

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

L PAC

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

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

C C00519413

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on M M / D D / Y Y Y Y Y Y in the State of  

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

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 01 / 01 / 2019 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2019

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

Rosen, Hilary, , ,

Type or Print Name of Treasurer

Signature of Treasurer Rosen, Hilary, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 23 / 2019

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

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

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

L PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		31455.86
(b) Cash on Hand at Beginning of Reporting Period.....	31455.86	
(c) Total Receipts (from Line 19) .....	343241.51	343241.51
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	374697.37	374697.37
7. Total Disbursements (from Line 31).....	340787.95	340787.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	33909.42	33909.42
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

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Page 3

Write or Type Committee Name

**L PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2019 To: M M / D D / Y Y Y Y 06 / 30 / 2019

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).....	102575.00	102575.00
(ii) Unitemized .....	2034.00	2034.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	104609.00	104609.00
(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) .....	104609.00	104609.00
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).....	7647.51	7647.51
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	230985.00	230985.00
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)).....▶	343241.51	343241.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	343241.51	343241.51

**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 .....	48562.19	48562.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	48562.19	48562.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	2500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	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 (Including Non-Federal Donations).....	289725.76	289725.76
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	340787.95	340787.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	340787.95	340787.95

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	104609.00	104609.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	104609.00	104609.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	48562.19	48562.19
37. Offsets to Operating Expenditures (from Line 15, page 3).....	7647.51	7647.51
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	40914.68	40914.68

**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 209
	<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)  
**L PAC**

**A. Aberly, Naomi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 Derne St  
 Apt 5A  
 City Boston State MA Zip Code 02114-4212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Volunteer  
 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  
 02 / 07 / 2019  
**Transaction ID : VNW3HGP6AZ1**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Bauman, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2358 Massachusetts Ave NW  
 City Washington State DC Zip Code 20008-2801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bauman Foundation Occupation (for Individual) Executive  
 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 / 01 / 2019  
**Transaction ID : VNW3HGSTN46**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Bernard, Betsy, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28556 Chianti Ter  
 City Bonita Springs State FL Zip Code 34135-8095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2019  
**Transaction ID : VNW3HGW7E98**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6500.00
<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 7 OF 209
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Birch, Elizabeth, , ,</b>		Date of Receipt MM / DD / YYYY <b>04 / 07 / 2019</b>
Mailing Address <b>4455 Connecticut Ave NW 1002</b>		<b>Transaction ID : VNW3HGRSG06</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20008-2324</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1500.00</b>
Name of Employer (for Individual) <b>CBRE</b>	Occupation (for Individual) <b>Broker</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1500.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Brown, Jennifer, , ,</b>		Date of Receipt MM / DD / YYYY <b>03 / 13 / 2019</b>
Mailing Address <b>20 E 9Th St # 40</b>		<b>Transaction ID : VNW3HGQWD43</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10003-5944</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer (for Individual) <b>JBC</b>	Occupation (for Individual) <b>CEO</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Buono, Barbara, , ,</b>		Date of Receipt MM / DD / YYYY <b>02 / 28 / 2019</b>
Mailing Address <b>295 Central Park W Apt 5B</b>		<b>Transaction ID : VNW3HGQ5PY5</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10024-3022</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer (for Individual) <b>Not Employed</b>	Occupation (for Individual) <b>Public Policy Expert</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <b>250.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2000.00</b>
<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 8 OF 209
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Catalano, Laura, , ,</b>		Date of Receipt
Mailing Address 7 E Walnut St		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2019"/>
City Alexandria	State VA	Zip Code 22301-2235
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VNW3HGPHKW5</b>
Name of Employer (for Individual) Environmental Defense Fund		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Occupation (for Individual) VP, Communications		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Coughlin, Thomas, , ,</b>		Date of Receipt
Mailing Address 2555 Collins Ave Apt 2408		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2019"/>
City Miami Beach	State FL	Zip Code 33140-4755
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VNW3HGR7T53</b>
Name of Employer (for Individual) TC Media International		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) Advertising		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Cull, Rhian, , ,</b>		Date of Receipt
Mailing Address 56 Oliver St		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2019"/>
City Watertown	State MA	Zip Code 02472-4738
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VNW3HGQRAR0</b>
Name of Employer (for Individual) Hinckley Allen		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Occupation (for Individual) Attorney		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1750.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



**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 209
	<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)  
**L PAC**

**A. Daniels, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1202  
 City Shelter Island Heights State NY Zip Code 11965-1202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested  
 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 / 23 / 2019  
**Transaction ID : VNW3HGRGB95**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Desmond, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 W Oak St 15A  
 City Chicago State IL Zip Code 60610-8721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EAgle Vista Partners Occupation (for Individual) CEO Founder  
 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 / 25 / 2019  
**Transaction ID : VNW3HGSM0G0**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Difrancesco, Franca, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9300 Vineyard Haven Dr  
 City Gaithersburg State MD Zip Code 20886-4076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Apex Home Loans Occupation (for Individual) VP Residential Lending  
 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  
 02 / 14 / 2019  
**Transaction ID : VNW3HGPHM31**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1800.00
<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 10 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Falk, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1770 Micanopy Ave  
 City Miami State FL Zip Code 33133-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Akerman LLP Occupation (for Individual) Consultant.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2019  
**Transaction ID : VNW3HGRGB79**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Fein-Zachary, Valerie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 252 Marlborough St  
 City Boston State MA Zip Code 02116-1732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HMFP Occupation (for Individual) Doctor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 27 / 2019  
**Transaction ID : VNW3HGRESK7**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Fein-Zachary, Valerie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 252 Marlborough St  
 City Boston State MA Zip Code 02116-1732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HMFP Occupation (for Individual) Doctor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 27 / 2019  
**Transaction ID : VNW3HGRGA01**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<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 11 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Felicio, Diane, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2019
Mailing Address 39 Westchester Rd Westchester Road		Transaction ID : <b>VNW3HGT78T6</b>
City Jamaica Plain	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Community Catalyst	Occupation (for Individual) Interim Executive Director	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Felshin And Edrie Ferdun, Jan, , ,</b>		Date of Receipt MM / DD / YYYY 03 / 23 / 2019
Mailing Address 158 Ocean Dr Apt 405		Transaction ID : <b>VNW3HGRGBF2</b>
City Miami Beach	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Felshin, Jan, , ,</b>		Date of Receipt MM / DD / YYYY 03 / 23 / 2019
Mailing Address 158 Ocean Dr		Transaction ID : <b>VNW3HGRGBE4</b>
City Miami Beach	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) None	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<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 12 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Fouracre, Matthew, , ,</b>		Date of Receipt MM / DD / YYYY 01 / 18 / 2019
Mailing Address 2523 13Th St NW Apt 207		Transaction ID : <b>VNW3HGNB9W4</b>
City Washington	State DC	
Zip Code 20009-5200		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) LPAC	Occupation (for Individual) Political Operations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Fouracre, Matthew, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 11 / 2019
Mailing Address 2523 13Th St NW Apt 207		Transaction ID : <b>VNW3HGS2491</b>
City Washington	State DC	
Zip Code 20009-5200		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) LPAC	Occupation (for Individual) Political Operations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Gay, Faith, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 09 / 2019
Mailing Address 40 5Th Ave Apt 3A		Transaction ID : <b>VNW3HGRWNP2</b>
City New York	State NY	
Zip Code 10011-8843		Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Selendy & Gay	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5525.00
<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 13 OF 209
	<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)  
**L PAC**

**A. Goodridge, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 Saint John St  
 City Boston State MA Zip Code 02130-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NorthStar Asset Management, Inc. Occupation (for Individual) Investment Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 27 / 2019**  
**Transaction ID : VNW3HGRFPX8**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Gottschalk, Jeremy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3300 N Kenmore Ave Unit E  
 City Chicago State IL Zip Code 60657-7079  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marketplace Risk Management LLC Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **05 / 08 / 2019**  
**Transaction ID : VNW3HGT2WG0**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Guthman, Maureen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 395 Riverside Dr Apt 11F  
 City New York State NY Zip Code 10025-1892  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BET Networks Occupation (for Individual) SVP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS04E5**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<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 14 OF 209
	<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)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Haycox, Karen, , ,</b>		Date of Receipt
Mailing Address 111 John St FI 23		<input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2019"/>
City New York	State NY	Zip Code 10038-3109
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VNW3HGQ5ZT2</b>
Name of Employer (for Individual) Habitat For Humanity NYC		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	Amount of Each Receipt this Period <input type="text" value="500.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Hess, Lois &amp; Eliot, , ,</b>		Date of Receipt
Mailing Address 1000 S Pointe Dr Apt 3601		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2019"/>
City Miami Beach	State FL	Zip Code 33139-7309
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VNW3HGR7T94</b>
Name of Employer (for Individual) HWH Enterprises Inc.		Occupation (for Individual) Chairman/CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Joyce, Ramona, , ,</b>		Date of Receipt
Mailing Address 1 E Uhler Ave		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2019"/>
City Alexandria	State VA	Zip Code 22301-1427
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : VNW3HGPHKS2</b>
Name of Employer (for Individual) Federal Government		Occupation (for Individual) Chief Of Staff
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="2500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 209
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Kim, Ann, , ,</b>			Date of Receipt MM / DD / YYYY 03 / 27 / 2019 <b>Transaction ID : VNW3HGRFQ02</b>		
Mailing Address 80 Prospect St			Amount of Each Receipt this Period 500.00		
City Cambridge	State MA	Zip Code 02139-2503	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00		
Name of Employer (for Individual) Portfolio Director		Occupation (for Individual) IDEO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Kondek, Karen, , ,</b>			Date of Receipt MM / DD / YYYY 03 / 23 / 2019 <b>Transaction ID : VNW3HGRGBG8</b>		
Mailing Address 1204 NE 2Nd St			Amount of Each Receipt this Period 500.00		
City Fort Lauderdale	State FL	Zip Code 33301-1738	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00		
Name of Employer (for Individual) Information Requested		Occupation (for Individual) Information Requested	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Kunkel, Veronica, , ,</b>			Date of Receipt MM / DD / YYYY 01 / 06 / 2019 <b>Transaction ID : VNW3HGMX1G1</b>		
Mailing Address 2202 Decatur PI NW			Amount of Each Receipt this Period 500.00		
City Washington	State DC	Zip Code 20008-4008	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00		
Name of Employer (for Individual) Quest Diagnostics		Occupation (for Individual) Cytologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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 16 OF 209
	<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)  
**L PAC**

**A. Laguens, Dawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2006 Ashby Ave  
 City Austin State TX Zip Code 78704-2038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 27 / 2019  
**Transaction ID : VNW3HGQ50M9**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Leszczynski, Jeanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 65 Wellesley Ave  
 City Needham State MA Zip Code 02494-1821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 27 / 2019  
**Transaction ID : VNW3HGRG9F6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Lord, Chastity, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1714 Franklin St Ste 100 136  
 City Oakland State CA Zip Code 94612-3488  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Color Of Change Occupation (for Individual) Chief Operating Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 28 / 2019  
**Transaction ID : VNW3HGQ5Q84**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<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 17 OF 209
	<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)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Love-Witherington, Kaleen, , ,**

Mailing Address 8205 Mount Vernon Hwy

City Alexandria	State VA	Zip Code 22309-1915
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Capital One	Occupation (for Individual) Executive
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2019

**Transaction ID : VNW3HGPHM07**

Amount of Each Receipt this Period  
1000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. McCall, Dawn, , ,**

Mailing Address 2341 Collins Ave

City Miami Beach	State FL	Zip Code 33139-1608
---------------------	-------------	------------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) Not Employed
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2019

**Transaction ID : VNW3HGWPT03**

Amount of Each Receipt this Period  
1000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. McKenna, Joanne, , ,**

Mailing Address 830 Winthrop Ave

City Revere	State MA	Zip Code 02151-4206
----------------	-------------	------------------------

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

Name of Employer (for Individual) Revere City Council	Occupation (for Individual) Councillor
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
03 / 27 / 2019

**Transaction ID : VNW3HGRGA68**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<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 18 OF 209
	<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)  
**L PAC**

**A. Mikolajczyk, Kristine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 611 NE 14Th Ave  
 Apt 402  
 City Fort Lauderdale State FL Zip Code 33304-2868  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Philips Healthcare Occupation (for Individual) Healthcare Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 24 / 2019  
**Transaction ID : VNW3HGR7T61**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Moore, Trina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 136 Ravenswood Rd  
 City Waltham State MA Zip Code 02453-1755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Salesforce Occupation (for Individual) Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 27 / 2019  
**Transaction ID : VNW3HGRGA27**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Morse, Gail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3739 N Wilton Ave  
 Unit 2  
 City Chicago State IL Zip Code 60613-3915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JENNER & BLOCK Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 15 / 2019  
**Transaction ID : VNW3HGS04C9**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**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 19 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Newstat, Joyce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 California St  
 27C  
 City San Francisco State CA Zip Code 94109-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Policy Consultant  
 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 / 2019  
**Transaction ID : VNW3HGRWMT2**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. Norrington, Lorrie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Pristine Glen St  
 City Las Vegas State NV Zip Code 89135-7891  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Technical Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2019  
**Transaction ID : VNW3HGWR319**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item

**C. Pellett, Clark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 680 N Lake Shore Dr  
 Apt 1302  
 City Chicago State IL Zip Code 60611-4482  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) 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 / 16 / 2019  
**Transaction ID : VNW3HGS2RJ6**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9000.00
<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 20 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Pizer, Jonathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 551 W Stratford Pl  
 City Chicago State IL Zip Code 60657-2629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 1964 Occupation (for Individual) Real Estate Agent  
 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 / 10 / 2019  
**Transaction ID : VNW3HGRZ245**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Ricketts, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 430 Sheridan Rd  
 City Wilmette State IL Zip Code 60091-2821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Chicago Cubs Occupation (for Individual) Co-Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 16 / 2019  
**Transaction ID : VNW3HGYZB96**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. Ritchie, Alix, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 030220  
 City Fort Lauderdale State FL Zip Code 33303-0220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant  
 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  
 01 / 28 / 2019  
**Transaction ID : VNW3HGYZB62**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<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 21 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Romero, Gloria, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 808 Brickell Key Dr  
 Apt 1001  
 City Miami State FL Zip Code 33131-2214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested  
 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 / 23 / 2019  
**Transaction ID : VNW3HGRGBB0**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Rosen, Hilary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4835 Hutchins PI NW  
 City Washington State DC Zip Code 20007-1529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SKDKnickerbocker Occupation (for Individual) PR  
 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 / 30 / 2019  
**Transaction ID : VNW3HGSSYW7**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. Sadoff, Carla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 68 N 5Th St  
 City Hudson State NY Zip Code 12534-1722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lumeri Occupation (for Individual) Management Consultant  
 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 / 05 / 2019  
**Transaction ID : VNW3HGRRQ29**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<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 22 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Sarnoff, Rosita, , ,</b>		Date of Receipt MM / DD / YYYY 03 / 23 / 2019
Mailing Address 180 W 58Th St # 8A		Transaction ID : <b>VNW3HGRGBJ4</b>
City New York	State NY	
Zip Code 10019-2145		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Sarnoff, Rosita, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 03 / 2019
Mailing Address 180 W 58Th St # 8A		Transaction ID : <b>VNW3HGRM4T6</b>
City New York	State NY	
Zip Code 10019-2145		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Schreter, Lisa, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 07 / 2019
Mailing Address 1898 Crestline Dr NE		Transaction ID : <b>VNW3HGT2CY5</b>
City Atlanta	State GA	
Zip Code 30345-3804		Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Littler Mendelson P.C.	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<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 23 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Schwartz, Elizabeth, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2019
Mailing Address 3301 NE 5Th Ave		<b>Transaction ID : VNW3HGRGBR1</b>
City Miami	State FL	Zip Code 33137-4053
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Elizabeth F Schwartz, PA	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Seremetis, Stephanie, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2019
Mailing Address 27 Olden Ln		<b>Transaction ID : VNW3HGSPWJ2</b>
City Princeton	State NJ	Zip Code 08540-4919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer (for Individual) Novo Nordisk Inc	Occupation (for Individual) Physician	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Shaw, Judith, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2019
Mailing Address 2001 Marina Dr Apt 409		<b>Transaction ID : VNW3HGS04F3</b>
City Quincy	State MA	Zip Code 02171-1544
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3250.00
<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 24 OF 209
	<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 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Sherman, Jayne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 E 14Th St  
 City New York State NY Zip Code 10003-3115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Producer  
 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 / 23 / 2019  
**Transaction ID : VNW3HGRGBC8**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Signer, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3400 Galt Ocean Dr Apt 1106S  
 City Fort Lauderdale State FL Zip Code 33308-7022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 23 / 2019  
**Transaction ID : VNW3HGRGB87**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Silverman, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 58 W 58Th St  
 City New York State NY Zip Code 10019-2502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) TV 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  
 03 / 23 / 2019  
**Transaction ID : VNW3HGRGBA3**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<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 25 OF 209
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Silverman, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 58 W 58Th St  
 City New York State NY Zip Code 10019-2502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) TV Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 24 / 2019  
**Transaction ID : VNW3HGR7T86**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Snider, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1504 13Th St NW  
 City Washington State DC Zip Code 20005-3703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Farm Occupation (for Individual) Insurance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 14 / 2019  
**Transaction ID : VNW3HGPHT2**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Spring, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4261 Alton Rd  
 City Miami Beach State FL Zip Code 33140-2848  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) South Beach Insurance Occupation (for Individual) Insurance  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 24 / 2019  
**Transaction ID : VNW3HGR7TC8**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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 26 OF 209
	<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)  
**L PAC**

**A. Stanton, Mary Beth, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1203 New Jersey AveNW

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

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

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

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
02	/	14	/	2019

**Transaction ID : VNW3HGPHQF2**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. Sullivan, Margaret, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 409 Commonwealth Ave

City Boston	State MA	Zip Code 02215-2355
----------------	-------------	------------------------

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

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

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
03	/	27	/	2019

**Transaction ID : VNW3HGRM8D2**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C. Svoboda, Christina, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1731 19Th St NW

City Washington	State DC	Zip Code 20009-1648
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) 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
02	/	14	/	2019

**Transaction ID : VNW3HGPHM23**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<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 27 OF 209
	<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)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Tamayo, Lillian, , ,</b>		Date of Receipt MM / DD / YYYY 03 / 23 / 2019
Mailing Address 6307 Garden Ave		<b>Transaction ID : VNW3HGRGBD6</b>
City West Palm Beach	State FL	Zip Code 33405-4201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Planned Parenthood - South Florida	Occupation (for Individual) Healthcare	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Tamayo, Lillian, , ,</b>		Date of Receipt MM / DD / YYYY 03 / 24 / 2019
Mailing Address 6307 Garden Ave		<b>Transaction ID : VNW3HGR7TB0</b>
City West Palm Beach	State FL	Zip Code 33405-4201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Planned Parenthood - South Florida	Occupation (for Individual) Healthcare	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Terrell, Dorothy, , ,</b>		Date of Receipt MM / DD / YYYY 03 / 09 / 2019
Mailing Address 400 Alton Rd Apt 2503		<b>Transaction ID : VNW3HGQS6B9</b>
City Miami Beach	State FL	Zip Code 33139-6750
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<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 28 OF 209
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Tobias, Andrew, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 146 Central Park W  
 City New York State NY Zip Code 10023-6297  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Writer  
 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 / 23 / 2019  
**Transaction ID : VNW3HGRGBH6**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Tobias, Andrew, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 146 Central Park W  
 City New York State NY Zip Code 10023-6297  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Writer  
 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 / 24 / 2019  
**Transaction ID : VNW3HGR7T78**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Tomchin, Joy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 252 7Th Ave Apt 15D  
 City New York State NY Zip Code 10001-7348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 27 / 2019  
**Transaction ID : VNW3HGWP6Q2**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<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 29 OF 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Tye, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 51 Endicott Ave  
 City Revere State MA Zip Code 02151-4155  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Revere Public Schools Occupation (for Individual) School Committee Member  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 29 / 2019  
**Transaction ID : VNW3HGRGG78**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Van Ness, Joan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 4185  
 City Cherry Grove State NY Zip Code 11782-0995  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 25 / 2019  
**Transaction ID : VNW3HGRGBN7**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Vanden Hoek, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5353 N Magnolia Ave  
 City Chicago State IL Zip Code 60640-2204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UIC Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 15 / 2019  
**Transaction ID : VNW3HGS0488**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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 30 OF 209
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. VanderLinden, John, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2430 N Lakeview Ave

City Chicago	State IL	Zip Code 60614-2877
-----------------	-------------	------------------------

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

Name of Employer (for Individual) BHKR	Occupation (for Individual) Real Estate Broker
---	---

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	/	28	/	2019

**Transaction ID : VNW3HGRFQ19**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Weiner, Shari, L, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 E 81St St  
Apt 3E

City New York	State NY	Zip Code 10028-0247
------------------	-------------	------------------------

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

Name of Employer (for Individual) Compass	Occupation (for Individual) Real Estate Broker
--	---

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	/	08	/	2019

**Transaction ID : VNW3HGQS3E6**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	102575.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 209
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**L PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Blue Parasol Group, LLC**

Mailing Address 3901 Centerview Dr  
Ste W

City Chantilly State VA Zip Code 20151-3229

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
9000.00

Date of Receipt  
MM / DD / YYYY  
01 / 02 / 2019

**Transaction ID : VNW3HGMREF1**

Amount of Each Receipt this Period  
9000.00

Memo Item

Refund of mistaken October 2018 American Express fees

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9000.00
<b>TOTAL</b> This Period (last page this line number only).....	9000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Atkin, Barrie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 255 Bishops Forest Dr  
 City Waltham State MA Zip Code 02452-8804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Atkin Associates Strategy/Marketing/Fu Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **03 / 27 / 2019**  
**Transaction ID : VNW3HGRG999**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**B. Baidas, Austin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 800 W Cornelia Ave Apt 400  
 City Chicago State IL Zip Code 60657-1948  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS1953**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**C. Barnes, Angela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6911 S Euclid Ave  
 City Chicago State IL Zip Code 60649-1511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UI LABS Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS18X9**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<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 33 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Bell, Susan, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2019
Mailing Address 201 N Green St		<b>Transaction ID : VNW3HGS18Z5</b>
City Chicago	State IL	Zip Code 60607-1701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) The Chamberlain Group	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bernstein, Susan, , ,</b>		Date of Receipt MM / DD / YYYY 03 / 27 / 2019
Mailing Address 82 Ellery St		<b>Transaction ID : VNW3HGRG981</b>
City Cambridge	State MA	Zip Code 02138-4355
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Self	Occupation (for Individual) Artist	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bertocchi, Joel, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2019
Mailing Address 71 S Wacker Dr FI 47		<b>Transaction ID : VNW3HGS04V8</b>
City Chicago	State IL	Zip Code 60606-4637
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Akerman	Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<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 34 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Corzo, Deya, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Parker Rd  
 City Wellesley State MA Zip Code 02482-2250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sigilon Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 27 / 2019**  
**Transaction ID : VNW3HGRG9A7**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**B. Daftary, Farideh, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2620 N Seminary Ave  
 City Chicago State IL Zip Code 60614-1311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Art Of Modern Dentistry Occupation (for Individual) Dentist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS18Q2**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**C. Densham, Andrea, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1602 Dempster St  
 City Evanston State IL Zip Code 60202-1118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Shedd Aquarium Occupation (for Individual) Senior Director Of Policy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS18W2**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<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 35 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Edwards, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 E Putnam Ave # 3270  
 City Greenwich State CT Zip Code 06830-5424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bill Edwards Investments Occupation (for Individual) Tech Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 01 / 2019  
**Transaction ID : VNW3HGRHVS1**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**B. Edwards, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 E Putnam Ave # 3270  
 City Greenwich State CT Zip Code 06830-5424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bill Edwards Investments Occupation (for Individual) Tech Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 01 / 2019  
**Transaction ID : VNW3HGRHVT9**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**C. Gallagher, Carolyn, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 W Randolph St Apt 1406  
 City Chicago State IL Zip Code 60601-3523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Of Illinois Occupation (for Individual) Judge  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 04 / 15 / 2019  
**Transaction ID : VNW3HGS1937**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item  
 Non-Contribution Account

**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: (check only one)	PAGE 36 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Halligan, Catherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 243 Caselli Ave  
 City San Francisco State CA Zip Code 94114-2322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ulta Beauty Occupation (for Individual) Board Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 11 / 2019**  
**Transaction ID : VNW3HGS1BW8**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**B. Halligan, Catherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 243 Caselli Ave  
 City San Francisco State CA Zip Code 94114-2322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ulta Beauty Occupation (for Individual) Board Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6500.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS0454**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item  
 Non-Contribution Account

**C. Hardikar, Aditi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1340 S Michigan Ave Apt 704  
 City Chicago State IL Zip Code 60605-2611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Obama Foundation Occupation (for Individual) Manager Of The Office Of The CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS0JA3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6750.00  
**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 37 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Hey, Jean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 Calvin Rd  
 City Jamaica Plain State MA Zip Code 02130-3415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Writer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 27 / 2019  
**Transaction ID : VNW3HGRG9B5**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**B. Hletko, Valerie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3523 Porter St NW  
 City Washington State DC Zip Code 20016-3177  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Buckley Sandler LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 15 / 2019  
**Transaction ID : VNW3HGS04N0**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**C. Horwich, Dave, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 724 Sumac Rd  
 City Highland Park State IL Zip Code 60035-3820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DH Advising LLC Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 15 / 2019  
**Transaction ID : VNW3HGS18T6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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 38 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Howse, Nathaniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1732 S Indiana Ave  
 City Chicago State IL Zip Code 60616-1302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Of Illinois Occupation (for Individual) Appellate Court Justice  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS04P8**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**B. Isaacson, Arline, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 Mount Vernon St Apt 32  
 City Boston State MA Zip Code 02108-1401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Lobbyist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 27 / 2019**  
**Transaction ID : VNW3HGRG9G4**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**C. Jones, Margaret, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3541 N Fremont St  
 City Chicago State IL Zip Code 60657-1706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hyatt Hotels & Resorts Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS1911**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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 39 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Kamio, Mariko, , ,</b>			Date of Receipt
Mailing Address 20 Elmwood Ave			<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2019"/>
City Cambridge	State MA	Zip Code 02138-4740	<b>Transaction ID : VNW3HGRFPZ4</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer (for Individual) Self		Occupation (for Individual) Real Estate	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>		Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Kauffman, Joyce, , ,</b>			Date of Receipt
Mailing Address 67 Clarendon Park			<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2019"/>
City Roslindale	State MA	Zip Code 02131-4202	<b>Transaction ID : VNW3HGRG9H2</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) Self		Occupation (for Individual) Lawyer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Kirk, Daniel, , ,</b>			Date of Receipt
Mailing Address 3757 N Lakewood Ave			<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2019"/>
City Chicago	State IL	Zip Code 60613-3715	<b>Transaction ID : VNW3HGS19K3</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="2000.00"/>
Name of Employer (for Individual) ComEd		Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>		Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="4750.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Knorowski, Carla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3014 N Seminary Ave  
 City Chicago State IL Zip Code 60657-4336  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lincoln Presidential Library Foundatio Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS18R0**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**B. Krakoff, Hope, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 Ackers Ave # 2  
 City Brookline State MA Zip Code 02445-4161  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Coldwell Banker Occupation (for Individual) Real Estate Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 27 / 2019**  
**Transaction ID : VNW3HGRG9E9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**C. La Rocco, Bernadette, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1635 W Belmont Ave Apt 712  
 City Chicago State IL Zip Code 60657-3058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Coldwell Banker Occupation (for Individual) Broker  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS1903**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**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: (check only one)	PAGE 41 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Laguens, Dawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2006 Ashby Ave  
 City Austin State TX Zip Code 78704-2038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 11 / 2019**  
**Transaction ID : VNW3HGRZ8S3**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Laguens, Dawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2006 Ashby Ave  
 City Austin State TX Zip Code 78704-2038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **05 / 11 / 2019**  
**Transaction ID : VNW3HGT7BN2**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Laguens, Dawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2006 Ashby Ave  
 City Austin State TX Zip Code 78704-2038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **06 / 11 / 2019**  
**Transaction ID : VNW3HGW3P93**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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 42 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Leszczynski, Jeanne, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 27 / 2019
Mailing Address 65 Wellesley Ave			<b>Transaction ID : VNW3HGRESM5</b>
City Needham	State MA	Zip Code 02494-1821	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) None		Occupation (for Individual) Retired	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Maspons, Sherry, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 27 / 2019
Mailing Address 11A Watson St			<b>Transaction ID : VNW3HGRG9M6</b>
City Marblehead	State MA	Zip Code 01945-3435	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Entrepreneur		Occupation (for Individual) Accounting And Technology	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. McEnany, Brian, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 27 / 2019
Mailing Address 4 Mount Vernon St			<b>Transaction ID : VNW3HGRG9N4</b>
City Charlestown	State MA	Zip Code 02129-3411	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) John Hancock Signature Services		Occupation (for Individual) Legal Compliance	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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 43 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Milbratz, Erika, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 723 Sheridan Rd  
 City Wilmette State IL Zip Code 60091-1959  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS04X4**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item  
 Non-Contribution Account

**B. Mondini, Elena J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1326 Laurel Ave  
 City Ocean State NJ Zip Code 07712-4607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt **01 / 04 / 2019**  
**Transaction ID : VNW3HGMSJY8**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Non-Contribution Account

**C. Mondini, Elena J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1326 Laurel Ave  
 City Ocean State NJ Zip Code 07712-4607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt **02 / 04 / 2019**  
**Transaction ID : VNW3HGP3QP5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1700.00
<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 44 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Mondini, Elena J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1326 Laurel Ave  
 City Ocean State NJ Zip Code 07712-4607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 04 / 2019**  
**Transaction ID : VNW3HGQH0X5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Non-Contribution Account

**B. Mondini, Elena J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1326 Laurel Ave  
 City Ocean State NJ Zip Code 07712-4607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 04 / 2019**  
**Transaction ID : VNW3HGRRE45**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Non-Contribution Account

**C. Mondini, Elena J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1326 Laurel Ave  
 City Ocean State NJ Zip Code 07712-4607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 04 / 2019**  
**Transaction ID : VNW3HGSZMG9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<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 45 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Mondini, Elena J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1326 Laurel Ave  
 City Ocean State NJ Zip Code 07712-4607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 04 / 2019**  
**Transaction ID : VNW3HGVRQX9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Non-Contribution Account

**B. Moore, Trina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 136 Ravenswood Rd  
 City Waltham State MA Zip Code 02453-1755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Salesforce Occupation (for Individual) Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 27 / 2019**  
**Transaction ID : VNW3HGRG9W9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**C. Moreno, Grace, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Milk St FI 11  
 City Boston State MA Zip Code 02109-5003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MA LGBT Chamber Of Commerce Occupation (for Individual) Executive Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 27 / 2019**  
**Transaction ID : VNW3HGRG9V1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<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 46 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Morten, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5842 N Washtenaw Ave  
 City Chicago State IL Zip Code 60659-3912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Morten Group, LLC Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 15 / 2019  
**Transaction ID : VNW3HGS1945**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

**B. Nelson, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2448 W Greenleaf Ave Apt 3  
 City Chicago State IL Zip Code 60645-3304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Artist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 15 / 2019  
**Transaction ID : VNW3HGS04T0**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**C. Norton, Giulia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 Cranston St Address Line 2  
 City Jamaica Plain State MA Zip Code 02130-1805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Abt Associates Occupation (for Individual) Health Services Researcher  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 27 / 2019  
**Transaction ID : VNW3HGRG9P2**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**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: (check only one)	PAGE 47 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Nussbaum, Jane, , ,</b>			Date of Receipt MM / DD / YYYY 03 / 27 / 2019
Mailing Address 140 Elm St Apt 6			<b>Transaction ID : VNW3HGRG9Q0</b>
City Marblehead	State MA	Zip Code 01945-3364	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Pritzker, Jennifer, N, ,</b>			Date of Receipt MM / DD / YYYY 04 / 11 / 2019
Mailing Address 103 W Chestnut St			<b>Transaction ID : VNW3HGS1BZ2</b>
City Chicago	State IL	Zip Code 60610-3201	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Tawani Enterprises		Occupation (for Individual) CEO	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Reamer, Sue, , ,</b>			Date of Receipt MM / DD / YYYY 03 / 27 / 2019
Mailing Address 20 Webster St Apt 213			<b>Transaction ID : VNW3HGRFPY6</b>
City Brookline	State MA	Zip Code 02446-4963	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) None		Occupation (for Individual) Retired	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7250.00
<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 48 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Reamer, Sue, , ,</b>			Date of Receipt MM / DD / YYYY 03 / 27 / 2019
Mailing Address 20 Webster St Apt 213			<b>Transaction ID : VNW3HGRG9S5</b>
City Brookline	State MA	Zip Code 02446-4963	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) None		Occupation (for Individual) Retired	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ricketts, Laura, , ,</b>			Date of Receipt MM / DD / YYYY 01 / 16 / 2019
Mailing Address 430 Sheridan Rd			<b>Transaction ID : VNW3HGNJ4B3</b>
City Wilmette	State IL	Zip Code 60091-2821	Amount of Each Receipt this Period 45000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Chicago Cubs		Occupation (for Individual) Co-Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 45000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Ricketts, Laura, , ,</b>			Date of Receipt MM / DD / YYYY 03 / 18 / 2019
Mailing Address 430 Sheridan Rd			<b>Transaction ID : VNW3HGRHV95</b>
City Wilmette	State IL	Zip Code 60091-2821	Amount of Each Receipt this Period 50000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Chicago Cubs		Occupation (for Individual) Co-Owner	Non-contribution account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 95000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	95500.00
<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 49 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Ritchie, Alix, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 030220  
 City Fort Lauderdale State FL Zip Code 33303-0220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 47000.00

Date of Receipt 01 / 28 / 2019  
**Transaction ID : VNW3HGNGKW5**  
 Amount of Each Receipt this Period 47000.00  
 Memo Item

**B. Rogers, Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 271 Walden St # 2  
 City Cambridge State MA Zip Code 02138-6715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) HR Consultant  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 03 / 27 / 2019  
**Transaction ID : VNW3HGRG9T3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**C. Rosasco, Nat, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 174 W Olive St  
 City Elmhurst State IL Zip Code 60126-3909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olive Street Design Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 04 / 15 / 2019  
**Transaction ID : VNW3HGS19N9**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... **47750.00**  
**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 50 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Rosen, Hilary, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y <b>04 / 30 / 2019</b>
Mailing Address <b>4835 Hutchins PI NW</b>			<b>Transaction ID : VNW3HGYZB88</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20007-1529</b>	Amount of Each Receipt this Period <b>15000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) <b>SKDKnickerbocker</b>		Occupation (for Individual) <b>PR</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>15000.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Sandberg, Stephanie, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y <b>03 / 27 / 2019</b>
Mailing Address <b>32 Vreeland Ct</b>			<b>Transaction ID : VNW3HGRG9C3</b>
City <b>Princeton</b>	State <b>NJ</b>	Zip Code <b>08540-6760</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) <b>LPAC</b>		Occupation (for Individual) <b>Executive Director</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>250.00</b>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Salsberry, Kelly, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y <b>04 / 15 / 2019</b>
Mailing Address <b>659 E 41St St</b>			<b>Transaction ID : VNW3HGS18S8</b>
City <b>Chicago</b>	State <b>IL</b>	Zip Code <b>60653-2820</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) <b>City Of Chicago</b>		Occupation (for Individual) <b>Civil Servant</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <b>1000.00</b>	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>16250.00</b>
<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 51 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Schwartz, Arielle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 W School St  
 Apt 104  
 City Boston State MA Zip Code 02129-3932  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AIPAC Occupation (for Individual) New England Progressive Outreach Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 27 / 2019**  
**Transaction ID : VNW3HGRG9D1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**B. Soodek, Coco, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 676 W Irving Park Rd  
 Apt F4  
 City Chicago State IL Zip Code 60613-3128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Seasongood Law, Inc. Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS04Q6**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**C. Splaine, Erin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 Rice Rd  
 City Wayland State MA Zip Code 01778-3813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The First Unitarian Universalist Socie Occupation (for Individual) Minister  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 27 / 2019**  
**Transaction ID : VNW3HGRG9J0**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**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 52 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Stark, Martha, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 21 / 2019
Mailing Address 920 Union St Apt 2D		<b>Transaction ID : VNW3HGNCV35</b>
City Brooklyn	State NY	Zip Code 11215-1619
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) New York University	Occupation (for Individual) Professor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Stark, Martha, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 21 / 2019
Mailing Address 920 Union St Apt 2D		<b>Transaction ID : VNW3HGPYZ28</b>
City Brooklyn	State NY	Zip Code 11215-1619
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) New York University	Occupation (for Individual) Professor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Stark, Martha, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2019
Mailing Address 920 Union St Apt 2D		<b>Transaction ID : VNW3HGR70A6</b>
City Brooklyn	State NY	Zip Code 11215-1619
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) New York University	Occupation (for Individual) Professor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 150.00	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<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 53 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Stark, Martha, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y <b>04 / 21 / 2019</b>
Mailing Address 920 Union St Apt 2D		<b>Transaction ID : VNW3HGSHHD0</b>
City Brooklyn	State NY	Zip Code 11215-1619
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>50.00</b>
Name of Employer (for Individual) New York University	Occupation (for Individual) Professor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>200.00</b>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Stark, Martha, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y <b>05 / 21 / 2019</b>
Mailing Address 920 Union St Apt 2D		<b>Transaction ID : VNW3HGTY512</b>
City Brooklyn	State NY	Zip Code 11215-1619
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>50.00</b>
Name of Employer (for Individual) New York University	Occupation (for Individual) Professor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Stark, Martha, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y <b>06 / 21 / 2019</b>
Mailing Address 920 Union St Apt 2D		<b>Transaction ID : VNW3HGWE884</b>
City Brooklyn	State NY	Zip Code 11215-1619
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>50.00</b>
Name of Employer (for Individual) New York University	Occupation (for Individual) Professor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <b>300.00</b>	Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>150.00</b>
<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 54 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Switzer, Marcus, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1601 W School St  
 City Chicago State IL Zip Code 60657-2140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SCG Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS19J5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**B. Tomchin, Joy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 252 7Th Ave Apt 15D  
 City New York State NY Zip Code 10001-7348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt **06 / 27 / 2019**  
**Transaction ID : VNW3HGWP6S7**  
 Amount of Each Receipt this Period 20000.00  
 Memo Item  
 Non-Contribution Account

**C. Trummel, Rachael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 W Lake St Ste 1650  
 City Chicago State IL Zip Code 60606-0070  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) King & Spalding Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 15 / 2019**  
**Transaction ID : VNW3HGS04R4**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20750.00
<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 55 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Walton, Claire, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42 W Cedar St  
 City Boston State MA Zip Code 02114-3302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 27 / 2019  
**Transaction ID : VNW3HGRG9K8**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**B. Webber, Christy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2900 W Ferdinand St  
 City Chicago State IL Zip Code 60612-1640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHRISTY WEBBER LANDSCAPES Occupation (for Individual) LANDSCAPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 15 / 2019  
**Transaction ID : VNW3HGS04Y2**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**C. Weiner, Shari, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 E 81St St Apt 3E  
 City New York State NY Zip Code 10028-0247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Compass Occupation (for Individual) Real Estate Broker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 08 / 2019  
**Transaction ID : VNW3HGYZBA4**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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 56 OF 209
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Weiner, Shari, L, ,

Mailing Address 30 E 81St St  
Apt 3E

City New York State NY Zip Code 10028-0247

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

Name of Employer (for Individual) Compass Occupation (for Individual) Real Estate Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 27 / 2019

**Transaction ID : VNW3HGRG9R8**

Amount of Each Receipt this Period  
500.00

Memo Item

Non-Contribution Account

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	229900.00



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)

### A. BankCard

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement  
Contribution 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 / 03 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : VNV499ZNDZ  
Amount of Each Disbursement this Period

[REDACTED] 13.75

Memo Item

Full Name (Last, First, Middle Initial)

### B. BankCard

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement  
Contribution 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 / 03 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : VNV499ZNE0  
Amount of Each Disbursement this Period

[REDACTED] 5.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. BankCard

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement  
Contribution 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 / 03 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : VNV499ZNE1  
Amount of Each Disbursement this Period

[REDACTED] 286.74

Memo Item

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

[REDACTED] 305.49

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNE2

Amount of Each Disbursement this Period: 30.94

Memo Item

**B. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNE3

Amount of Each Disbursement this Period: 5.00

Memo Item

**C. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNE4

Amount of Each Disbursement this Period: 506.24

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 542.18

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNE5

Amount of Each Disbursement this Period: 5.00

Memo Item

**B. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNE6

Amount of Each Disbursement this Period: 25.53

Memo Item

**C. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 28 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNE7

Amount of Each Disbursement this Period: 220.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 250.53

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)

**A. BankCard**

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement  
Contribution 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 / 01 / 2019

FEC Identification Number

C [ ]

Transaction ID : VNV499ZNE8  
Amount of Each Disbursement this Period

[ ] 30.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. BankCard**

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement  
Contribution 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 / 01 / 2019

FEC Identification Number

C [ ]

Transaction ID : VNV499ZNE9  
Amount of Each Disbursement this Period

[ ] 268.49

Memo Item

Full Name (Last, First, Middle Initial)

**C. BankCard**

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement  
Contribution 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 / 01 / 2019

FEC Identification Number

C [ ]

Transaction ID : VNV499ZNE/  
Amount of Each Disbursement this Period

[ ] 650.68

Memo Item

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

[ ] 949.67

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

[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNEE

Amount of Each Disbursement this Period: 5.00

Memo Item

**B. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 16 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNEC

Amount of Each Disbursement this Period: 5.00

Memo Item

**C. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNEI

Amount of Each Disbursement this Period: 5.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15.00

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)

**A. BankCard**

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement  
Contribution 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 / 03 / 2019

FEC Identification Number

C  
Transaction ID : VNV499ZNEE  
Amount of Each Disbursement this Period  
1163.63

Memo Item

Full Name (Last, First, Middle Initial)

**B. BTC Revolutions**

Mailing Address 1500 Massachusetts Ave NW

City Washington State DC Zip Code 20005-1821

Purpose of Disbursement  
Consulting Work

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2019

FEC Identification Number

C  
Transaction ID : VNV499ZNEF  
Amount of Each Disbursement this Period  
1600.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CNA**

Mailing Address 1 Meridian Blvd Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 03 / 2019

FEC Identification Number

C  
Transaction ID : VNV499ZNGI  
Amount of Each Disbursement this Period  
39.41

Memo Item

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

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

2803.04

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 01 / 2019

FEC Identification Number: C [ ]  
**Transaction ID : VNV499ZNG7**  
Amount of Each Disbursement this Period: [ ] 39.41

Memo Item

**B. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 01 / 2019

FEC Identification Number: C [ ]  
**Transaction ID : VNV499ZNG5**  
Amount of Each Disbursement this Period: [ ] 39.39

Memo Item

**C. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 03 / 2019

FEC Identification Number: C [ ]  
**Transaction ID : VNV499ZNG;**  
Amount of Each Disbursement this Period: [ ] 37.69

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ [ ] 116.49

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNG3

Amount of Each Disbursement this Period: 38.13

Memo Item

**B. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNG4

Amount of Each Disbursement this Period: 38.13

Memo Item

**C. DC Health Link**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 19 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNE1

Amount of Each Disbursement this Period: 1261.39

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1337.65

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. DC Health Link</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2019
Mailing Address PO Box 97022		FEC Identification Number C <b>Transaction ID : VNV499ZNER</b> Amount of Each Disbursement this Period 496.49
City Washington	State DC	
Purpose of Disbursement Insurance	Zip Code 20090-7022	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DC Health Link</b>		Date of Disbursement MM / DD / YYYY 05 / 22 / 2019
Mailing Address PO Box 97022		FEC Identification Number C <b>Transaction ID : VNV499ZNES</b> Amount of Each Disbursement this Period 496.49
City Washington	State DC	
Purpose of Disbursement Insurance	Zip Code 20090-7022	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DC Health Link</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2019
Mailing Address PO Box 97022		FEC Identification Number C <b>Transaction ID : VNV499ZNE1</b> Amount of Each Disbursement this Period 496.49
City Washington	State DC	
Purpose of Disbursement Insurance	Zip Code 20090-7022	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

1489.47

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Fouracre, Matthew, , ,</b>			Date of Disbursement MM / DD / YYYY <b>01 / 15 / 2019</b>		
Mailing Address 309 Cooper St # 3B			FEC Identification Number <b>C</b>		
City Brooklyn	State NY	Zip Code 11237-6401	Transaction ID : <b>VNV499ZNCZ</b>		
Purpose of Disbursement Salary		Candidate Name	Amount of Each Disbursement this Period <b>427.87</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State:	District:	Category/Type			

Full Name (Last, First, Middle Initial) <b>B. Fouracre, Matthew, , ,</b>			Date of Disbursement MM / DD / YYYY <b>01 / 31 / 2019</b>		
Mailing Address 309 Cooper St # 3B			FEC Identification Number <b>C</b>		
City Brooklyn	State NY	Zip Code 11237-6401	Transaction ID : <b>VNV499ZND0</b>		
Purpose of Disbursement Salary		Candidate Name	Amount of Each Disbursement this Period <b>427.87</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State:	District:	Category/Type			

Full Name (Last, First, Middle Initial) <b>C. Fouracre, Matthew, , ,</b>			Date of Disbursement MM / DD / YYYY <b>02 / 14 / 2019</b>		
Mailing Address 309 Cooper St # 3B			FEC Identification Number <b>C</b>		
City Brooklyn	State NY	Zip Code 11237-6401	Transaction ID : <b>VNV499ZND1</b>		
Purpose of Disbursement Salary		Candidate Name	Amount of Each Disbursement this Period <b>559.91</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State:	District:	Category/Type			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<b>1415.65</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2019	
Mailing Address 309 Cooper St # 3B		FEC Identification Number C [ ] <b>Transaction ID : VNV499ZND2</b> Amount of Each Disbursement this Period [ ] 427.88	
City Brooklyn	State NY	Zip Code 11237-6401	Category/ Type [ ]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2019	
Mailing Address 309 Cooper St # 3B		FEC Identification Number C [ ] <b>Transaction ID : VNV499ZND3</b> Amount of Each Disbursement this Period [ ] 291.73	
City Brooklyn	State NY	Zip Code 11237-6401	Category/ Type [ ]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2019	
Mailing Address 309 Cooper St # 3B		FEC Identification Number C [ ] <b>Transaction ID : VNV499ZND:</b> Amount of Each Disbursement this Period [ ] 213.94	
City Brooklyn	State NY	Zip Code 11237-6401	Category/ Type [ ]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 933.55
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number C <b>Transaction ID : VNV499ZND5</b> Amount of Each Disbursement this Period 213.94
City Brooklyn	State NY	
Zip Code 11237-6401		Memo Item <input type="checkbox"/>
Purpose of Disbursement Salary		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number C <b>Transaction ID : VNV499ZND6</b> Amount of Each Disbursement this Period 213.94
City Brooklyn	State NY	
Zip Code 11237-6401		Memo Item <input type="checkbox"/>
Purpose of Disbursement Salary		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number C <b>Transaction ID : VNV499ZND7</b> Amount of Each Disbursement this Period 213.94
City Brooklyn	State NY	
Zip Code 11237-6401		Memo Item <input type="checkbox"/>
Purpose of Disbursement Salary		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	641.82
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : VNV499ZND8 Amount of Each Disbursement this Period 213.94
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11237-6401	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : VNV499ZND9 Amount of Each Disbursement this Period 213.94
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11237-6401	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : VNV499ZND/ Amount of Each Disbursement this Period 213.93
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11237-6401	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	641.81
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Goldenberg, Kira, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2019
Mailing Address 345 W 145Th St		FEC Identification Number C <b>Transaction ID : VNV499ZND E</b> Amount of Each Disbursement this Period 5000.00
City New York	State NY	
Zip Code 10031-5302		Memo Item <input type="checkbox"/>
Purpose of Disbursement Consulting Work		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. IPFS Corporation</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2019
Mailing Address 30 Montgomery St		FEC Identification Number C <b>Transaction ID : VNV499ZNG 9</b> Amount of Each Disbursement this Period 174.22
City Jersey City	State NJ	
Zip Code 07302-3829		Memo Item <input type="checkbox"/>
Purpose of Disbursement Insurance		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. IPFS Corporation</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2019
Mailing Address 30 Montgomery St		FEC Identification Number C <b>Transaction ID : VNV499ZNG i</b> Amount of Each Disbursement this Period 166.52
City Jersey City	State NJ	
Zip Code 07302-3829		Memo Item <input type="checkbox"/>
Purpose of Disbursement Insurance		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

5340.74

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Leung, Rowel, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2019	
Mailing Address 2109 F St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZND</b> Amount of Each Disbursement this Period [REDACTED] 72.62	
City Washington	State DC	Zip Code 20052-0069	Category/ Type [REDACTED]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Leung, Rowel, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2019	
Mailing Address 2109 F St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZND</b> Amount of Each Disbursement this Period [REDACTED] 103.42	
City Washington	State DC	Zip Code 20052-0069	Category/ Type [REDACTED]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Leung, Rowel, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2019	
Mailing Address 2109 F St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZND</b> Amount of Each Disbursement this Period [REDACTED] 88.02	
City Washington	State DC	Zip Code 20052-0069	Category/ Type [REDACTED]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 264.06
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Leung, Rowel, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019
Mailing Address 2109 F St NW		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZND</b> Amount of Each Disbursement this Period 96.27
City Washington	State DC	
Zip Code 20052-0069	Purpose of Disbursement Salary	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Leung, Rowel, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2019
Mailing Address 2109 F St NW		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZND</b> Amount of Each Disbursement this Period 103.42
City Washington	State DC	
Zip Code 20052-0069	Purpose of Disbursement Salary	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Leung, Rowel, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2019
Mailing Address 2109 F St NW		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZND</b> Amount of Each Disbursement this Period 88.02
City Washington	State DC	
Zip Code 20052-0069	Purpose of Disbursement Salary	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	287.71
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Marcum, LLP</b>			Date of Disbursement MM / DD / YYYY 02 / 19 / 2019	
Mailing Address 1899 L St NW			FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNF3</b> Amount of Each Disbursement this Period 484.11	
City Washington	State DC	Zip Code 20036-3804	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Accounting Service		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Marcum, LLP</b>			Date of Disbursement MM / DD / YYYY 02 / 19 / 2019	
Mailing Address 1899 L St NW			FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNF4</b> Amount of Each Disbursement this Period 484.11	
City Washington	State DC	Zip Code 20036-3804	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Accounting Service		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. Marcum, LLP</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2019	
Mailing Address 1899 L St NW			FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNE1</b> Amount of Each Disbursement this Period 299.27	
City Washington	State DC	Zip Code 20036-3804	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Accounting Service		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:			

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

1267.49

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2019
Mailing Address 1899 L St NW		FEC Identification Number <b>C</b> Transaction ID : VNV499ZNEZ Amount of Each Disbursement this Period 175.45
City Washington	State DC	
Zip Code 20036-3804	Purpose of Disbursement Accounting Service	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2019
Mailing Address 1899 L St NW		FEC Identification Number <b>C</b> Transaction ID : VNV499ZNEZ Amount of Each Disbursement this Period 457.70
City Washington	State DC	
Zip Code 20036-3804	Purpose of Disbursement Accounting Service	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2019
Mailing Address 1899 L St NW		FEC Identification Number <b>C</b> Transaction ID : VNV499ZNFc Amount of Each Disbursement this Period 457.70
City Washington	State DC	
Zip Code 20036-3804	Purpose of Disbursement Accounting Service	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1090.85
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2019	
Mailing Address 1899 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNEV</b> Amount of Each Disbursement this Period [REDACTED] 246.44	
City Washington	State DC	Zip Code 20036-3804	Category/ Type [REDACTED]
Purpose of Disbursement Accounting Service		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2019	
Mailing Address 1899 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNF1</b> Amount of Each Disbursement this Period [REDACTED] 457.70	
City Washington	State DC	Zip Code 20036-3804	Category/ Type [REDACTED]
Purpose of Disbursement Accounting Service		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2019	
Mailing Address 1899 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNF2</b> Amount of Each Disbursement this Period [REDACTED] 457.70	
City Washington	State DC	Zip Code 20036-3804	Category/ Type [REDACTED]
Purpose of Disbursement Accounting Service		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

[REDACTED] 1161.84

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN, Inc.</b>			Date of Disbursement MM / DD / YYYY 03 / 01 / 2019		
Mailing Address 1101 15Th St NW Ste 500			FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNGF</b> Amount of Each Disbursement this Period [REDACTED] 611.74		
City Washington	State DC	Zip Code 20005-5006	Category/Type [REDACTED]		
Purpose of Disbursement Subscription		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) <b>B. Olive Street Design</b>			Date of Disbursement MM / DD / YYYY 03 / 01 / 2019		
Mailing Address 264 E Kenilworth Ave			FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNGE</b> Amount of Each Disbursement this Period [REDACTED] 226.08		
City Villa Park	State IL	Zip Code 60181-5502	Category/Type [REDACTED]		
Purpose of Disbursement Design Fee		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>			Date of Disbursement MM / DD / YYYY 01 / 02 / 2019		
Mailing Address 911 Panorama Trl S			FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNFc</b> Amount of Each Disbursement this Period [REDACTED] 31.52		
City Rochester	State NY	Zip Code 14625-2396	Category/Type [REDACTED]		
Purpose of Disbursement Payroll Processing Fee		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 869.34
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)

### A. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement  
Payroll 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 / 15 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : VNV499ZNFH  
Amount of Each Disbursement this Period

[REDACTED] 37.87

Memo Item

Full Name (Last, First, Middle Initial)

### B. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement  
PR Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : VNV499ZNFH  
Amount of Each Disbursement this Period

[REDACTED] 174.35

Memo Item

Full Name (Last, First, Middle Initial)

### C. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement  
PR Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : VNV499ZNFV  
Amount of Each Disbursement this Period

[REDACTED] 168.18

Memo Item

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

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

[REDACTED] 380.40

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>			Date of Disbursement MM / DD / YYYY 02 / 01 / 2019	
Mailing Address 911 Panorama Trl S				
City Rochester	State NY	Zip Code 14625-2396	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Payroll Processing Fee			Transaction ID : VNV499ZNFN	
Candidate Name			Amount of Each Disbursement this Period 18.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>			Date of Disbursement MM / DD / YYYY 02 / 14 / 2019	
Mailing Address 911 Panorama Trl S				
City Rochester	State NY	Zip Code 14625-2396	FEC Identification Number C [REDACTED]	
Purpose of Disbursement PR Tax			Transaction ID : VNV499ZNFY	
Candidate Name			Amount of Each Disbursement this Period 181.37	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>			Date of Disbursement MM / DD / YYYY 02 / 15 / 2019	
Mailing Address 911 Panorama Trl S				
City Rochester	State NY	Zip Code 14625-2396	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Payroll Processing Fee			Transaction ID : VNV499ZNFN	
Candidate Name			Amount of Each Disbursement this Period 18.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				

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

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

218.40
[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement PR Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNFV

Amount of Each Disbursement this Period: 162.37

Memo Item

**B. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNFJ!

Amount of Each Disbursement this Period: 42.38

Memo Item

**C. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNF E

Amount of Each Disbursement this Period: 18.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 223.25

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED]	
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : <b>VNV499ZNFT</b>
Purpose of Disbursement PR Tax		Category/ Type	Amount of Each Disbursement this Period [REDACTED] 123.25
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED]	
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : <b>VNV499ZNFC</b>
Purpose of Disbursement Payroll Processing Fee		Category/ Type	Amount of Each Disbursement this Period [REDACTED] 18.50
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED]	
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : <b>VNV499ZNFF</b>
Purpose of Disbursement PR Tax		Category/ Type	Amount of Each Disbursement this Period [REDACTED] 84.13
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 225.88
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNFF</b> Amount of Each Disbursement this Period [REDACTED] 20.87	
City Rochester	State NY	Zip Code 14625-2396	Category/ Type [REDACTED]
Purpose of Disbursement Payroll Processing Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNFR</b> Amount of Each Disbursement this Period [REDACTED] 84.96	
City Rochester	State NY	Zip Code 14625-2396	Category/ Type [REDACTED]
Purpose of Disbursement PR Tax		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNF6</b> Amount of Each Disbursement this Period [REDACTED] 17.60	
City Rochester	State NY	Zip Code 14625-2396	Category/ Type [REDACTED]
Purpose of Disbursement Payroll Processing Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

[REDACTED] 123.43

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNFS</b> Amount of Each Disbursement this Period [REDACTED] 85.68	
City Rochester	State NY	Zip Code 14625-2396	Category/ Type [REDACTED]
Purpose of Disbursement PR Tax		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNF7I</b> Amount of Each Disbursement this Period [REDACTED] 18.48	
City Rochester	State NY	Zip Code 14625-2396	Category/ Type [REDACTED]
Purpose of Disbursement Payroll Processing Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNFc</b> Amount of Each Disbursement this Period [REDACTED] 84.13	
City Rochester	State NY	Zip Code 14625-2396	Category/ Type [REDACTED]
Purpose of Disbursement PR Tax		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 188.29
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>			Date of Disbursement MM / DD / YYYY 05 / 31 / 2019	
Mailing Address 911 Panorama Trl S				
City Rochester		State NY	Zip Code 14625-2396	
Purpose of Disbursement Payroll Processing Fee			<input type="checkbox"/> Category/Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General	
FEC Identification Number <b>C</b>			Transaction ID : <b>VNV499ZNF8</b>	
Amount of Each Disbursement this Period			18.48	
<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>			Date of Disbursement MM / DD / YYYY 05 / 31 / 2019	
Mailing Address 911 Panorama Trl S				
City Rochester		State NY	Zip Code 14625-2396	
Purpose of Disbursement PR Tax			<input type="checkbox"/> Category/Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General	
FEC Identification Number <b>C</b>			Transaction ID : <b>VNV499ZNF8</b>	
Amount of Each Disbursement this Period			75.29	
<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>			Date of Disbursement MM / DD / YYYY 06 / 14 / 2019	
Mailing Address 911 Panorama Trl S				
City Rochester		State NY	Zip Code 14625-2396	
Purpose of Disbursement Payroll Processing Fee			<input type="checkbox"/> Category/Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General	
FEC Identification Number <b>C</b>			Transaction ID : <b>VNV499ZNF8</b>	
Amount of Each Disbursement this Period			18.48	
<input type="checkbox"/> Memo Item				

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

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

112.25

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNFN</b> Amount of Each Disbursement this Period 76.61	
City Rochester	State NY	Zip Code 14625-2396	Category/ Type
Purpose of Disbursement PR Tax		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNFA</b> Amount of Each Disbursement this Period 18.48	
City Rochester	State NY	Zip Code 14625-2396	Category/ Type
Purpose of Disbursement Payroll Processing Fee		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNFN</b> Amount of Each Disbursement this Period 76.61	
City Rochester	State NY	Zip Code 14625-2396	Category/ Type
Purpose of Disbursement PR Tax		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

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

171.70

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Preferred Insurance Services Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 04 / 2019
Mailing Address 26 Fairfax St SE Ste G		FEC Identification Number C <b>Transaction ID : VNV499ZNG#</b> Amount of Each Disbursement this Period 524.32
City Leesburg	State VA	
Zip Code 20175-3621		Memo Item <input type="checkbox"/>
Purpose of Disbursement Insurance		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sandberg, Stephanie, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2019
Mailing Address 32 Vreeland Ct		FEC Identification Number C <b>Transaction ID : VNV499ZNDY</b> Amount of Each Disbursement this Period 535.55
City Princeton	State NJ	
Zip Code 08540-6760		Memo Item <input type="checkbox"/>
Purpose of Disbursement Reimbursement		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sandberg, Stephany, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 32 Vreeland Ct		FEC Identification Number C <b>Transaction ID : VNV499ZND.</b> Amount of Each Disbursement this Period 1100.25
City Princeton	State NJ	
Zip Code 08540-6760		Memo Item <input type="checkbox"/>
Purpose of Disbursement Salary		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2160.12
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Sandberg, Stephany, , ,</b>			Date of Disbursement MM / DD / YYYY 01 / 31 / 2019	
Mailing Address 32 Vreeland Ct				
City Princeton	State NJ	Zip Code 08540-6760		
Purpose of Disbursement Salary			<input type="checkbox"/>	
Candidate Name			Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

FEC Identification Number  
**C**  
**Transaction ID : VNV499ZNDH**  
Amount of Each Disbursement this Period  
1100.25

Full Name (Last, First, Middle Initial) <b>B. Sandberg, Stephany, , ,</b>			Date of Disbursement MM / DD / YYYY 02 / 14 / 2019	
Mailing Address 32 Vreeland Ct				
City Princeton	State NJ	Zip Code 08540-6760		
Purpose of Disbursement Salary			<input type="checkbox"/>	
Candidate Name			Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

FEC Identification Number  
**C**  
**Transaction ID : VNV499ZNDH**  
Amount of Each Disbursement this Period  
1100.25

Full Name (Last, First, Middle Initial) <b>C. Sandberg, Stephany, , ,</b>			Date of Disbursement MM / DD / YYYY 02 / 28 / 2019	
Mailing Address 32 Vreeland Ct				
City Princeton	State NJ	Zip Code 08540-6760		
Purpose of Disbursement Salary			<input type="checkbox"/>	
Candidate Name			Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

FEC Identification Number  
**C**  
**Transaction ID : VNV499ZNDH**  
Amount of Each Disbursement this Period  
1100.25

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

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

3300.75

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Sandberg, Stephany, , ,</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2019	
Mailing Address 32 Vreeland Ct				
City Princeton	State NJ	Zip Code 08540-6760	FEC Identification Number C [ ] <b>Transaction ID : VNV499ZNDP</b>	
Purpose of Disbursement Salary		Candidate Name	Amount of Each Disbursement this Period [ ] 890.19	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [ ]	District: [ ]		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Sandberg, Stephany, , ,</b>			Date of Disbursement MM / DD / YYYY 03 / 29 / 2019	
Mailing Address 32 Vreeland Ct				
City Princeton	State NJ	Zip Code 08540-6760	FEC Identification Number C [ ] <b>Transaction ID : VNV499ZNDQ</b>	
Purpose of Disbursement Salary		Candidate Name	Amount of Each Disbursement this Period [ ] 770.18	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [ ]	District: [ ]		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Sandberg, Stephany, , ,</b>			Date of Disbursement MM / DD / YYYY 04 / 15 / 2019	
Mailing Address 32 Vreeland Ct				
City Princeton	State NJ	Zip Code 08540-6760	FEC Identification Number C [ ] <b>Transaction ID : VNV499ZNDI</b>	
Purpose of Disbursement Salary		Candidate Name	Amount of Each Disbursement this Period [ ] 770.18	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [ ]	District: [ ]		<input type="checkbox"/> Memo Item	

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

2430.55

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Sandberg, Stephany, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2019	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZND5</b> Amount of Each Disbursement this Period [REDACTED] 770.18	
City Princeton	State NJ	Zip Code 08540-6760	Category/Type [REDACTED]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Sandberg, Stephany, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2019	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNDT</b> Amount of Each Disbursement this Period [REDACTED] 770.18	
City Princeton	State NJ	Zip Code 08540-6760	Category/Type [REDACTED]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Sandberg, Stephany, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2019	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZND1</b> Amount of Each Disbursement this Period [REDACTED] 770.18	
City Princeton	State NJ	Zip Code 08540-6760	Category/Type [REDACTED]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2310.54
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Sandberg, Stephany, , ,</b>			Date of Disbursement MM / DD / YYYY 06 / 15 / 2019	
Mailing Address 32 Vreeland Ct			FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNDV</b> Amount of Each Disbursement this Period [REDACTED] 770.18	
City Princeton	State NJ	Zip Code 08540-6760	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Salary		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:			Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) <b>B. Sandberg, Stephany, , ,</b>			Date of Disbursement MM / DD / YYYY 06 / 30 / 2019	
Mailing Address 32 Vreeland Ct			FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNDX</b> Amount of Each Disbursement this Period [REDACTED] 770.18	
City Princeton	State NJ	Zip Code 08540-6760	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Salary		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:			Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) <b>C. SQAURE</b>			Date of Disbursement MM / DD / YYYY 01 / 22 / 2019	
Mailing Address 1455 Market St			FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNGI</b> Amount of Each Disbursement this Period [REDACTED] 10.90	
City San Francisco	State CA	Zip Code 94103-1331	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Travel		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:			Memo Item <input type="checkbox"/>	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1551.26
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. SQAURE</b>		Date of Disbursement MM / DD / YYYY 01 / 23 / 2019
Mailing Address 1455 Market St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNGJ</b> Amount of Each Disbursement this Period 20.90
City San Francisco	State CA	Zip Code 94103-1331
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. SQAURE</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2019
Mailing Address 1455 Market St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNGV</b> Amount of Each Disbursement this Period 1442.61
City San Francisco	State CA	Zip Code 94103-1331
Purpose of Disbursement Fundraising		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. SQAURE</b>		Date of Disbursement MM / DD / YYYY 05 / 22 / 2019
Mailing Address 1455 Market St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNGI</b> Amount of Each Disbursement this Period 11.44
City San Francisco	State CA	Zip Code 94103-1331
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1474.95
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2019
Mailing Address PO Box 5373		FEC Identification Number C <b>Transaction ID : VNV499ZNEC</b> Amount of Each Disbursement this Period 8250.00
City Virginia Beach	State VA	
Zip Code 23471-0373		Memo Item <input type="checkbox"/>
Purpose of Disbursement Consulting Work	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement MM / DD / YYYY 01 / 28 / 2019
Mailing Address 77 W Wacker Dr		FEC Identification Number C <b>Transaction ID : VNV499ZNGP</b> Amount of Each Disbursement this Period 461.60
City Chicago	State IL	
Zip Code 60601-1604		Memo Item <input type="checkbox"/>
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2019
Mailing Address 77 W Wacker Dr		FEC Identification Number C <b>Transaction ID : VNV499ZNGI</b> Amount of Each Disbursement this Period 200.00
City Chicago	State IL	
Zip Code 60601-1604		Memo Item <input type="checkbox"/>
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8911.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2019	
Mailing Address 77 W Wacker Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNGS</b> Amount of Each Disbursement this Period 1088.75	
City Chicago	State IL	Zip Code 60601-1604	Category/ Type
Purpose of Disbursement Travel		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2019	
Mailing Address 77 W Wacker Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNGR</b> Amount of Each Disbursement this Period 600.60	
City Chicago	State IL	Zip Code 60601-1604	Category/ Type
Purpose of Disbursement Travel		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. United Airlines</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2019	
Mailing Address 77 W Wacker Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNGI</b> Amount of Each Disbursement this Period 546.60	
City Chicago	State IL	Zip Code 60601-1604	Category/ Type
Purpose of Disbursement Travel		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

2235.95

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Witeck Communications, Inc.</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2019	
Mailing Address 2120 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNFZ</b> Amount of Each Disbursement this Period 95.36	
City Washington	State DC	Zip Code 20037-1527	Category/ Type
Purpose of Disbursement Rent		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Witeck Communications, Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019	
Mailing Address 2120 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNG0</b> Amount of Each Disbursement this Period 95.36	
City Washington	State DC	Zip Code 20037-1527	Category/ Type
Purpose of Disbursement Rent		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Witeck Communications, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2019	
Mailing Address 2120 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNG</b> Amount of Each Disbursement this Period 95.36	
City Washington	State DC	Zip Code 20037-1527	Category/ Type
Purpose of Disbursement Rent		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	286.08
<b>TOTAL</b> This Period (last page this line number only).....▶	48029.78

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. SHARICE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 13851 W 63Rd St  
NUM 303

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2019

City Shawnee State KS Zip Code 66216-3800

FEC Identification Number

Purpose of Disbursement  
Campaign contribution

011
Category/ Type

**C** C00670034

**Transaction ID : VNV499ZJM7**

Amount of Each Disbursement this Period

Candidate Name  
**DAVIDS, SHARICE, , ,**

2500.00
---------

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: KS District: 03

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

Category/ Type

**C**

Amount of Each Disbursement this Period

Candidate Name

--

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

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

Category/ Type

**C**

Amount of Each Disbursement this Period

Candidate Name

--

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

Memo Item

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

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

2500.00
---------

2500.00
---------

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Adams 4 Delegate**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 25331

City Richmond State VA Zip Code 23260-5331

Purpose of Disbursement Campaign contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2019  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 06 / 2019

FEC Identification Number: C [REDACTED]

Transaction ID : VNV499ZHCH

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. AIRBNB**

Full Name (Last, First, Middle Initial)

Mailing Address 888 Brannan St

City San Francisco State CA Zip Code 94103-4928

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 20 / 2019

FEC Identification Number: C [REDACTED]

Transaction ID : VNV499ZN2E

Amount of Each Disbursement this Period: 376.75

Memo Item

**C. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW

City Washington State DC Zip Code 20006-1202

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 19 / 2019

FEC Identification Number: C [REDACTED]

Transaction ID : VNV499ZN2F

Amount of Each Disbursement this Period: 120.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1496.75

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Amalgamated Bank</b>		Date of Disbursement MM / DD / YYYY 03 / 19 / 2019	
Mailing Address 1825 K St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN2R</b> Amount of Each Disbursement this Period [REDACTED] 155.25	
City Washington	State DC	Zip Code 20006-1202	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Amalgamated Bank</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2019	
Mailing Address 1825 K St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN2Q</b> Amount of Each Disbursement this Period [REDACTED] 124.67	
City Washington	State DC	Zip Code 20006-1202	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. Amalgamated Bank</b>		Date of Disbursement MM / DD / YYYY 04 / 19 / 2019	
Mailing Address 1825 K St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN2H</b> Amount of Each Disbursement this Period [REDACTED] 15.25	
City Washington	State DC	Zip Code 20006-1202	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 295.17
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Amalgamated Bank</b>		Date of Disbursement MM / DD / YYYY 04 / 19 / 2019	
Mailing Address 1825 K St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN2N</b> Amount of Each Disbursement this Period [REDACTED] 110.25	
City Washington	State DC	Zip Code 20006-1202	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Amalgamated Bank</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2019	
Mailing Address 1825 K St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN2S</b> Amount of Each Disbursement this Period [REDACTED] 1038.77	
City Washington	State DC	Zip Code 20006-1202	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. Amalgamated Bank</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2019	
Mailing Address 1825 K St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN2F</b> Amount of Each Disbursement this Period [REDACTED] 0.25	
City Washington	State DC	Zip Code 20006-1202	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1149.27
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW

City Washington State DC Zip Code 20006-1202

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 21 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN2G

Amount of Each Disbursement this Period: 0.25

Memo Item

**B. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW

City Washington State DC Zip Code 20006-1202

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN2H

Amount of Each Disbursement this Period: 15.00

Memo Item

**C. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW

City Washington State DC Zip Code 20006-1202

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN2J

Amount of Each Disbursement this Period: 15.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 30.25

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW

City Washington State DC Zip Code 20006-1202

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 21 / 2019

FEC Identification Number: **C**

Transaction ID : **VNV499ZN2M**

Amount of Each Disbursement this Period: 55.25

Memo Item

**B. American Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 4255 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2603

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 13 / 2019

FEC Identification Number: **C**

Transaction ID : **VNV499ZN2V**

Amount of Each Disbursement this Period: 247.60

Memo Item

**C. American Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 4255 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2603

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2019

FEC Identification Number: **C**

Transaction ID : **VNV499ZN2I**

Amount of Each Disbursement this Period: 25.20

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 328.05

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019
Mailing Address 4255 Amon Carter Blvd		FEC Identification Number <b>C</b> Transaction ID : VNV499ZN2W Amount of Each Disbursement this Period 565.61
City Ft Worth	State TX	
Zip Code 76155-2603	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019
Mailing Address 201 I St NE		FEC Identification Number <b>C</b> Transaction ID : VNV499ZN2X Amount of Each Disbursement this Period 12.75
City Washington	State DC	
Zip Code 20002-4449	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019
Mailing Address 201 I St NE		FEC Identification Number <b>C</b> Transaction ID : VNV499ZN2Y Amount of Each Disbursement this Period 17.00
City Washington	State DC	
Zip Code 20002-4449	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

595.36

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019	
Mailing Address 201 I St NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN3E</b> Amount of Each Disbursement this Period [REDACTED] 293.00	
City Washington	State DC	Zip Code 20002-4449	Category/ Type [REDACTED]
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2019	
Mailing Address 201 I St NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN34I</b> Amount of Each Disbursement this Period [REDACTED] 82.00	
City Washington	State DC	Zip Code 20002-4449	Category/ Type [REDACTED]
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2019	
Mailing Address 201 I St NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN38</b> Amount of Each Disbursement this Period [REDACTED] 160.00	
City Washington	State DC	Zip Code 20002-4449	Category/ Type [REDACTED]
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 535.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2019
Mailing Address 201 I St NE		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499ZN3A</b> Amount of Each Disbursement this Period 188.00
City Washington	State DC	
Zip Code 20002-4449	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2019
Mailing Address 201 I St NE		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499ZN35I</b> Amount of Each Disbursement this Period 106.00
City Washington	State DC	
Zip Code 20002-4449	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2019
Mailing Address 201 I St NE		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499ZN31</b> Amount of Each Disbursement this Period 57.00
City Washington	State DC	
Zip Code 20002-4449	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

351.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 28 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN3G

Amount of Each Disbursement this Period: 316.00

Memo Item

**B. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN39I

Amount of Each Disbursement this Period: 164.00

Memo Item

**C. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 26 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN33

Amount of Each Disbursement this Period: 77.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 557.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN3F

Amount of Each Disbursement this Period: 298.00

Memo Item

**B. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN32:

Amount of Each Disbursement this Period: 63.00

Memo Item

**C. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 22 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN3E

Amount of Each Disbursement this Period: 188.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 549.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement MM / DD / YYYY 05 / 23 / 2019
Mailing Address 201 I St NE		FEC Identification Number C <b>Transaction ID : VNV499ZN30</b> Amount of Each Disbursement this Period 54.00
City Washington	State DC	
Zip Code 20002-4449	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement MM / DD / YYYY 05 / 23 / 2019
Mailing Address 201 I St NE		FEC Identification Number C <b>Transaction ID : VNV499ZN36</b> Amount of Each Disbursement this Period 106.00
City Washington	State DC	
Zip Code 20002-4449	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2019
Mailing Address 201 I St NE		FEC Identification Number C <b>Transaction ID : VNV499ZN3E</b> Amount of Each Disbursement this Period 135.58
City Washington	State DC	
Zip Code 20002-4449	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

295.58

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2019
Mailing Address 201 I St NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN3C</b> Amount of Each Disbursement this Period 188.00
City Washington	State DC	
Zip Code 20002-4449	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2019
Mailing Address 201 I St NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN37</b> Amount of Each Disbursement this Period 125.00
City Washington	State DC	
Zip Code 20002-4449	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2019
Mailing Address 201 I St NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN22</b> Amount of Each Disbursement this Period 48.00
City Washington	State DC	
Zip Code 20002-4449	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	361.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)

### A. Authorize.Net

Mailing Address PO Box 8999

City  
San Francisco

State  
CA

Zip Code  
94128-8999

Purpose of Disbursement  
Contribution Processing 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	1		0	3		2	0	1	9

FEC Identification Number

**C**

**Transaction ID : VNV499ZN3H**

Amount of Each Disbursement this Period

40.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Authorize.Net

Mailing Address PO Box 8999

City  
San Francisco

State  
CA

Zip Code  
94128-8999

Purpose of Disbursement  
Contribution Processing 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	2		0	4		2	0	1	9

FEC Identification Number

**C**

**Transaction ID : VNV499ZN3J**

Amount of Each Disbursement this Period

40.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Authorize.Net

Mailing Address PO Box 8999

City  
San Francisco

State  
CA

Zip Code  
94128-8999

Purpose of Disbursement  
Contribution Processing 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	3		0	4		2	0	1	9

FEC Identification Number

**C**

**Transaction ID : VNV499ZN3I**

Amount of Each Disbursement this Period

40.00

Memo Item

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

120.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Authorize.Net</b>		Date of Disbursement MM / DD / YYYY 04 / 02 / 2019
Mailing Address PO Box 8999		FEC Identification Number C [ ] <b>Transaction ID : VNV499ZN3M</b> Amount of Each Disbursement this Period [ ] 40.00
City San Francisco	State CA	Zip Code 94128-8999
Purpose of Disbursement Contribution Processing Fee		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Authorize.Net</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2019
Mailing Address PO Box 8999		FEC Identification Number C [ ] <b>Transaction ID : VNV499ZN3N</b> Amount of Each Disbursement this Period [ ] 40.00
City San Francisco	State CA	Zip Code 94128-8999
Purpose of Disbursement Contribution Processing Fee		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Authorize.Net</b>		Date of Disbursement MM / DD / YYYY 06 / 04 / 2019
Mailing Address PO Box 8999		FEC Identification Number C [ ] <b>Transaction ID : VNV499ZN3F</b> Amount of Each Disbursement this Period [ ] 40.00
City San Francisco	State CA	Zip Code 94128-8999
Purpose of Disbursement Contribution Processing Fee		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

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

[ ] 120.00
[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)  
**A. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN45

Amount of Each Disbursement this Period: 35.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN41!

Amount of Each Disbursement this Period: 30.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 14 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN46

Amount of Each Disbursement this Period: 35.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 100.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)  
**A. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 16 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN3Q

Amount of Each Disbursement this Period: 15.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 30 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN3R

Amount of Each Disbursement this Period: 15.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN3S

Amount of Each Disbursement this Period: 15.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 45.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Bank Of America</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2019	
Mailing Address 700 13Th St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN3T</b> Amount of Each Disbursement this Period 15.00	
City Washington	State DC	Zip Code 20005-3950	Category/ Type
Purpose of Disbursement Bank Fee			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Bank Of America</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2019	
Mailing Address 700 13Th St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN47:</b> Amount of Each Disbursement this Period 35.00	
City Washington	State DC	Zip Code 20005-3950	Category/ Type
Purpose of Disbursement Bank Fee			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Bank Of America</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2019	
Mailing Address 700 13Th St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN3V</b> Amount of Each Disbursement this Period 15.00	
City Washington	State DC	Zip Code 20005-3950	Category/ Type
Purpose of Disbursement Bank Fee			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	65.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)  
**A. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 28 / 2019

FEC Identification Number: C  
Transaction ID : VNV499ZN42  
Amount of Each Disbursement this Period: 30.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 01 / 2019

FEC Identification Number: C  
Transaction ID : VNV499ZN3W  
Amount of Each Disbursement this Period: 15.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 19 / 2019

FEC Identification Number: C  
Transaction ID : VNV499ZN43  
Amount of Each Disbursement this Period: 30.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 75.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN48

Amount of Each Disbursement this Period: 35.00

Memo Item

**B. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN49!

Amount of Each Disbursement this Period: 35.00

Memo Item

**C. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4#

Amount of Each Disbursement this Period: 35.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 105.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN3X

Amount of Each Disbursement this Period: 15.00

Memo Item

**B. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4B

Amount of Each Disbursement this Period: 35.00

Memo Item

**C. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4C

Amount of Each Disbursement this Period: 35.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 85.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)  
**A. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN3Z

Amount of Each Disbursement this Period: 17.27

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4D

Amount of Each Disbursement this Period: 35.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4H

Amount of Each Disbursement this Period: 60.24

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 112.51

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Bank Of America</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2019
Mailing Address 700 13Th St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN44</b> Amount of Each Disbursement this Period [REDACTED] 30.00
City Washington	State DC	Zip Code 20005-3950
Purpose of Disbursement Bank Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Bank Of America</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2019
Mailing Address 700 13Th St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN40I</b> Amount of Each Disbursement this Period [REDACTED] 28.30
City Washington	State DC	Zip Code 20005-3950
Purpose of Disbursement Bank Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Bank Of America</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2019
Mailing Address 700 13Th St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN4E</b> Amount of Each Disbursement this Period [REDACTED] 35.00
City Washington	State DC	Zip Code 20005-3950
Purpose of Disbursement Bank Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

93.30

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4F

Amount of Each Disbursement this Period: 35.00

Memo Item

**B. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4G

Amount of Each Disbursement this Period: 35.00

Memo Item

**C. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4H

Amount of Each Disbursement this Period: 35.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 105.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4J

Amount of Each Disbursement this Period: 35.00

Memo Item

**B. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4K

Amount of Each Disbursement this Period: 35.00

Memo Item

**C. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 12 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN3Y

Amount of Each Disbursement this Period: 15.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 85.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. BTC Revolutions</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019
Mailing Address 1500 Massachusetts Ave NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN4P</b> Amount of Each Disbursement this Period 6400.00
City Washington	State DC	Zip Code 20005-1821
Purpose of Disbursement Consulting Work		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Care Creative</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019
Mailing Address 172 Pacific Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN4X</b> Amount of Each Disbursement this Period 2250.00
City Toronto ON Canada	State ZZ	Zip Code 00000
Purpose of Disbursement Design Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Care Creative</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2019
Mailing Address 172 Pacific Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN4V</b> Amount of Each Disbursement this Period 2233.00
City Toronto ON Canada	State ZZ	Zip Code 00000
Purpose of Disbursement Event Invitations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

10883.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Care Creative**

Full Name (Last, First, Middle Initial)

Mailing Address 172 Pacific Avenue

City Toronto ON Canada State ZZ Zip Code 00000

Purpose of Disbursement January Design

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4T

Amount of Each Disbursement this Period: 1324.95

Memo Item

**B. Care Creative**

Full Name (Last, First, Middle Initial)

Mailing Address 172 Pacific Avenue

City Toronto ON Canada State ZZ Zip Code 00000

Purpose of Disbursement February Design

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4S

Amount of Each Disbursement this Period: 1253.25

Memo Item

**C. Care Creative**

Full Name (Last, First, Middle Initial)

Mailing Address 172 Pacific Avenue

City Toronto ON Canada State ZZ Zip Code 00000

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 28 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4V

Amount of Each Disbursement this Period: 1776.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4354.70

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Care Creative**

Full Name (Last, First, Middle Initial)

Mailing Address 172 Pacific Avenue

City Toronto ON Canada State ZZ Zip Code 00000

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
05 / 09 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4Q

Amount of Each Disbursement this Period: 385.00

Memo Item

**B. Care Creative**

Full Name (Last, First, Middle Initial)

Mailing Address 172 Pacific Avenue

City Toronto ON Canada State ZZ Zip Code 00000

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
05 / 14 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN4R

Amount of Each Disbursement this Period: 937.75

Memo Item

**C. City Of Fountains Committee**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 32288

City Kansas City State MO Zip Code 64171-5288

Purpose of Disbursement Missouri Committee Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2019  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
06 / 14 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZKF5

Amount of Each Disbursement this Period: 2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3822.75

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN52

Amount of Each Disbursement this Period: 229.24

Memo Item

**B. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN53

Amount of Each Disbursement this Period: 229.24

Memo Item

**C. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN51

Amount of Each Disbursement this Period: 229.11

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 687.59

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 03 / 2019

FEC Identification Number: C [ ]  
**Transaction ID : VNV499ZN4Y**  
Amount of Each Disbursement this Period: [ ] 219.24

Memo Item

**B. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 01 / 2019

FEC Identification Number: C [ ]  
**Transaction ID : VNV499ZN4Z**  
Amount of Each Disbursement this Period: [ ] 221.80

Memo Item

**C. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 03 / 2019

FEC Identification Number: C [ ]  
**Transaction ID : VNV499ZN50**  
Amount of Each Disbursement this Period: [ ] 221.80

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ [ ] 662.84

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)  
**A. Crystal Press, Inc.**

Mailing Address 1775 K St NW

City Washington State DC Zip Code 20006-1502

Purpose of Disbursement Fundraising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 08 / 2019

FEC Identification Number: C  
Transaction ID : VNV499ZN56  
Amount of Each Disbursement this Period: 503.50

Memo Item

Full Name (Last, First, Middle Initial)  
**B. DC Government**

Mailing Address 1207 Taylor St NW

City Washington State DC Zip Code 20011-5617

Purpose of Disbursement DC GOVT HEALTH

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 04 / 2019

FEC Identification Number: C  
Transaction ID : VNV499ZN57I  
Amount of Each Disbursement this Period: 46.08

Memo Item

Full Name (Last, First, Middle Initial)  
**C. DC Government**

Mailing Address 1207 Taylor St NW

City Washington State DC Zip Code 20011-5617

Purpose of Disbursement ESSP/ESSP Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 30 / 2019

FEC Identification Number: C  
Transaction ID : VNV499ZN58  
Amount of Each Disbursement this Period: 310.75

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 860.33

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. DC Health Link</b>		Date of Disbursement MM / DD / YYYY 03 / 19 / 2019
Mailing Address PO Box 97022		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN5C</b> Amount of Each Disbursement this Period 7337.02
City Washington	State DC	Zip Code 20090-7022
Purpose of Disbursement Insurance		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. DC Health Link</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2019
Mailing Address PO Box 97022		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN59'</b> Amount of Each Disbursement this Period 2887.89
City Washington	State DC	Zip Code 20090-7022
Purpose of Disbursement Insurance		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. DC Health Link</b>		Date of Disbursement MM / DD / YYYY 05 / 22 / 2019
Mailing Address PO Box 97022		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN5/</b> Amount of Each Disbursement this Period 2887.89
City Washington	State DC	Zip Code 20090-7022
Purpose of Disbursement Insurance		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

13112.80

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. DC Health Link**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 24 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN5B

Amount of Each Disbursement this Period: 2887.89

Memo Item

**B. Dowling, Lauren, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1537 Terra Nova Blvd

City Pacifica State CA Zip Code 94044-3618

Purpose of Disbursement Consulting Work

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 16 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN0H

Amount of Each Disbursement this Period: 3000.00

Memo Item

**C. Dowling, Lauren, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1537 Terra Nova Blvd

City Pacifica State CA Zip Code 94044-3618

Purpose of Disbursement Consulting Work

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 18 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN0J

Amount of Each Disbursement this Period: 3500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9387.89

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**L PAC**

**A. EveryAction**

Full Name (Last, First, Middle Initial)

Mailing Address 1101 15Th St NW

City Washington State DC Zip Code 20005-5002

Purpose of Disbursement Subscription

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 09 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN5J

Amount of Each Disbursement this Period: 1275.00

Memo Item

**B. Facebook**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 20 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN5M

Amount of Each Disbursement this Period: 750.00

Memo Item

**C. Facebook**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 21 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN5N

Amount of Each Disbursement this Period: 750.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2775.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)  
**A. Facebook**

Date of Disbursement  
MM / DD / YYYY  
03 / 25 / 2019

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : VNV499ZN5P  
Amount of Each Disbursement this Period  
900.00

Memo Item

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

Date of Disbursement  
MM / DD / YYYY  
03 / 25 / 2019

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : VNV499ZN5Q  
Amount of Each Disbursement this Period  
900.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Facebook**

Date of Disbursement  
MM / DD / YYYY  
03 / 27 / 2019

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : VNV499ZN5F  
Amount of Each Disbursement this Period  
900.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2700.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Facebook**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 29 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN5S

Amount of Each Disbursement this Period: 900.00

Memo Item

**B. Facebook**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN5T

Amount of Each Disbursement this Period: 900.00

Memo Item

**C. Facebook**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN5V

Amount of Each Disbursement this Period: 900.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2700.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)  
**A. Facebook**

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 09 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN5K

Amount of Each Disbursement this Period: 600.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Fedex Office**

Mailing Address 902 Ross Ave

City Dallas State TX Zip Code 75202-1918

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 28 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN5X

Amount of Each Disbursement this Period: 66.24

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Fedex Office**

Mailing Address 902 Ross Ave

City Dallas State TX Zip Code 75202-1918

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 28 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN5Z

Amount of Each Disbursement this Period: 97.22

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 763.46

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2019
Mailing Address 902 Ross Ave		FEC Identification Number C <b>Transaction ID : VNV499ZN5Y</b> Amount of Each Disbursement this Period 71.61
City Dallas	State TX	
Zip Code 75202-1918	Purpose of Disbursement Shipping	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2019
Mailing Address 902 Ross Ave		FEC Identification Number C <b>Transaction ID : VNV499ZN60:</b> Amount of Each Disbursement this Period 313.22
City Dallas	State TX	
Zip Code 75202-1918	Purpose of Disbursement Shipping	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2019
Mailing Address 902 Ross Ave		FEC Identification Number C <b>Transaction ID : VNV499ZN5V</b> Amount of Each Disbursement this Period 22.07
City Dallas	State TX	
Zip Code 75202-1918	Purpose of Disbursement Shipping	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	406.90
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Forum One**

Full Name (Last, First, Middle Initial)

Mailing Address 2200 Mount Vernon Ave

City Alexandria State VA Zip Code 22301-1314

Purpose of Disbursement Digital Work

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN61

Amount of Each Disbursement this Period: 2037.50

Memo Item

**B. Fouracre, Mattew, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 309 Cooper St # 3B

City Brooklyn State NY Zip Code 11237-6401

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN0W

Amount of Each Disbursement this Period: 871.03

Memo Item

**C. Fouracre, Mattew, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 309 Cooper St # 3B

City Brooklyn State NY Zip Code 11237-6401

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN0

Amount of Each Disbursement this Period: 895.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3803.53

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN16</b> Amount of Each Disbursement this Period 2488.79
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11237-6401	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN17</b> Amount of Each Disbursement this Period 2488.79
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11237-6401	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN19</b> Amount of Each Disbursement this Period 3256.77
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11237-6401	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8234.35
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN18</b> Amount of Each Disbursement this Period 2488.80
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11237-6401	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN15'</b> Amount of Each Disbursement this Period 1696.90
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11237-6401	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN02</b> Amount of Each Disbursement this Period 1244.39
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11237-6401	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5430.09
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019	
Mailing Address 309 Cooper St # 3B		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN0K</b> Amount of Each Disbursement this Period [REDACTED] 18.50	
City Brooklyn	State NY	Zip Code 11237-6401	Category/ Type [REDACTED]
Purpose of Disbursement Reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019	
Mailing Address 309 Cooper St # 3B		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN0K</b> Amount of Each Disbursement this Period [REDACTED] 19.52	
City Brooklyn	State NY	Zip Code 11237-6401	Category/ Type [REDACTED]
Purpose of Disbursement Reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019	
Mailing Address 309 Cooper St # 3B		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN0K</b> Amount of Each Disbursement this Period [REDACTED] 76.20	
City Brooklyn	State NY	Zip Code 11237-6401	Category/ Type [REDACTED]
Purpose of Disbursement Reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

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

[REDACTED] 114.22
[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019	
Mailing Address 309 Cooper St # 3B		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN0P</b>	
City Brooklyn	State NY	Zip Code 11237-6401	Amount of Each Disbursement this Period [REDACTED] 136.07
Purpose of Disbursement Reimbursement		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019	
Mailing Address 309 Cooper St # 3B		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN0Q</b>	
City Brooklyn	State NY	Zip Code 11237-6401	Amount of Each Disbursement this Period [REDACTED] 148.86
Purpose of Disbursement Reimbursement		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019	
Mailing Address 309 Cooper St # 3B		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN0F</b>	
City Brooklyn	State NY	Zip Code 11237-6401	Amount of Each Disbursement this Period [REDACTED] 318.00
Purpose of Disbursement Reimbursement		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 602.93
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Fouracre, Mattew, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 309 Cooper St  
# 3B

City Brooklyn State NY Zip Code 11237-6401

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN0S

Amount of Each Disbursement this Period: 423.60

Memo Item

**B. Fouracre, Mattew, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 309 Cooper St  
# 3B

City Brooklyn State NY Zip Code 11237-6401

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN0T

Amount of Each Disbursement this Period: 565.61

Memo Item

**C. Fouracre, Mattew, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 309 Cooper St  
# 3B

City Brooklyn State NY Zip Code 11237-6401

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN10

Amount of Each Disbursement this Period: 1244.39

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2233.60

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN0V</b> Amount of Each Disbursement this Period 818.01
City Brooklyn	State NY	
Zip Code 11237-6401		Memo Item <input type="checkbox"/>
Purpose of Disbursement Reimbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN11</b> Amount of Each Disbursement this Period 1244.39
City Brooklyn	State NY	
Zip Code 11237-6401		Memo Item <input type="checkbox"/>
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN12</b> Amount of Each Disbursement this Period 1244.39
City Brooklyn	State NY	
Zip Code 11237-6401		Memo Item <input type="checkbox"/>
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

3306.79

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN13</b> Amount of Each Disbursement this Period 1244.39
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11237-6401	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN14</b> Amount of Each Disbursement this Period 1244.39
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11237-6401	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fouracre, Mattew, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2019
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN01</b> Amount of Each Disbursement this Period 1244.37
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11237-6401	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3733.15
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Friends Of Danica Roem**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 726

City Manassas State VA Zip Code 20113-0726

Purpose of Disbursement Campaign contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2019  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 16 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZHBE

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Goldenberg, Kira, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 345 W 145Th St

City New York State NY Zip Code 10031-5302

Purpose of Disbursement Consulting Work

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 11 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN1J:

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Goldenberg, Kira, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 345 W 145Th St

City New York State NY Zip Code 10031-5302

Purpose of Disbursement Consulting Work

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN1E

Amount of Each Disbursement this Period: 3000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Goldenberg, Kira, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 345 W 145Th St

City New York State NY Zip Code 10031-5302

Purpose of Disbursement Consulting Work

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 17 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN1A

Amount of Each Disbursement this Period: 19.00

Memo Item

**B. Goldenberg, Kira, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 345 W 145Th St

City New York State NY Zip Code 10031-5302

Purpose of Disbursement Consulting Work

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 17 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN1B

Amount of Each Disbursement this Period: 167.00

Memo Item

**C. Goldenberg, Kira, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 345 W 145Th St

City New York State NY Zip Code 10031-5302

Purpose of Disbursement Consulting Work

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 17 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN1C

Amount of Each Disbursement this Period: 184.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 370.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Goldenberg, Kira, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 345 W 145Th St

City New York State NY Zip Code 10031-5302

Purpose of Disbursement Consulting Work

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 17 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN1D

Amount of Each Disbursement this Period: 268.85

Memo Item

**B. Goldenberg, Kira, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 345 W 145Th St

City New York State NY Zip Code 10031-5302

Purpose of Disbursement Consulting Work

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 17 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN1F

Amount of Each Disbursement this Period: 3000.00

Memo Item

**C. Goldenberg, Kira, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 345 W 145Th St

City New York State NY Zip Code 10031-5302

Purpose of Disbursement Consulting Work

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 09 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN1C

Amount of Each Disbursement this Period: 3000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6268.85

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Goldenberg, Kira, , ,</b>		Date of Disbursement MM / DD / YYYY <b>06 / 11 / 2019</b>
Mailing Address <b>345 W 145Th St</b>		FEC Identification Number <b>C</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10031-5302</b>
Purpose of Disbursement <b>Consulting Work</b>		Transaction ID : <b>VNV499ZN1H</b>
Candidate Name		Amount of Each Disbursement this Period <b>3000.00</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Google Services</b>		Date of Disbursement MM / DD / YYYY <b>01 / 02 / 2019</b>
Mailing Address <b>1600 Amphitheatre Pkwy</b>		FEC Identification Number <b>C</b>
City <b>Mountain View</b>	State <b>CA</b>	Zip Code <b>94043-1351</b>
Purpose of Disbursement <b>Subscription</b>		Transaction ID : <b>VNV499ZN69</b>
Candidate Name		Amount of Each Disbursement this Period <b>42.00</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Google Services</b>		Date of Disbursement MM / DD / YYYY <b>01 / 08 / 2019</b>
Mailing Address <b>1600 Amphitheatre Pkwy</b>		FEC Identification Number <b>C</b>
City <b>Mountain View</b>	State <b>CA</b>	Zip Code <b>94043-1351</b>
Purpose of Disbursement <b>Subscription</b>		Transaction ID : <b>VNV499ZN63</b>
Candidate Name		Amount of Each Disbursement this Period <b>15.00</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<b>3057.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Google Services</b>		Date of Disbursement MM / DD / YYYY 02 / 04 / 2019
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN6A</b> Amount of Each Disbursement this Period [REDACTED] 43.18
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Subscription		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Google Services</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2019
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN64!</b> Amount of Each Disbursement this Period [REDACTED] 15.00
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Subscription		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Google Services</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2019
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN6E</b> Amount of Each Disbursement this Period [REDACTED] 47.70
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Subscription		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	
<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 105.88
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Google Services**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Subscription

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 07 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN65

Amount of Each Disbursement this Period: 15.00

Memo Item

**B. Google Services**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Subscription

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN6C

Amount of Each Disbursement this Period: 52.13

Memo Item

**C. Google Services**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Subscription

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 05 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN66

Amount of Each Disbursement this Period: 15.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 82.13

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Google Services</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2019	
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN6D</b> Amount of Each Disbursement this Period [REDACTED] 63.24	
City Mountain View State CA Zip Code 94043-1351	Purpose of Disbursement Subscription	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) <b>B. Google Services</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2019	
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN67I</b> Amount of Each Disbursement this Period [REDACTED] 15.00	
City Mountain View State CA Zip Code 94043-1351	Purpose of Disbursement Subscription	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) <b>C. Google Services</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2019	
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN6E</b> Amount of Each Disbursement this Period [REDACTED] 65.65	
City Mountain View State CA Zip Code 94043-1351	Purpose of Disbursement Subscription	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶		[REDACTED] 143.89	
<b>TOTAL</b> This Period (last page this line number only)..... ▶		[REDACTED]	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Google Services</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2019
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN68</b>
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Subscription		Amount of Each Disbursement this Period [REDACTED] 15.00
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Harmon Curran Spielberg + Eisenberg LLP</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2019
Mailing Address 1725 Desales St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN6R</b>
City Washington	State DC	Zip Code 20036-4422
Purpose of Disbursement Legal Service		Amount of Each Disbursement this Period [REDACTED] 3855.45
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Harmon Curran Spielberg + Eisenberg LLP</b>		Date of Disbursement MM / DD / YYYY 04 / 17 / 2019
Mailing Address 1725 Desales St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN6C</b>
City Washington	State DC	Zip Code 20036-4422
Purpose of Disbursement Legal Service		Amount of Each Disbursement this Period [REDACTED] 1161.00
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 5031.45
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Harmon Curran Spielberg + Eisenberg LLP</b>		Date of Disbursement MM / DD / YYYY 05 / 22 / 2019
Mailing Address 1725 Desales St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN6N</b> Amount of Each Disbursement this Period [REDACTED] 180.00
City Washington	State DC	Zip Code 20036-4422
Purpose of Disbursement Legal Service	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Harmon Curran Spielberg + Eisenberg LLP</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2019
Mailing Address 1725 Desales St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN6P</b> Amount of Each Disbursement this Period [REDACTED] 756.00
City Washington	State DC	Zip Code 20036-4422
Purpose of Disbursement Legal Service	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hotel Tonight</b>		Date of Disbursement MM / DD / YYYY 01 / 18 / 2019
Mailing Address 901 Market St Ste 310		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN6T</b> Amount of Each Disbursement this Period [REDACTED] 106.00
City San Francisco	State CA	Zip Code 94103-1752
Purpose of Disbursement Hotel	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

[REDACTED] 1042.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Hotel Tonight</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2019
Mailing Address 901 Market St Ste 310		FEC Identification Number C <b>Transaction ID : VNV499ZN6V</b> Amount of Each Disbursement this Period 159.00
City San Francisco	State CA	
Zip Code 94103-1752	Purpose of Disbursement Hotel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hotel Tonight</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2019
Mailing Address 901 Market St Ste 310		FEC Identification Number C <b>Transaction ID : VNV499ZN6W</b> Amount of Each Disbursement this Period 168.00
City San Francisco	State CA	
Zip Code 94103-1752	Purpose of Disbursement Hotel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hotel Tonight</b>		Date of Disbursement MM / DD / YYYY 04 / 02 / 2019
Mailing Address 901 Market St Ste 310		FEC Identification Number C <b>Transaction ID : VNV499ZN6S</b> Amount of Each Disbursement this Period 9.15
City San Francisco	State CA	
Zip Code 94103-1752	Purpose of Disbursement Hotel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

336.15

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Hotel Tonight</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2019
Mailing Address 901 Market St Ste 310		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN6X</b> Amount of Each Disbursement this Period [REDACTED] 269.00
City San Francisco	State CA	Zip Code 94103-1752
Purpose of Disbursement Hotel	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HOTEL ZACHARY</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019
Mailing Address 630 N Clark St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN2B</b> Amount of Each Disbursement this Period [REDACTED] 582.61
City Chicago	State IL	Zip Code 60654-3721
Purpose of Disbursement Travel	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HOTEL ZACHARY</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019
Mailing Address 630 N Clark St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN2C</b> Amount of Each Disbursement this Period [REDACTED] 647.25
City Chicago	State IL	Zip Code 60654-3721
Purpose of Disbursement Travel	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

[REDACTED] 1498.86

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. IPFS Corporation</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2019	
Mailing Address 30 Montgomery St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN70</b> Amount of Each Disbursement this Period [REDACTED] 1013.35	
City Jersey City	State NJ	Zip Code 07302-3829	Category/ Type [REDACTED]
Purpose of Disbursement Insurance		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. IPFS Corporation</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2019	
Mailing Address 30 Montgomery St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN6Z</b> Amount of Each Disbursement this Period [REDACTED] 968.59	
City Jersey City	State NJ	Zip Code 07302-3829	Category/ Type [REDACTED]
Purpose of Disbursement Insurance		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Jane Castor For Mayor Of Tampa</b>		Date of Disbursement MM / DD / YYYY 03 / 25 / 2019	
Mailing Address PO Box 75724		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZHB</b> Amount of Each Disbursement this Period [REDACTED] 1000.00	
City Tampa	State FL	Zip Code 33675-0724	Category/ Type 011
Purpose of Disbursement Campaign Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2019 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2981.94
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Justus For KC**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 411464

City Kansas City State MO Zip Code 64141-1464

Purpose of Disbursement Campaign Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2019  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZHBC

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Leung, Rowel, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2109 F St NW

City Washington State DC Zip Code 20052-0069

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN1M

Amount of Each Disbursement this Period: 422.38

Memo Item

**C. Leung, Rowel, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2109 F St NW

City Washington State DC Zip Code 20052-0069

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN1F

Amount of Each Disbursement this Period: 601.58

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2023.96

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Leung, Rowel, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2019	
Mailing Address 2109 F St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN1N</b> Amount of Each Disbursement this Period [REDACTED] 511.98	
City Washington	State DC	Zip Code 20052-0069	Category/ Type [REDACTED]
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: District:	Memo Item <input type="checkbox"/>		

Full Name (Last, First, Middle Initial) <b>B. Leung, Rowel, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2019	
Mailing Address 2109 F St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN1K</b> Amount of Each Disbursement this Period [REDACTED] 58.35	
City Washington	State DC	Zip Code 20052-0069	Category/ Type [REDACTED]
Purpose of Disbursement Reimbursement		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: District:	Memo Item <input type="checkbox"/>		

Full Name (Last, First, Middle Initial) <b>C. Leung, Rowel, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019	
Mailing Address 2109 F St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN1C</b> Amount of Each Disbursement this Period [REDACTED] 559.98	
City Washington	State DC	Zip Code 20052-0069	Category/ Type [REDACTED]
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: District:	Memo Item <input type="checkbox"/>		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1130.31
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Leung, Rowel, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2019	
Mailing Address 2109 F St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN1S</b> Amount of Each Disbursement this Period [REDACTED] 601.58	
City Washington	State DC	Zip Code 20052-0069	Category/ Type [REDACTED]
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

Full Name (Last, First, Middle Initial) <b>B. Leung, Rowel, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2019	
Mailing Address 2109 F St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN1P</b> Amount of Each Disbursement this Period [REDACTED] 511.98	
City Washington	State DC	Zip Code 20052-0069	Category/ Type [REDACTED]
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

Full Name (Last, First, Middle Initial) <b>C. Lightfoot For Chicago</b>		Date of Disbursement MM / DD / YYYY 03 / 26 / 2019	
Mailing Address 600 W Jackson Blvd Ste 100		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZHBI</b> Amount of Each Disbursement this Period [REDACTED] 26000.00	
City Chicago	State IL	Zip Code 60661-5609	Category/ Type 011
Purpose of Disbursement Campaign contribution		Disbursement For: 2019 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Run-off General	
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

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

[REDACTED] 27113.56

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Little Acre Flowers**

Full Name (Last, First, Middle Initial)

Mailing Address **U St Corridor**

City **Washington** State **DC** Zip Code **20005**

Purpose of Disbursement **Flower**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **02 / 22 / 2019**

FEC Identification Number: **C**  
**Transaction ID : VNV499ZN78**

Amount of Each Disbursement this Period: **78.60**

Memo Item

**B. Little Acre Flowers**

Full Name (Last, First, Middle Initial)

Mailing Address **U St Corridor**

City **Washington** State **DC** Zip Code **20005**

Purpose of Disbursement **Flower**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **02 / 22 / 2019**

FEC Identification Number: **C**  
**Transaction ID : VNV499ZN79!**

Amount of Each Disbursement this Period: **78.60**

Memo Item

**C. Little Acre Flowers**

Full Name (Last, First, Middle Initial)

Mailing Address **U St Corridor**

City **Washington** State **DC** Zip Code **20005**

Purpose of Disbursement **Flower**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **02 / 25 / 2019**

FEC Identification Number: **C**  
**Transaction ID : VNV499ZN7!**

Amount of Each Disbursement this Period: **78.60**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **235.80**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Little Acre Flowers</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2019
Mailing Address U St Corridor		FEC Identification Number C <b>Transaction ID : VNV499ZN7B</b> Amount of Each Disbursement this Period 78.60
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Flower	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2019
Mailing Address 1899 L St NW		FEC Identification Number C <b>Transaction ID : VNV499ZN7K</b> Amount of Each Disbursement this Period 2815.89
City Washington	State DC	
Zip Code 20036-3804	Purpose of Disbursement Accounting Service	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2019
Mailing Address 1899 L St NW		FEC Identification Number C <b>Transaction ID : VNV499ZN7M</b> Amount of Each Disbursement this Period 315.89
City Washington	State DC	
Zip Code 20036-3804	Purpose of Disbursement Accounting Service	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

3210.38

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2019	
Mailing Address 1899 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN7E</b> Amount of Each Disbursement this Period [REDACTED] 1740.73	
City Washington	State DC	Zip Code 20036-3804	Category/ Type [REDACTED]
Purpose of Disbursement Accounting Service		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2019	
Mailing Address 1899 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN7C</b> Amount of Each Disbursement this Period [REDACTED] 1020.55	
City Washington	State DC	Zip Code 20036-3804	Category/ Type [REDACTED]
Purpose of Disbursement Accounting Service		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2019	
Mailing Address 1899 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN7F</b> Amount of Each Disbursement this Period [REDACTED] 2662.30	
City Washington	State DC	Zip Code 20036-3804	Category/ Type [REDACTED]
Purpose of Disbursement Accounting Service		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 5423.58
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2019	
Mailing Address 1899 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN7G</b> Amount of Each Disbursement this Period 2662.30	
City Washington	State DC	Zip Code 20036-3804	Category/ Type
Purpose of Disbursement Accounting Service		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2019	
Mailing Address 1899 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN7D</b> Amount of Each Disbursement this Period 2679.00	
City Washington	State DC	Zip Code 20036-3804	Category/ Type
Purpose of Disbursement Accounting Service		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2019	
Mailing Address 1899 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN7F</b> Amount of Each Disbursement this Period 2662.30	
City Washington	State DC	Zip Code 20036-3804	Category/ Type
Purpose of Disbursement Accounting Service		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8003.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Marcum, LLP</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2019
Mailing Address 1899 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN7J</b> Amount of Each Disbursement this Period 2662.30
City Washington	State DC	Zip Code 20036-3804
Purpose of Disbursement Accounting Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. NGP VAN, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 04 / 2019
Mailing Address 1101 15Th St NW Ste 500		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN7Q</b> Amount of Each Disbursement this Period 150.00
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Subscription		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2019
Mailing Address 1101 15Th St NW Ste 500		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN7S</b> Amount of Each Disbursement this Period 1048.92
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Subscription		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3861.22
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2019	
Mailing Address 1101 15Th St NW Ste 500		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN7R</b> Amount of Each Disbursement this Period [REDACTED] 150.00	
City Washington	State DC	Zip Code 20005-5006	Category/ Type [REDACTED]
Purpose of Disbursement Subscription		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. NJT Mobile</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2019	
Mailing Address 1 Penn Plz E		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN7X</b> Amount of Each Disbursement this Period [REDACTED] 96.00	
City Newark	State NJ	Zip Code 07105-2245	Category/ Type [REDACTED]
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. NJT Mobile</b>		Date of Disbursement MM / DD / YYYY 05 / 22 / 2019	
Mailing Address 1 Penn Plz E		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN7I</b> Amount of Each Disbursement this Period [REDACTED] 6.75	
City Newark	State NJ	Zip Code 07105-2245	Category/ Type [REDACTED]
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

[REDACTED] 252.75

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

[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. NJT Mobile</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2019
Mailing Address 1 Penn Plz E		FEC Identification Number C <b>Transaction ID : VNV499ZN7W</b> Amount of Each Disbursement this Period 86.25
City Newark	State NJ Zip Code 07105-2245	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. NJT Mobile</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2019
Mailing Address 1 Penn Plz E		FEC Identification Number C <b>Transaction ID : VNV499ZN7V</b> Amount of Each Disbursement this Period 64.00
City Newark	State NJ Zip Code 07105-2245	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. NYC Taxi</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2019
Mailing Address 876 McDonald Ave		FEC Identification Number C <b>Transaction ID : VNV499ZN82</b> Amount of Each Disbursement this Period 11.14
City Brooklyn	State NY Zip Code 11218-5612	
Purpose of Disbursement Taxi		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	161.39
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. NYC Taxi**

Full Name (Last, First, Middle Initial)

Mailing Address 876 McDonald Ave

City Brooklyn State NY Zip Code 11218-5612

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN8D

Amount of Each Disbursement this Period: 15.87

Memo Item

**B. NYC Taxi**

Full Name (Last, First, Middle Initial)

Mailing Address 876 McDonald Ave

City Brooklyn State NY Zip Code 11218-5612

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 14 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN83I

Amount of Each Disbursement this Period: 11.71

Memo Item

**C. NYC Taxi**

Full Name (Last, First, Middle Initial)

Mailing Address 876 McDonald Ave

City Brooklyn State NY Zip Code 11218-5612

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN80

Amount of Each Disbursement this Period: 9.55

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 37.13

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. NYC Taxi**

Full Name (Last, First, Middle Initial)

Mailing Address 876 McDonald Ave

City Brooklyn State NY Zip Code 11218-5612

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 19 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN89

Amount of Each Disbursement this Period: 13.60

Memo Item

**B. NYC Taxi**

Full Name (Last, First, Middle Initial)

Mailing Address 876 McDonald Ave

City Brooklyn State NY Zip Code 11218-5612

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN81!

Amount of Each Disbursement this Period: 10.09

Memo Item

**C. NYC Taxi**

Full Name (Last, First, Middle Initial)

Mailing Address 876 McDonald Ave

City Brooklyn State NY Zip Code 11218-5612

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN86

Amount of Each Disbursement this Period: 12.95

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 36.64

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. NYC Taxi</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2019	
Mailing Address 876 McDonald Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8B</b> Amount of Each Disbursement this Period 14.75	
City Brooklyn	State NY	Zip Code 11218-5612	Category/ Type
Purpose of Disbursement Taxi		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. NYC Taxi</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2019	
Mailing Address 876 McDonald Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8C</b> Amount of Each Disbursement this Period 15.36	
City Brooklyn	State NY	Zip Code 11218-5612	Category/ Type
Purpose of Disbursement Taxi		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. NYC Taxi</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2019	
Mailing Address 876 McDonald Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8C</b> Amount of Each Disbursement this Period 63.30	
City Brooklyn	State NY	Zip Code 11218-5612	Category/ Type
Purpose of Disbursement Taxi		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

93.41

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. NYC Taxi</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019
Mailing Address 876 McDonald Ave		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN8F</b> Amount of Each Disbursement this Period 48.30
City Brooklyn	State NY	
Zip Code 11218-5612	Purpose of Disbursement Taxi	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NYC Taxi</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2019
Mailing Address 876 McDonald Ave		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN7Z!</b> Amount of Each Disbursement this Period 8.75
City Brooklyn	State NY	
Zip Code 11218-5612	Purpose of Disbursement Taxi	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NYC Taxi</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2019
Mailing Address 876 McDonald Ave		FEC Identification Number <b>C</b> Transaction ID : <b>VNV499ZN88</b> Amount of Each Disbursement this Period 13.56
City Brooklyn	State NY	
Zip Code 11218-5612	Purpose of Disbursement Taxi	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	70.61
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. NYC Taxi</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2019	
Mailing Address 876 McDonald Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8E</b>	
City Brooklyn	State NY	Zip Code 11218-5612	Amount of Each Disbursement this Period [REDACTED] 17.16
Purpose of Disbursement Taxi		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. NYC Taxi</b>		Date of Disbursement MM / DD / YYYY 05 / 17 / 2019	
Mailing Address 876 McDonald Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN85I</b>	
City Brooklyn	State NY	Zip Code 11218-5612	Amount of Each Disbursement this Period [REDACTED] 12.25
Purpose of Disbursement Taxi		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. NYC Taxi</b>		Date of Disbursement MM / DD / YYYY 05 / 17 / 2019	
Mailing Address 876 McDonald Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8I</b>	
City Brooklyn	State NY	Zip Code 11218-5612	Amount of Each Disbursement this Period [REDACTED] 14.16
Purpose of Disbursement Taxi		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 43.57
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. NYC Taxi**

Full Name (Last, First, Middle Initial)

Mailing Address 876 McDonald Ave

City Brooklyn State NY Zip Code 11218-5612

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 10 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN87

Amount of Each Disbursement this Period: 12.98

Memo Item

**B. NYC Taxi**

Full Name (Last, First, Middle Initial)

Mailing Address 876 McDonald Ave

City Brooklyn State NY Zip Code 11218-5612

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 18 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN84

Amount of Each Disbursement this Period: 11.75

Memo Item

**C. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN91

Amount of Each Disbursement this Period: 85.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 109.73

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN93

Amount of Each Disbursement this Period: 150.00

Memo Item

**B. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN94'

Amount of Each Disbursement this Period: 150.00

Memo Item

**C. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN95

Amount of Each Disbursement this Period: 350.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 650.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 07 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN8H

Amount of Each Disbursement this Period: 34.00

Memo Item

**B. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 07 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN8J!

Amount of Each Disbursement this Period: 34.00

Memo Item

**C. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN90

Amount of Each Disbursement this Period: 75.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 143.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN8K

Amount of Each Disbursement this Period: 34.00

Memo Item

**B. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN8M

Amount of Each Disbursement this Period: 34.00

Memo Item

**C. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN96

Amount of Each Disbursement this Period: 423.92

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 491.92

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN8N

Amount of Each Disbursement this Period: 34.00

Memo Item

**B. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN8P

Amount of Each Disbursement this Period: 34.00

Memo Item

**C. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN8C

Amount of Each Disbursement this Period: 34.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 102.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Olive Street Design</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2019	
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8R</b> Amount of Each Disbursement this Period [REDACTED] 34.00	
City Villa Park	State IL	Zip Code 60181-5502	Category/ Type [REDACTED]
Purpose of Disbursement Design Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Olive Street Design</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2019	
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8S</b> Amount of Each Disbursement this Period [REDACTED] 34.00	
City Villa Park	State IL	Zip Code 60181-5502	Category/ Type [REDACTED]
Purpose of Disbursement Design Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Olive Street Design</b>		Date of Disbursement MM / DD / YYYY 05 / 06 / 2019	
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8T</b> Amount of Each Disbursement this Period [REDACTED] 34.00	
City Villa Park	State IL	Zip Code 60181-5502	Category/ Type [REDACTED]
Purpose of Disbursement Design Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 102.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Olive Street Design</b>		Date of Disbursement MM / DD / YYYY 05 / 06 / 2019
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8V</b> Amount of Each Disbursement this Period [REDACTED] 34.00
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Design Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Olive Street Design</b>		Date of Disbursement MM / DD / YYYY 05 / 06 / 2019
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8W</b> Amount of Each Disbursement this Period [REDACTED] 34.00
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Design Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Olive Street Design</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2019
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN92</b> Amount of Each Disbursement this Period [REDACTED] 100.00
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Design Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 168.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Olive Street Design</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2019	
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8X</b> Amount of Each Disbursement this Period [REDACTED] 34.00	
City Villa Park	State IL	Zip Code 60181-5502	Category/ Type [REDACTED]
Purpose of Disbursement Design Fee		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Olive Street Design</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2019	
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8Y</b> Amount of Each Disbursement this Period [REDACTED] 34.00	
City Villa Park	State IL	Zip Code 60181-5502	Category/ Type [REDACTED]
Purpose of Disbursement Design Fee		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Olive Street Design</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2019	
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN8Z</b> Amount of Each Disbursement this Period [REDACTED] 34.00	
City Villa Park	State IL	Zip Code 60181-5502	Category/ Type [REDACTED]
Purpose of Disbursement Design Fee		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 102.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN9H

Amount of Each Disbursement this Period: 183.34

Memo Item

**B. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN9JI

Amount of Each Disbursement this Period: 220.30

Memo Item

**C. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement PR Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN9J

Amount of Each Disbursement this Period: 1014.10

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1417.74

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)  
**A. Paychex**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement PR Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN9X

Amount of Each Disbursement this Period: 978.27

Memo Item

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

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN9E

Amount of Each Disbursement this Period: 107.63

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Paychex**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement PR Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 14 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN92

Amount of Each Disbursement this Period: 1054.93

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2140.83

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2019
Mailing Address 911 Panorama Trl S		FEC Identification Number C <b>Transaction ID : VNV499ZN9F</b> Amount of Each Disbursement this Period 107.75
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2019
Mailing Address 911 Panorama Trl S		FEC Identification Number C <b>Transaction ID : VNV499ZN9W</b> Amount of Each Disbursement this Period 944.45
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement PR Tax	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2019
Mailing Address 911 Panorama Trl S		FEC Identification Number C <b>Transaction ID : VNV499ZN9H</b> Amount of Each Disbursement this Period 246.50
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1298.70
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2019
Mailing Address 911 Panorama Trl S		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499ZN9C</b> Amount of Each Disbursement this Period 107.62
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2019
Mailing Address 911 Panorama Trl S		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499ZN9V</b> Amount of Each Disbursement this Period 716.92
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement PR Tax	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2019
Mailing Address 911 Panorama Trl S		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499ZN9E</b> Amount of Each Disbursement this Period 107.62
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	932.16
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2019
Mailing Address 911 Panorama Trl S		FEC Identification Number C <b>Transaction ID : VNV499ZN9G</b> Amount of Each Disbursement this Period 489.37
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement PR Tax	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019
Mailing Address 911 Panorama Trl S		FEC Identification Number C <b>Transaction ID : VNV499ZN9G</b> Amount of Each Disbursement this Period 121.36
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019
Mailing Address 911 Panorama Trl S		FEC Identification Number C <b>Transaction ID : VNV499ZN9G</b> Amount of Each Disbursement this Period 494.20
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement PR Tax	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1104.93
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN97</b>	
City Rochester	State NY	Zip Code 14625-2396	Amount of Each Disbursement this Period [REDACTED] 102.37
Purpose of Disbursement Payroll Processing Fee		Category/Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN9T</b>	
City Rochester	State NY	Zip Code 14625-2396	Amount of Each Disbursement this Period [REDACTED] 498.37
Purpose of Disbursement PR Tax		Category/Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2019	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN98</b>	
City Rochester	State NY	Zip Code 14625-2396	Amount of Each Disbursement this Period [REDACTED] 107.47
Purpose of Disbursement Payroll Processing Fee		Category/Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 708.21
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement PR Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN9R

Amount of Each Disbursement this Period: 489.37

Memo Item

**B. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN99'

Amount of Each Disbursement this Period: 107.48

Memo Item

**C. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement PR Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN9A

Amount of Each Disbursement this Period: 437.91

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1034.76

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2019
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN9A</b> Amount of Each Disbursement this Period [REDACTED] 107.48
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll Processing Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2019
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN9N</b> Amount of Each Disbursement this Period [REDACTED] 445.63
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement PR Tax		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2019
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN9E</b> Amount of Each Disbursement this Period [REDACTED] 107.48
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll Processing Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

[REDACTED] 660.59

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement  
PR Tax

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VNV499ZN9P**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. PowerThru Consulting LLC**

Mailing Address 2679 Oakwood Ln

City Cookeville State TN Zip Code 38506-5080

Purpose of Disbursement  
Consulting Work

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VNV499ZNA0**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Preferred Insurance Services Inc.**

Mailing Address 26 Fairfax St SE  
Ste G

City Leesburg State VA Zip Code 20175-3621

Purpose of Disbursement  
Insurance

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VNV499ZNA1**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Premium Assignment Corporation**

Full Name (Last, First, Middle Initial)

Mailing Address 3522 Thomasville Rd  
Ste 400

City Tallahassee State FL Zip Code 32309-3488

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNA2

Amount of Each Disbursement this Period: 961.61

Memo Item

**B. Quickbook**

Full Name (Last, First, Middle Initial)

Mailing Address 2700 Coast Ave

City Mountain View State CA Zip Code 94043-1140

Purpose of Disbursement Accounting Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 13 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNA6

Amount of Each Disbursement this Period: 388.93

Memo Item

**C. Roberts, Bruce, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2235 Frederick Douglass Blvd

City New York State NY Zip Code 10027-6175

Purpose of Disbursement Fundraising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 17 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN11

Amount of Each Disbursement this Period: 600.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1950.54

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. ROUX PROVINCETOWN**

Full Name (Last, First, Middle Initial)

Mailing Address 210 Bradford St

City Provincetown State MA Zip Code 02657-2425

Purpose of Disbursement Hotel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 05 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNA7

Amount of Each Disbursement this Period: 314.74

Memo Item

**B. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 24 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN1V

Amount of Each Disbursement this Period: 102.56

Memo Item

**C. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 24 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZN1V

Amount of Each Disbursement this Period: 1041.67

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1458.97

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Sandberg, Stephanie, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2019	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN1X</b> Amount of Each Disbursement this Period [REDACTED] 1223.00	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type [REDACTED]
Purpose of Disbursement Reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Sandberg, Stephanie, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2019	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN1Y</b> Amount of Each Disbursement this Period [REDACTED] 1824.99	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type [REDACTED]
Purpose of Disbursement Reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Sandberg, Stephany, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN27</b> Amount of Each Disbursement this Period [REDACTED] 6399.75	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type [REDACTED]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

9447.74

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Sandberg, Stephany, , ,</b>			Date of Disbursement MM / DD / YYYY <b>01 / 31 / 2019</b>	
Mailing Address <b>32 Vreeland Ct</b>			FEC Identification Number <b>C</b>	
City Princeton	State NJ	Zip Code 08540-6760	<b>Transaction ID : VNV499ZN28</b>	
Purpose of Disbursement Salary		Category/ Type	Amount of Each Disbursement this Period <b>6399.75</b>	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Sandberg, Stephany, , ,</b>			Date of Disbursement MM / DD / YYYY <b>02 / 14 / 2019</b>	
Mailing Address <b>32 Vreeland Ct</b>			FEC Identification Number <b>C</b>	
City Princeton	State NJ	Zip Code 08540-6760	<b>Transaction ID : VNV499ZN29!</b>	
Purpose of Disbursement Salary		Category/ Type	Amount of Each Disbursement this Period <b>6399.75</b>	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>C. Sandberg, Stephany, , ,</b>			Date of Disbursement MM / DD / YYYY <b>02 / 28 / 2019</b>	
Mailing Address <b>32 Vreeland Ct</b>			FEC Identification Number <b>C</b>	
City Princeton	State NJ	Zip Code 08540-6760	<b>Transaction ID : VNV499ZN2/</b>	
Purpose of Disbursement Salary		Category/ Type	Amount of Each Disbursement this Period <b>6399.75</b>	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

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

**19199.25**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Sandberg, Stephany, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 03 / 15 / 2019

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : VNV499ZN1Z

Amount of Each Disbursement this Period: 2177.94

Memo Item

**B. Sandberg, Stephany, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 03 / 29 / 2019

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : VNV499ZN20

Amount of Each Disbursement this Period: 4479.83

Memo Item

**C. Sandberg, Stephany, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 04 / 15 / 2019

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : VNV499ZN21

Amount of Each Disbursement this Period: 4479.83

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 11137.60

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Sandberg, Stephany, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2019	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN22</b> Amount of Each Disbursement this Period 4479.83	
City Princeton	State NJ	Zip Code 08540-6760	Category/Type [REDACTED]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Sandberg, Stephany, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2019	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN23!</b> Amount of Each Disbursement this Period 4479.83	
City Princeton	State NJ	Zip Code 08540-6760	Category/Type [REDACTED]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Sandberg, Stephany, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2019	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN24</b> Amount of Each Disbursement this Period 4479.83	
City Princeton	State NJ	Zip Code 08540-6760	Category/Type [REDACTED]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

13439.49

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Sandberg, Stephany, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2019	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN25</b> Amount of Each Disbursement this Period 4479.83	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sandberg, Stephany, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2019	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZN26</b> Amount of Each Disbursement this Period 4479.83	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. SQUARE</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2019	
Mailing Address 1455 Market St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNA</b> Amount of Each Disbursement this Period 470.60	
City San Francisco	State CA	Zip Code 94103-1331	Category/ Type
Purpose of Disbursement Travel		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9430.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. SQAURE</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019	
Mailing Address 1455 Market St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNA#</b> Amount of Each Disbursement this Period 8.47	
City San Francisco	State CA	Zip Code 94103-1331	Category/ Type
Purpose of Disbursement Travel			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. SQAURE</b>		Date of Disbursement MM / DD / YYYY 03 / 25 / 2019	
Mailing Address 1455 Market St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNA#</b> Amount of Each Disbursement this Period 17.46	
City San Francisco	State CA	Zip Code 94103-1331	Category/ Type
Purpose of Disbursement Food			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. SQAURE</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019	
Mailing Address 1455 Market St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNA#</b> Amount of Each Disbursement this Period 89.99	
City San Francisco	State CA	Zip Code 94103-1331	Category/ Type
Purpose of Disbursement Travel			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	115.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. SQAURE**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St

City San Francisco State CA Zip Code 94103-1331

Purpose of Disbursement Fundraising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNAE

Amount of Each Disbursement this Period: 107.18

Memo Item

**B. SQAURE**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St

City San Francisco State CA Zip Code 94103-1331

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNAE

Amount of Each Disbursement this Period: 1536.23

Memo Item

**C. SQAURE**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St

City San Francisco State CA Zip Code 94103-1331

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNAE

Amount of Each Disbursement this Period: 1536.23

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3179.64

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. SQAURE</b>		Date of Disbursement MM / DD / YYYY 04 / 17 / 2019
Mailing Address 1455 Market St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNAC</b> Amount of Each Disbursement this Period [REDACTED] 51.88
City San Francisco	State CA	Zip Code 94103-1331
Purpose of Disbursement Fundraising		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. SQAURE</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2019
Mailing Address 1455 Market St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNA9</b> Amount of Each Disbursement this Period [REDACTED] 4.64
City San Francisco	State CA	Zip Code 94103-1331
Purpose of Disbursement Travel		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019
Mailing Address PO Box 5373		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNA;</b> Amount of Each Disbursement this Period [REDACTED] 333.26
City Virginia Beach	State VA	Zip Code 23471-0373
Purpose of Disbursement Consulting Work		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 389.78
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019
Mailing Address PO Box 5373		FEC Identification Number C <b>Transaction ID : VNV499ZNB1</b> Amount of Each Disbursement this Period 2393.25
City Virginia Beach	State VA	
Zip Code 23471-0373	Purpose of Disbursement Consulting Work	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2019
Mailing Address PO Box 5373		FEC Identification Number C <b>Transaction ID : VNV499ZNB7</b> Amount of Each Disbursement this Period 4250.00
City Virginia Beach	State VA	
Zip Code 23471-0373	Purpose of Disbursement Consulting Work	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 02 / 22 / 2019
Mailing Address PO Box 5373		FEC Identification Number C <b>Transaction ID : VNV499ZNB;</b> Amount of Each Disbursement this Period 3000.00
City Virginia Beach	State VA	
Zip Code 23471-0373	Purpose of Disbursement Consulting Work	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9643.25
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2019	
Mailing Address PO Box 5373		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNB0</b> Amount of Each Disbursement this Period 2372.40	
City Virginia Beach	State VA	Zip Code 23471-0373	Category/ Type
Purpose of Disbursement Consulting Work		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 03 / 25 / 2019	
Mailing Address PO Box 5373		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNB3</b> Amount of Each Disbursement this Period 3000.00	
City Virginia Beach	State VA	Zip Code 23471-0373	Category/ Type
Purpose of Disbursement Consulting Work		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 04 / 17 / 2019	
Mailing Address PO Box 5373		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNB4</b> Amount of Each Disbursement this Period 3000.00	
City Virginia Beach	State VA	Zip Code 23471-0373	Category/ Type
Purpose of Disbursement Consulting Work		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8372.40
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2019	
Mailing Address PO Box 5373		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNAV</b> Amount of Each Disbursement this Period [REDACTED] 318.00	
City Virginia Beach	State VA	Zip Code 23471-0373	Category/ Type [REDACTED]
Purpose of Disbursement Consulting Work		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2019	
Mailing Address PO Box 5373		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNAV</b> Amount of Each Disbursement this Period [REDACTED] 576.47	
City Virginia Beach	State VA	Zip Code 23471-0373	Category/ Type [REDACTED]
Purpose of Disbursement Consulting Work		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2019	
Mailing Address PO Box 5373		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNAV</b> Amount of Each Disbursement this Period [REDACTED] 1168.39	
City Virginia Beach	State VA	Zip Code 23471-0373	Category/ Type [REDACTED]
Purpose of Disbursement Consulting Work		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

2062.86

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2019
Mailing Address PO Box 5373		FEC Identification Number C <b>Transaction ID : VNV499ZNB5</b> Amount of Each Disbursement this Period 3000.00
City Virginia Beach	State VA	
Zip Code 23471-0373	Purpose of Disbursement Consulting Work	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Turner Group LTD</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2019
Mailing Address PO Box 5373		FEC Identification Number C <b>Transaction ID : VNV499ZNB6</b> Amount of Each Disbursement this Period 3000.00
City Virginia Beach	State VA	
Zip Code 23471-0373	Purpose of Disbursement Consulting Work	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TOP MAST RESORT</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2019
Mailing Address 209 Shore Rd		FEC Identification Number C <b>Transaction ID : VNV499ZNB5</b> Amount of Each Disbursement this Period 291.24
City North Truro	State MA	
Zip Code 02652	Purpose of Disbursement Hotel	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6291.24
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNBE

Amount of Each Disbursement this Period: 5.00

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNBC

Amount of Each Disbursement this Period: 5.00

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNBI

Amount of Each Disbursement this Period: 5.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNB

Amount of Each Disbursement this Period: 14.33

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNB

Amount of Each Disbursement this Period: 14.41

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNB

Amount of Each Disbursement this Period: 15.32

Memo Item

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

44.06

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 03 / 25 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNBV</b> Amount of Each Disbursement this Period [REDACTED] 19.12	
City San Francisco	State CA	Zip Code 94105-1611	Category/ Type [REDACTED]
Purpose of Disbursement Taxi		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement MM / DD / YYYY 03 / 25 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNBV</b> Amount of Each Disbursement this Period [REDACTED] 24.11	
City San Francisco	State CA	Zip Code 94105-1611	Category/ Type [REDACTED]
Purpose of Disbursement Taxi		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) <b>C. Uber</b>		Date of Disbursement MM / DD / YYYY 03 / 25 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNBV</b> Amount of Each Disbursement this Period [REDACTED] 24.26	
City San Francisco	State CA	Zip Code 94105-1611	Category/ Type [REDACTED]
Purpose of Disbursement Taxi		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Memo Item <input type="checkbox"/>			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 67.49
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNC0

Amount of Each Disbursement this Period: 38.31

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNC1

Amount of Each Disbursement this Period: 39.98

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 29 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNB1

Amount of Each Disbursement this Period: 23.94

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 102.23

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNB#</b> Amount of Each Disbursement this Period [REDACTED] 4.92	
City San Francisco	State CA	Zip Code 94105-1611	Category/ Type [REDACTED]
Purpose of Disbursement Taxi		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNB#</b> Amount of Each Disbursement this Period [REDACTED] 10.00	
City San Francisco	State CA	Zip Code 94105-1611	Category/ Type [REDACTED]
Purpose of Disbursement Taxi		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Uber</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNC#</b> Amount of Each Disbursement this Period [REDACTED] 54.84	
City San Francisco	State CA	Zip Code 94105-1611	Category/ Type [REDACTED]
Purpose of Disbursement Taxi		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 69.76
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNBJ</b>	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 11.67
Purpose of Disbursement Taxi		Category/ Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNC2</b>	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 41.04
Purpose of Disbursement Taxi		Category/ Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Uber</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNB1</b>	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 5.00
Purpose of Disbursement Taxi		Category/ Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	57.71
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNB

Amount of Each Disbursement this Period: 5.00

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNB

Amount of Each Disbursement this Period: 12.50

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNB

Amount of Each Disbursement this Period: 25.73

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 43.23

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNB</b> Amount of Each Disbursement this Period [REDACTED] 25.82	
City San Francisco	State CA	Zip Code 94105-1611	Category/ Type [REDACTED]
Purpose of Disbursement Taxi		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNC3</b> Amount of Each Disbursement this Period [REDACTED] 45.26	
City San Francisco	State CA	Zip Code 94105-1611	Category/ Type [REDACTED]
Purpose of Disbursement Taxi		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Uber</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNC!</b> Amount of Each Disbursement this Period [REDACTED] 62.50	
City San Francisco	State CA	Zip Code 94105-1611	Category/ Type [REDACTED]
Purpose of Disbursement Taxi		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 133.58
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNBZ

Amount of Each Disbursement this Period: 32.35

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNBK

Amount of Each Disbursement this Period: 12.35

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNBZ

Amount of Each Disbursement this Period: 22.66

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 67.36

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2019	
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNB+</b> Amount of Each Disbursement this Period 10.02	
City San Francisco	State CA	Zip Code 94105-1611	Category/ Type
Purpose of Disbursement Taxi			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. VistaPrint</b>		Date of Disbursement MM / DD / YYYY 05 / 06 / 2019	
Mailing Address 45 Victoria St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNCF</b> Amount of Each Disbursement this Period 65.35	
City Hamilton ON Canada	State ZZ	Zip Code 00000	Category/ Type
Purpose of Disbursement Printing			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. VistaPrint</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2019	
Mailing Address 45 Victoria St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499ZNCI</b> Amount of Each Disbursement this Period 15.99	
City Hamilton ON Canada	State ZZ	Zip Code 00000	Category/ Type
Purpose of Disbursement Printing			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

91.36

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. VistaPrint**

Full Name (Last, First, Middle Initial)

Mailing Address 45 Victoria St

City Hamilton ON Canada State ZZ Zip Code 00000

Purpose of Disbursement Printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNCC

Amount of Each Disbursement this Period: 175.81

Memo Item

**B. Witeck Communications, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW

City Washington State DC Zip Code 20037-1527

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNCK

Amount of Each Disbursement this Period: 554.64

Memo Item

**C. Witeck Communications, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW

City Washington State DC Zip Code 20037-1527

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV499ZNCI

Amount of Each Disbursement this Period: 554.64

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1285.09

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Witeck Communications, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2019	
Mailing Address 2120 L St NW		FEC Identification Number C [ ]	
City Washington	State DC	Zip Code 20037-1527	Transaction ID : VNV499ZNCN
Purpose of Disbursement Rent		Category/ Type [ ]	Amount of Each Disbursement this Period 554.64
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type [ ]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type [ ]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	554.64
<b>TOTAL</b> This Period (last page this line number only).....▶	287196.86