

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.

L PAC

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

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

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <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 / / in the State of

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

Election on / / in the State of

5. Covering Period / / through / /

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

Rosen, Hilary, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Rosen, Hilary, , ,* [Electronically Filed] Date / /

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)

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="2016"/>	<input type="text" value="92680.76"/>	<input type="text" value="92680.76"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="181184.83"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="76425.85"/>	<input type="text" value="1277178.25"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="257610.68"/>	<input type="text" value="1369859.01"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="138545.12"/>	<input type="text" value="1250793.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="119065.56"/>	<input type="text" value="119065.56"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

L PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 20 / 2016 To: M M / D D / Y Y Y Y Y 11 / 28 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9980.64	91595.20
(ii) Unitemized	125.00	6349.01
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10105.64	97944.21
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	11147.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	15105.64	109091.21
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).....	35022.21	35616.82
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	2500.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	23798.00	1129970.22
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)).....▶	76425.85	1277178.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	76425.85	1277178.25

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	6789.17	156757.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6789.17	156757.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13720.16	137994.72
24. Independent Expenditures (use Schedule E)	25000.05	27022.27
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).....	93035.74	929018.56
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)) ..	138545.12	1250793.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	138545.12	1250793.45

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15105.64	109091.21
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15105.64	109091.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6789.17	156757.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	35022.21	35616.82
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-28233.04	121141.08

**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 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
L PAC

A. Bayles, Autumn, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 Green St
 Apt F
 City Philadelphia State PA Zip Code 19123-2810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Aramark Occupation (for Individual) Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 05 / 2016
Transaction ID : VNW3HEYRD65
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Bunch, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Bond St
 Apt 5A
 City New York State NY Zip Code 10012-2425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rutgers University Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2016
Transaction ID : VNW3HEYRD98
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Filardi, Del, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1203
 PO Box1203
 City Truro State MA Zip Code 02666-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Sculptor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 26 / 2016
Transaction ID : VNW3HEXRE65
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 39
<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 A. Filardi, Del, , ,		Date of Receipt MM / DD / YYYY 11 / 26 / 2016
Mailing Address PO Box 1203 PO Box1203		Transaction ID : VNW3HEZRB87
City Truro	State MA	Zip Code 02666-1203
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Self	Occupation (for Individual) Sculptor	<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. Leszczynski, Jeanne, , ,		Date of Receipt MM / DD / YYYY 11 / 06 / 2016
Mailing Address 65 Wellesley Ave		Transaction ID : VNW3HEYDYA4
City Needham	State MA	Zip Code 02494-1821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
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 ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Ricketts, Laura, , ,		Date of Receipt MM / DD / YYYY 11 / 03 / 2016
Mailing Address 430 Sheridan Rd		Transaction ID : VNW3HEYJXG1
City Wilmette	State IL	Zip Code 60091-2821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer (for Individual) Self	Occupation (for Individual) Consultant	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	Earmarked for DEBORAH ROSS FOR SENATE

SUBTOTAL of Receipts This Page (optional).....	3450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 39
	<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. 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 10 / 28 / 2016
Transaction ID : VNW3HEYQ9W3
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. SANDLIN, WILLIAM C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3604 Overbrook Dr
 City Dallas State TX Zip Code 75205-4327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULTRAMATION INC Occupation (for Individual) PRESIDENT
 Receipt For: 2016 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 11 / 01 / 2016
Transaction ID : VNW3HEY9EX0
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Earmarked for DEBORAH ROSS FOR SENATE

C. York, Beverly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Bean Creek Rd Unit 35
 City Scotts Valley State CA Zip Code 95066-4136
 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 ▼ 181.44

Date of Receipt 10 / 27 / 2016
Transaction ID : VNW3HEXT7F8
 Amount of Each Receipt this Period 20.16
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 6020.16
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 9 OF 39
	<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. York, Beverly, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 Bean Creek Rd
Unit 35

City Scotts Valley State CA Zip Code 95066-4136

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 ▼
181.44

Date of Receipt
10 / 27 / 2016
Transaction ID : VNW3HEXW306

Amount of Each Receipt this Period
20.16

Memo Item

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

Mailing Address 111 Bean Creek Rd
Unit 35

City Scotts Valley State CA Zip Code 95066-4136

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 ▼
221.76

Date of Receipt
11 / 27 / 2016
Transaction ID : VNW3HEZRDN5

Amount of Each Receipt this Period
20.16

Memo Item

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

Mailing Address 111 Bean Creek Rd
Unit 35

City Scotts Valley State CA Zip Code 95066-4136

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 ▼
221.76

Date of Receipt
11 / 27 / 2016
Transaction ID : VNW3HEZREC5

Amount of Each Receipt this Period
20.16

Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.48
TOTAL This Period (last page this line number only).....	9980.64

**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 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. PRIORITIES USA ACTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1101 15th St NW
Lbby 2
City Washington State DC Zip Code 20005-5002
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 ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2016
Transaction ID : VNW3HEYR6K4
Amount of Each Receipt this Period
5000.00
 Memo Item
* In-Kind: In Kind Contribution - Digital Production Services for IE

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
M M / D D / Y Y Y Y Y Y
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
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

**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 11 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. DEBORAH ROSS FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 28258

City Raleigh	State NC	Zip Code 27611-8258
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FEC ID number of contributing federal political committee. **C** C00589820

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
189.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : VNW3HEY PX06

Amount of Each Receipt this Period
94.50

Memo Item

B. DEBORAH ROSS FOR SENATE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 28258

City Raleigh	State NC	Zip Code 27611-8258
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FEC ID number of contributing federal political committee. **C** C00589820

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2016

Transaction ID : VNW3HEY PWZ8

Amount of Each Receipt this Period
35.00

Memo Item

C. The Dupont Hotel
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1500 New Hampshire Ave NW

City Washington	State DC	Zip Code 20036-1204
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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 ▼
34892.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	22	/	2016

Transaction ID : VNW3HEZ Q598

Amount of Each Receipt this Period
34892.00

Memo Item

Refund of event deposit

SUBTOTAL of Receipts This Page (optional).....	35021.50
TOTAL This Period (last page this line number only).....	35021.50

**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 39
<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 A. Bindler, Lori, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address 93 Ocean Ave # A		Transaction ID : VNW3HEXS640
City Manasquan	State NJ	Zip Code 08736-3229
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
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 ▼ 5000.00	<input type="checkbox"/> Non contribution account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Carpenter, Kelli, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2016
Mailing Address 35 Oak Ridge Rd		Transaction ID : VNW3HEX43R6
City Ramsey	State NJ	Zip Code 07446-1439
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Travel Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	<input type="checkbox"/> Non contribution account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Carter, Bonnie, S, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address 34 Oak Bend Rd		Transaction ID : VNW3HEXS666
City West Orange	State NJ	Zip Code 07052-4960
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) None	Occupation (for Individual) Unemployed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1050.00	<input type="checkbox"/> Non contribution account

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 39
<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. Carter, Bonnie, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 Oak Bend Rd
 City West Orange State NJ Zip Code 07052-4960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Unemployed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 26 / 2016
Transaction ID : VNW3HEXS699
 Amount of Each Receipt this Period 50.00
 Memo Item
 Non contribution account

B. Coskey, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11227 Arroyo Beach PI SW
 City Seattle State WA Zip Code 98146-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) City of Seattle Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2016
Transaction ID : VNW3HEY30E6
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non contribution account

C. Cruz, Ana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4836 W Flamingo Rd
 City Tampa State FL Zip Code 33611-1012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ballard Partners Occupation (for Individual) Governmental Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : VNW3HEXRG19
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non contribution account

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 39
<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 A. Grainger, Katherine, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 16 / 2016
Mailing Address 56 Court St 2E		Transaction ID : VNW3HEZMCC1
City Brooklyn	State NY	Zip Code 11201-4912
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Civitas	Occupation (for Individual) Principal	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	Non contribution account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Heisler, Helen, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 10 / 2016
Mailing Address 7135 W Villa Chula		Transaction ID : VNW3HEZER04
City Glendale	State AZ	Zip Code 85310-5884
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Casa Technology Systems, LLC	Occupation (for Individual) Small Business Owner	<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	Non contribution account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hunt, Kim, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2016
Mailing Address 5514 S Woodlawn Ave		Transaction ID : VNW3HEY3G82
City Chicago	State IL	Zip Code 60637-1636
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) AIDS Foundation of Chicago	Occupation (for Individual) Activist	<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	Non contribution account

SUBTOTAL of Receipts This Page (optional).....	375.00
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 15 OF 39
<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. Hyland, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Bowdoin St
 Apt 20
 City Boston State MA Zip Code 02114-4239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brigham and Women's Hospital Occupation (for Individual) Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 21 / 2016
Transaction ID : VNW3HEZQ1R8
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non contribution account

B. 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 Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : VNW3HEXRHR4
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Non contribution account

C. 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-employed Occupation (for Individual) Policy Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 27400.00

Date of Receipt 10 / 27 / 2016
Transaction ID : VNW3HEY0T89
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Non contribution account

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 39
<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. Pawlitschek, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 65th St
 Apt D3
 City Brooklyn State NY Zip Code 11204-3620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed, The Jasprizza Group Occupation (for Individual) Communications Training
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 30 / 2016
Transaction ID : VNW3HEY3VD5
 Amount of Each Receipt this Period 150.00
 Memo Item
 Non contribution account

B. Pawlitschek, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 65th St
 Apt D3
 City Brooklyn State NY Zip Code 11204-3620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed, The Jasprizza Group Occupation (for Individual) Communications Training
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00

Date of Receipt 11 / 01 / 2016
Transaction ID : VNW3HEY7PC7
 Amount of Each Receipt this Period 50.00
 Memo Item
 Non contribution account

C. 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 ▼ 10000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : VNW3HEY2VB0
 Amount of Each Receipt this Period 10000.00
 Memo Item
 Non contribution account

SUBTOTAL of Receipts This Page (optional).....▶ 10200.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 39
<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 A. Vieiro, Donna, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2016
Mailing Address 600 Grand Ave Unit 11		Transaction ID : VNW3HEXRK31
City Asbury Park	State NJ	Zip Code 07712-6613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Holmdel	Occupation (for Individual) Administrator	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	<input type="checkbox"/> Non contribution account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	21875.00

**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 18 OF 39
<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 checked="" type="checkbox"/> 16 <input 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
Friends of Patrick Murphy

Mailing Address 4521 Pga Blvd
412

City State Zip Code
Palm Beach Gardens FL 33418-3997

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

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : VNW3HEYQ9V5

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	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 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. First Data - Merchant Services

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1 Western Maryland Pkwy

M M	/	D D	/	Y Y Y Y
11		02		2016

City Hagerstown State MD Zip Code 21740-5146

FEC Identification Number

Purpose of Disbursement
Credit card processing fee

C
Transaction ID : VNV499V5XC
Amount of Each Disbursement this Period
339.02

Candidate Name

Category/
Type

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

Memo Item

State: District:

B. Harmon, Curran, Spielberg & Eisenberg, LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1726 M St NW
Ste 600

M M	/	D D	/	Y Y Y Y
11		16		2016

City Washington State DC Zip Code 20036-4523

FEC Identification Number

Purpose of Disbursement
Legal Fees

C
Transaction ID : VNV499V51N!
Amount of Each Disbursement this Period
790.44

Candidate Name

Category/
Type

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

Memo Item

State: District:

C. PCMS, LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1050 17th St NW
Ste 590

M M	/	D D	/	Y Y Y Y
11		16		2016

City Washington State DC Zip Code 20036-5592

FEC Identification Number

Purpose of Disbursement
Accounting services

C
Transaction ID : VNV499V52N
Amount of Each Disbursement this Period
659.71

Candidate Name

001
Category/
Type

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

Memo Item

State: District:

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

1789.17

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. PRIORITIES USA ACTION

Full Name (Last, First, Middle Initial)

Mailing Address 1101 15th St NW
Lbby 2

City Washington State DC Zip Code 20005-5002

Purpose of Disbursement
In Kind Contribution - Digital Production Services for IE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 25 / 2016

FEC Identification Number: C

Transaction ID : VNW3HEYR6

Amount of Each Disbursement this Period: 5000.00

Memo Item * In-Kind Received

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	6789.17

**SCHEDULE B (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. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

M M M	/	D D D	/	Y Y Y Y Y
10		20		2016

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00575209
---	-----------

Candidate Name
CRAIG, ANGELA DAWN, , ,

Category/Type

Transaction ID : VNW3HETSE
Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

20.16

State: MN District: 02

Memo Item
Earmarked by Kate Kight

B. Applegate for Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 380 S Melrose Dr
Ste 207

M M M	/	D D D	/	Y Y Y Y Y
11		04		2016

City Vista State CA Zip Code 92081-6652

FEC Identification Number

Purpose of Disbursement
Candidate Contribution

C	C00581595
---	-----------

Candidate Name
APPLEGATE, DOUGLAS LOREN, , ,

Category/Type

Transaction ID : VNV499V51G
Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

1500.00

State: CA District: 49

Memo Item

C. DEBORAH ROSS FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 28258

M M M	/	D D D	/	Y Y Y Y Y
11		03		2016

City Raleigh State NC Zip Code 27611-8258

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00589820
---	-----------

Candidate Name
ROSS, DEBORAH K, , ,

Category/Type

Transaction ID : VNW3HEY9E
Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

1000.00

State: NC District: 00

Memo Item
Earmarked by WILLIAM C SANDLIN

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

2520.16

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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

Full Name (Last, First, Middle Initial) A. DEBORAH ROSS FOR SENATE		Date of Disbursement MM / DD / YYYY 11 / 03 / 2016
Mailing Address PO Box 28258		FEC Identification Number C00589820 Transaction ID : VNW3HEYJX Amount of Each Disbursement this Period 2700.00 Earmarked by Laura Ricketts
City Raleigh	State NC	Zip Code 27611-8258
Purpose of Disbursement Conduit Contribution		Category/ Type
Candidate Name ROSS, DEBORAH K, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. HILLARY VICTORY FUND		Date of Disbursement MM / DD / YYYY 11 / 16 / 2016
Mailing Address PO Box 5256		FEC Identification Number C00586537 Transaction ID : VNV499V51P: Amount of Each Disbursement this Period 5000.00
City New York	State NY	Zip Code 10185-5256
Purpose of Disbursement Candidate Contribution		Category/ Type
Candidate Name HILLARY VICTORY FUND		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. RUBEN KIHUEN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 23 / 2016
Mailing Address PO Box 458		FEC Identification Number C00502773 Transaction ID : VNV499V61J Amount of Each Disbursement this Period 2000.00
City Las Vegas	State NV	Zip Code 89125-0458
Purpose of Disbursement Contribution		Category/ Type
Candidate Name KIHUEN, RUBEN, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District: 04	<input type="checkbox"/> Memo Item

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

9700.00

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 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

Full Name (Last, First, Middle Initial)

A. Stephanie Murphy for Congress

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	4		2	0	1	6		

Mailing Address PO Box 205

FEC Identification Number

C C00620443

Transaction ID : VNV499V4YJ

Amount of Each Disbursement this Period

1500.00

Memo Item

City Winter Park State FL Zip Code 32790-0205

Purpose of Disbursement
Candidate Contribution

Category/Type

Candidate Name
MURPHY, STEPHANIE, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: FL District: 07

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

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

State: District:

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

1500.00

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

13720.16

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

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

FOR LINE NUMBER:
(check only one)

<input 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		Date of Disbursement MM / DD / YYYY 11 / 02 / 2016
Mailing Address PO Box 8999		FEC Identification Number C [REDACTED] Transaction ID : VNV499V4Y9
City San Francisco	State CA	Zip Code 94128-8999
Purpose of Disbursement Credit card processing fee		Amount of Each Disbursement this Period [REDACTED] 40.70
Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> 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. Bank of America		Date of Disbursement MM / DD / YYYY 10 / 20 / 2016
Mailing Address 700 13th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499TV751
City Washington	State DC	Zip Code 20005-3950
Purpose of Disbursement Bank fee		Amount of Each Disbursement this Period [REDACTED] 30.00
Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> 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) C. Bank of America		Date of Disbursement MM / DD / YYYY 10 / 20 / 2016
Mailing Address 700 13th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499TV76
City Washington	State DC	Zip Code 20005-3950
Purpose of Disbursement Bank fee		Amount of Each Disbursement this Period [REDACTED] 15.00
Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> 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)..... ▶

[REDACTED] 85.70
[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. Bank of America		Date of Disbursement MM / DD / YYYY 11 / 02 / 2016
Mailing Address 700 13th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499V4Z3 Amount of Each Disbursement this Period 30.00
City Washington	State DC	Zip Code 20005-3950
Purpose of Disbursement Bank 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. Carefirst Bluecross/Blueshield		Date of Disbursement MM / DD / YYYY 11 / 09 / 2016
Mailing Address 840 1st St NE		FEC Identification Number C [REDACTED] Transaction ID : VNV499V51W Amount of Each Disbursement this Period 694.26
City Washington	State DC	Zip Code 20065-0003
Purpose of Disbursement Health Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Carr Workplace		Date of Disbursement MM / DD / YYYY 11 / 02 / 2016
Mailing Address 1101 Connecticut Ave NW Ste 450		FEC Identification Number C [REDACTED] Transaction ID : VNV499V51C Amount of Each Disbursement this Period 2752.10
City Washington	State DC	Zip Code 20036-4359
Purpose of Disbursement Rent		Category/ Type 001
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).....▶	3476.36
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. ClickMeeting		Date of Disbursement MM / DD / YYYY 11 / 03 / 2016
Mailing Address		FEC Identification Number C [REDACTED]
City	State	Zip Code
Purpose of Disbursement website		001 Category/Type
Candidate Name		Transaction ID : VNV499V51E Amount of Each Disbursement this Period 81.37
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. Collective Conscience, LLC		Date of Disbursement MM / DD / YYYY 11 / 16 / 2016
Mailing Address 2112 8th St NW Apt 524		FEC Identification Number C [REDACTED]
City Washington	State DC	Zip Code 20001-8208
Purpose of Disbursement Digital Communications		001 Category/Type
Candidate Name		Transaction ID : VNV499V5XH Amount of Each Disbursement this Period 560.00
Office Sought: <input type="checkbox"/> 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) C. Collective Conscience, LLC		Date of Disbursement MM / DD / YYYY 11 / 16 / 2016
Mailing Address 2112 8th St NW Apt 524		FEC Identification Number C [REDACTED]
City Washington	State DC	Zip Code 20001-8208
Purpose of Disbursement Digital Communications		001 Category/Type
Candidate Name		Transaction ID : VNV499V5XJ Amount of Each Disbursement this Period 6000.00
Office Sought: <input type="checkbox"/> 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).....▶

6641.37

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. Ellas Wood Fired Pizza		Date of Disbursement MM / DD / YYYY 11 / 14 / 2016	
Mailing Address 610 9th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499V5XF Amount of Each Disbursement this Period 63.63	
City Washington	State DC	Zip Code 20001-5301	Category/ Type
Purpose of Disbursement Meals		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. First Data - Merchant Services		Date of Disbursement MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 1 Western Maryland Pkwy		FEC Identification Number C [REDACTED] Transaction ID : VNV499V5XD Amount of Each Disbursement this Period 1530.25	
City Hagerstown	State MD	Zip Code 21740-5146	Category/ Type
Purpose of Disbursement Credit card 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) ▼		<input type="checkbox"/> Memo Item
State:	District:		

Full Name (Last, First, Middle Initial) C. Fredericks, Laura, , ,		Date of Disbursement MM / DD / YYYY 11 / 15 / 2016	
Mailing Address 130 Barrow St Apt 215		FEC Identification Number C [REDACTED] Transaction ID : VNV499V51V Amount of Each Disbursement this Period 275.00	
City New York	State NY	Zip Code 10014-2857	Category/ Type
Purpose of Disbursement Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1868.88
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. Friends to Elect Carol Rizzo		Date of Disbursement MM / DD / YYYY 11 / 04 / 2016
Mailing Address 1512 Alpen Ln		FEC Identification Number C [REDACTED] Transaction ID : VNV499V51J Amount of Each Disbursement this Period 500.00
City Toms River	State NJ	Zip Code 08755-0834
Purpose of Disbursement Non-federal donation		Category/ Type
Candidate Name Friends to Elect Carol Rizzo		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Google		Date of Disbursement MM / DD / YYYY 11 / 07 / 2016
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] Transaction ID : VNV499V5X9! Amount of Each Disbursement this Period 35.00
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Internet		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Grubhub		Date of Disbursement MM / DD / YYYY 11 / 04 / 2016
Mailing Address		FEC Identification Number C [REDACTED] Transaction ID : VNV499V51K Amount of Each Disbursement this Period 60.90
City	State	Zip Code
Purpose of Disbursement Meals		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).....▶	595.90
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. Harmon, Curran, Spielberg & Eisenberg, LLC		Date of Disbursement MM / DD / YYYY 11 / 16 / 2016
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C Transaction ID : VNV499V51M Amount of Each Disbursement this Period 355.30
City Washington	State DC	
Zip Code 20036-4523		Memo Item <input type="checkbox"/>
Purpose of Disbursement Legal Fees		
Candidate Name		Category/Type 000
Office Sought: <input type="checkbox"/> 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. HOUSE MAJORITY PAC		Date of Disbursement MM / DD / YYYY 10 / 20 / 2016
Mailing Address 700 13th St NW Ste 600		FEC Identification Number C C00495028 Transaction ID : VNV499TVVC Amount of Each Disbursement this Period 50000.00
City Washington	State DC	
Zip Code 20005-5998		Memo Item <input type="checkbox"/>
Purpose of Disbursement Contribution		
Candidate Name HOUSE MAJORITY PAC		Category/Type 000
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Kaiser HPS		Date of Disbursement MM / DD / YYYY 11 / 01 / 2016
Mailing Address 1615 L St NW		FEC Identification Number C Transaction ID : VNV499V61M Amount of Each Disbursement this Period 209.66
City Washington	State DC	
Zip Code 20036-5610		Memo Item <input type="checkbox"/>
Purpose of Disbursement Health Insurance		
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> 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)..... ▶

50564.96

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) A. Kate Brown Committee		Date of Disbursement MM / DD / YYYY 10 / 28 / 2016
Mailing Address PO Box 8069		FEC Identification Number C [REDACTED] Transaction ID : VNV499V51Q
City Portland	State OR	Zip Code 97207-8069
Purpose of Disbursement Candidate Contribution		Amount of Each Disbursement this Period [REDACTED] 2000.00
Candidate Name Kate Brown Committee		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Kight, Kate, , ,		Date of Disbursement MM / DD / YYYY 10 / 31 / 2016
Mailing Address 1629 L St NE Unit 303		FEC Identification Number C [REDACTED] Transaction ID : VNV499V51R
City Washington	State DC	Zip Code 20002-3055
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period [REDACTED] 1278.15
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> 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) C. Kight, Kate, , ,		Date of Disbursement MM / DD / YYYY 11 / 14 / 2016
Mailing Address 1629 L St NE Unit 303		FEC Identification Number C [REDACTED] Transaction ID : VNV499V51T
City Washington	State DC	Zip Code 20002-3055
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period [REDACTED] 1278.14
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> 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)..... ▶

4556.29

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. Kight, Kate, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1629 L St NE
Unit 303

City Washington State DC Zip Code 20002-3055

Purpose of Disbursement Travel expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2016

FEC Identification Number: C

Transaction ID : VNV499V51S

Amount of Each Disbursement this Period: 106.43

Memo Item

B. New York Times

Full Name (Last, First, Middle Initial)

Mailing Address 620 8th Ave

City New York State NY Zip Code 10018-1618

Purpose of Disbursement Subscription

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2016

FEC Identification Number: C

Transaction ID : VNV499V52D:

Amount of Each Disbursement this Period: 37.01

Memo Item

C. NGP VAN

Full Name (Last, First, Middle Initial)

Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 02 / 2016

FEC Identification Number: C

Transaction ID : VNV499V526

Amount of Each Disbursement this Period: 150.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 293.44

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. NGP VAN		Date of Disbursement MM / DD / YYYY 11 / 15 / 2016
Mailing Address 1101 15th St NW Ste 500		FEC Identification Number C [REDACTED] Transaction ID : VNV499V527! Amount of Each Disbursement this Period 1050.00
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Software		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. Olive Street Design		Date of Disbursement MM / DD / YYYY 11 / 03 / 2016
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV499V529! Amount of Each Disbursement this Period 25.00
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Olive Street Design		Date of Disbursement MM / DD / YYYY 11 / 15 / 2016
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV499V528 Amount of Each Disbursement this Period 160.00
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website services		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).....▶	1235.00
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. Olive Street Design		Date of Disbursement MM / DD / YYYY 11 / 16 / 2016	
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV499V52A Amount of Each Disbursement this Period [REDACTED] 2175.00	
City Villa Park	State IL	Zip Code 60181-5502	Category/ Type [REDACTED]
Purpose of Disbursement Website services		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. Paychex		Date of Disbursement MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV499V52E1 Amount of Each Disbursement this Period [REDACTED] 2369.33	
City Rochester	State NY	Zip Code 14625-2311	Category/ Type 001
Purpose of Disbursement Payroll taxes		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) C. Paychex		Date of Disbursement MM / DD / YYYY 10 / 31 / 2016	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV499V52C Amount of Each Disbursement this Period [REDACTED] 98.20	
City Rochester	State NY	Zip Code 14625-2311	Category/ Type 001
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] 4642.53
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 14625-2311

Purpose of Disbursement
Payroll taxes

Category/
Type

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 Y Y
11 / 15 / 2016

FEC Identification Number

Transaction ID : VNV499V52F
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll processing fee

Category/
Type

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 Y Y
11 / 15 / 2016

FEC Identification Number

Transaction ID : VNV499V52H
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. PCMS, LLC

Mailing Address 1050 17th St NW
Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement
Accounting services

Category/
Type

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 Y Y
11 / 16 / 2016

FEC Identification Number

Transaction ID : VNV499V52N
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="4752.53"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE B (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. Pinellas County Democratic Party

Full Name (Last, First, Middle Initial)

Mailing Address 2250 1st Ave N

City Saint Petersburg State FL Zip Code 33713-8817

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2016

FEC Identification Number: C

Transaction ID : VNV499V52P

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Practice Makes Progress

Full Name (Last, First, Middle Initial)

Mailing Address 1875 Connecticut Ave NW
FI 10

City Washington State DC Zip Code 20009-5728

Purpose of Disbursement Digital strategy consultant

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 15 / 2016

FEC Identification Number: C

Transaction ID : VNV499V61N

Amount of Each Disbursement this Period: 5000.00

Memo Item

C. Shipp, Elizabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15955 Frederick Rd
Apt 1308

City Rockville State MD Zip Code 20855-2295

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2016

FEC Identification Number: C

Transaction ID : VNV499V4Z7

Amount of Each Disbursement this Period: 3374.46

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8874.46

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) A. Shipp, Elizabeth, , ,		Date of Disbursement MM / DD / YYYY 11 / 14 / 2016
Mailing Address 15955 Frederick Rd Apt 1308		FEC Identification Number C [REDACTED] Transaction ID : VNV499V4Z6 Amount of Each Disbursement this Period 3374.48
City Rockville	State MD	Zip Code 20855-2295
Purpose of Disbursement Payroll		Category/Type 001
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. Shipp, Elizabeth, , ,		Date of Disbursement MM / DD / YYYY 11 / 15 / 2016
Mailing Address 15955 Frederick Rd Apt 1308		FEC Identification Number C [REDACTED] Transaction ID : VNV499V4Z8 Amount of Each Disbursement this Period 64.29
City Rockville	State MD	Zip Code 20855-2295
Purpose of Disbursement Reimbursement		Category/Type 001
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) C. Simple Texting		Date of Disbursement MM / DD / YYYY 11 / 18 / 2016
Mailing Address 18851 NE 29th Ave Ste 700		FEC Identification Number C [REDACTED] Transaction ID : VNV499V4YC Amount of Each Disbursement this Period 45.00
City Miami	State FL	Zip Code 33180-2845
Purpose of Disbursement Phones		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).....▶	3483.77
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. SkipJack		Date of Disbursement MM / DD / YYYY 11 / 02 / 2016
Mailing Address 8500 Governors Hill Dr		FEC Identification Number C [REDACTED] Transaction ID : VNV499V4YH Amount of Each Disbursement this Period 1185.62
City Symmes Twp	State OH	Zip Code 45249-1384
Purpose of Disbursement Insurance		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Uber Technologies		Date of Disbursement MM / DD / YYYY 10 / 20 / 2016
Mailing Address 182 Howard St Ste 8		FEC Identification Number C [REDACTED] Transaction ID : VNV499TV8P! Amount of Each Disbursement this Period 39.97
City San Francisco	State CA	Zip Code 94105-1611
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) C. Uber Technologies		Date of Disbursement MM / DD / YYYY 10 / 21 / 2016
Mailing Address 182 Howard St Ste 8		FEC Identification Number C [REDACTED] Transaction ID : VNV499TV8C Amount of Each Disbursement this Period 70.20
City San Francisco	State CA	Zip Code 94105-1611
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	

SUBTOTAL of Disbursements This Page (optional).....▶	1295.79
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) A. VSP		Date of Disbursement MM / DD / YYYY 11 / 17 / 2016	
Mailing Address 3333 Quality Dr		FEC Identification Number C [] Transaction ID : VNV499V4YM Amount of Each Disbursement this Period [] 28.88	
City Rancho Cordova	State CA	Zip Code 95670-7985	Category/ Type []
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) ▼		<input type="checkbox"/> Memo Item
State: []	District: []		

Full Name (Last, First, Middle Initial) B. Wildfire Contact		Date of Disbursement MM / DD / YYYY 11 / 16 / 2016	
Mailing Address 818 Connecticut Ave NW Ste 200		FEC Identification Number C [] Transaction ID : VNV499V4YT Amount of Each Disbursement this Period [] 500.00	
City Washington	State DC	Zip Code 20006-2742	Category/ Type []
Purpose of Disbursement Communication Consulting		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) C.		Date of Disbursement MM / DD / YYYY [] / [] / []	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/ Type []
Purpose of Disbursement		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: []		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 528.88
TOTAL This Period (last page this line number only).....▶	[] 92895.86

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) L PAC	FEC IDENTIFICATION NUMBER ▼ C C00519413
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee PRIORITIES USA ACTION * <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2016
Mailing Address 1101 15th St NW Lbby 2	Amount 5000.00
City State Zip Code Washington DC 20005-5002	
Purpose of Expenditure Digital Production Services	
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00 <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
30000.05	5000.00

Full Name of Payee Rivendell Media <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2016
Mailing Address 1248 US Highway 22	Amount 25000.05
City State Zip Code Mountainside NJ 07092-2692	
Purpose of Expenditure Media time buy	
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00 <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
30000.05	25000.05

(a) SUBTOTAL of Itemized Independent Expenditures	25000.05
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	25000.05

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Rosen, Hilary, , , [Electronically Filed]
Signature Date M M / D D / Y Y Y Y Y Y
12 / 08 / 2016