A2J1**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. Microsoft Corporation PAC**

Mailing Address 16011 NE 36th Way

City Redmond State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C** C00227546

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  
 12 / 16 / 2015  
**Transaction ID : VNHYE6A2P2**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**c. Mortgage Bankers Association PAC**

Mailing Address 1919 M St NW  
FI 5

City Washington State DC Zip Code 20036-3572

FEC ID number of contributing federal political committee. **C** C00004812

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  
 12 / 12 / 2015  
**Transaction ID : VNHYE6A2H3**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**Make It Work PAC**

Full Name (Last, First, Middle Initial)  
**A. Employees of Northrop Grumman Corporation PAC**

Mailing Address 2980 Fairview Park Dr

City Falls Church State VA Zip Code 22042-4511

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

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  
 09 / 14 / 2015  
**Transaction ID : VNHYE187J3**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**B. CULAC the PAC of the Credit Union National Association**

Mailing Address 601 Pennsylvania Ave NW  
South Building, Suite 600

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

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  
 09 / 30 / 2015  
**Transaction ID : VNHYE24644**

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
**C. Wal-Mart Stores Inc. PAC for Responsible Government**

Mailing Address 702 SW 8th St

City Bentonville State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

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  
 10 / 21 / 2015  
**Transaction ID : VNHYE3HSF4**

Amount of Each Receipt this Period  
 2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**Make It Work PAC**

Full Name (Last, First, Middle Initial)  
**A. American Institute of Certified Public Accountants PAC**

Mailing Address 220 Leigh Farm Rd

City State Zip Code  
Durham NC 27707-8110

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  
MM / DD / YYYY  
08 / 04 / 2015  
**Transaction ID : VNHYDZ6Y25**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. Employees of Northrop Grumman Corporation PAC**

Mailing Address 2980 Fairview Park Dr

City State Zip Code  
Falls Church VA 22042-4511

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
10 / 21 / 2015  
**Transaction ID : VNHYE3HS96**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**C. General Dynamics Corporation PAC**

Mailing Address 2941 Fairview Park Dr  
Ste 100

City State Zip Code  
Falls Church VA 22042-4541

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2015  
**Transaction ID : VNHYE1SAP7**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	34000.00

**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)  
**Make It Work PAC**

Full Name (Last, First, Middle Initial)  
**A. NGP VAN, Inc.**

Date of Disbursement:  /  /

Mailing Address: 1101 15th St NW, Ste 500  
City: Washington, State: DC, Zip Code: 20005-5006

Purpose of Disbursement: Database Services  
Candidate Name:   
Category/Type:

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

Transaction ID : VNGZPA0GHA1  
Amount of Each Disbursement this Period:

Full Name (Last, First, Middle Initial)  
**B. Lori B. LaFave**

Date of Disbursement:  /  /

Mailing Address: 236 Massachusetts Ave NE, Ste 202  
City: Washington, State: DC, Zip Code: 20002-4980

Purpose of Disbursement: Fundraising Consulting Services  
Candidate Name:   
Category/Type:

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

Transaction ID : VNGZPA0KTX4  
Amount of Each Disbursement this Period:

Full Name (Last, First, Middle Initial)  
**C. NGP VAN, Inc.**

Date of Disbursement:  /  /

Mailing Address: 1101 15th St NW, Ste 500  
City: Washington, State: DC, Zip Code: 20005-5006

Purpose of Disbursement: Database Services  
Candidate Name:   
Category/Type:

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

Transaction ID : VNGZP9ZWZ5  
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)  
**Make It Work PAC**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Database Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2015

Transaction ID : VNGZP9ZFX17

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

**B. Jesse Lirtzman-Sivkin**

Mailing Address 236 Massachusetts Ave NE  
Ste 202

City Washington State DC Zip Code 20002-4980

Purpose of Disbursement  
Reimbursement, 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  
07 / 22 / 2015

Transaction ID : VNGZP9ZDW17

Amount of Each Disbursement this Period

1430.00

Full Name (Last, First, Middle Initial)

**C. Spirit of Washington**

Mailing Address 600 Water St SW

City Washington State DC Zip Code 20024-2471

Purpose of Disbursement  
Facility 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  
07 / 22 / 2015

Transaction ID : VNGZP9ZDW25

Amount of Each Disbursement this Period

1430.00

[MEMO ITEM]  
\*

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

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

1880.00

**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)  
**Make It Work PAC**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie, LLP**

Mailing Address 1201 3rd Ave  
Ste 4900

City Seattle State WA Zip Code 98101-3095

Purpose of Disbursement  
Legal & Compliance Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2015

Transaction ID : VNGZPA0JX37

Amount of Each Disbursement this Period

7574.20

Full Name (Last, First, Middle Initial)

**B. Perkins Coie, LLP**

Mailing Address 1201 3rd Ave  
Ste 4900

City Seattle State WA Zip Code 98101-3095

Purpose of Disbursement  
Legal & Compliance Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2015

Transaction ID : VNGZPA0JX29

Amount of Each Disbursement this Period

1200.80

Full Name (Last, First, Middle Initial)

**C. Jesse Lirtzman-Sivkin**

Mailing Address 236 Massachusetts Ave NE  
Ste 202

City Washington State DC Zip Code 20002-4980

Purpose of Disbursement  
Reimbursement, 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  
10 / 09 / 2015

Transaction ID : VNGZP9ZWZT9

Amount of Each Disbursement this Period

4290.00

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

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

13065.00

**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)  
**Make It Work PAC**

Full Name (Last, First, Middle Initial)

**A. Spirit of Washington**

Mailing Address 600 Water St SW

City Washington State DC Zip Code 20024-2471

Purpose of Disbursement  
Facility Rental & Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 09 / 2015

**Transaction ID : VNGZP9ZWZV7**

Amount of Each Disbursement this Period

4290.00

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

0.00

24620.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**Make It Work PAC**

Full Name (Last, First, Middle Initial)

### A. Blumenthal for Connecticut

Mailing Address 777 Summer St  
Ste 103

City Stamford State CT Zip Code 06901

Purpose of Disbursement  
Contribution

Candidate Name  
**Richard Blumenthal**

Office Sought:  House  
 Senate  
 President  
State: CT District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Convention

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : VNGZP9ZRSK1

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

### B. Bennet for Colorado

Mailing Address PO Box 3078

City Denver State CO Zip Code 80201-3078

Purpose of Disbursement  
Contribution

Candidate Name  
**Michael F. Bennet**

Office Sought:  House  
 Senate  
 President  
State: CO District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Convention

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : VNGZP9ZRT93

Amount of Each Disbursement this Period

2500.00
---------

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)  Convention

Date of Disbursement

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

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

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

5000.00
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5000.00
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Make It Work PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Perkins Coie, LLP</b>	Nature of Debt (Purpose): Legal & Compliance Services
Mailing Address 1201 3rd Ave Ste 4900	
City State Zip Code Seattle WA 98101-3095	

Outstanding Balance Beginning This Period <input type="text" value="16248.97"/>	<b>Transaction ID : VNF169H9SK3</b>	
Amount Incurred This Period <input type="text" value="6004.88"/>	Payment This Period <input type="text" value="7574.20"/>	Outstanding Balance at Close of This Period <input type="text" value="14679.65"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lori B. LaFave</b>	Nature of Debt (Purpose): Fundraising Consulting Services
Mailing Address 236 Massachusetts Ave NE Ste 202	
City State Zip Code Washington DC 20002-4980	

Outstanding Balance Beginning This Period <input type="text" value="16000.00"/>	<b>Transaction ID : VNF169H9SD6</b>	
Amount Incurred This Period <input type="text" value="3500.00"/>	Payment This Period <input type="text" value="8775.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10725.00"/>

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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="25404.65"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="25404.65"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="25404.65"/>