

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Nixon Peabody LLP 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="2017"/>	<input type="text" value="2191.93"/>	<input type="text" value="2191.93"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="11827.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="30808.00"/>	<input type="text" value="64286.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="42635.00"/>	<input type="text" value="66477.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25523.57"/>	<input type="text" value="49366.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="17111.43"/>	<input type="text" value="17111.43"/>
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

Write or Type Committee Name

Nixon Peabody LLP PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	27282.00	51395.00
(ii) Unitemized	3026.00	12391.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	30308.00	63786.00
(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)	30308.00	63786.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	500.00	500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	30808.00	64286.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	30808.00	64286.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1973.57	3966.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1973.57	3966.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23550.00	45400.00
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).....	0.00	0.00
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)) ..	25523.57	49366.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25523.57	49366.50

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)	30308.00	63786.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30308.00	63786.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1973.57	3966.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1973.57	3966.50

**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 6 OF 87
	<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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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)
Nixon Peabody LLP PAC

A. ANDERSON, MARTHA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9135 TONAWANDA CREEK

City CLARENCE CENTER	State NY	Zip Code 14032
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
263.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : SA11AI.12788

Amount of Each Receipt this Period
 65.00

Memo Item

B. ANDERSON, MARTHA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9135 TONAWANDA CREEK

City CLARENCE CENTER	State NY	Zip Code 14032
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
327.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2017
Transaction ID : SA11AI.12855

Amount of Each Receipt this Period
 64.00

Memo Item

C. ANDERSON, MARTHA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9135 TONAWANDA CREEK

City CLARENCE CENTER	State NY	Zip Code 14032
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
391.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2017
Transaction ID : SA11AI.12886

Amount of Each Receipt this Period
 64.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	193.00
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 87
	<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)
Nixon Peabody LLP PAC

A. ANDERSON, MARTHA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9135 TONAWANDA CREEK

City CLARENCE CENTER	State NY	Zip Code 14032
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017
Transaction ID : SA11AI.12917

Amount of Each Receipt this Period
 64.00

Memo Item

B. ANDERSON, MARTHA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9135 TONAWANDA CREEK

City CLARENCE CENTER	State NY	Zip Code 14032
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 519.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2017
Transaction ID : SA11AI.12984

Amount of Each Receipt this Period
 64.00

Memo Item

C. ANDERSON, MARTHA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9135 TONAWANDA CREEK

City CLARENCE CENTER	State NY	Zip Code 14032
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 583.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2017
Transaction ID : SA11AI.13020

Amount of Each Receipt this Period
 64.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	192.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 87
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. BANGHART, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 81ST STREET
 City BURR RIDGE State IL Zip Code 60527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 466.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12789
 Amount of Each Receipt this Period 142.00
 Memo Item

B. BANGHART, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 81ST STREET
 City BURR RIDGE State IL Zip Code 60527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12918
 Amount of Each Receipt this Period 141.00
 Memo Item

C. BOUXSEIN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 MADISON STREET
 City EVANSTON State IL Zip Code 60202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12920
 Amount of Each Receipt this Period 29.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 312.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 87
	(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)
Nixon Peabody LLP PAC

A. BOUXSEIN, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1102 MADISON STREET

City EVANSTON	State IL	Zip Code 60202
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2017

Transaction ID : SA11AI.12985

Amount of Each Receipt this Period
29.00

Memo Item

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

Mailing Address 1102 MADISON STREET

City EVANSTON	State IL	Zip Code 60202
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
263.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2017

Transaction ID : SA11AI.13021

Amount of Each Receipt this Period
29.00

Memo Item

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

Mailing Address 60 SCHOOLHOUSE LANE

City ROCHESTER	State NY	Zip Code 14618
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Transaction ID : SA11AI.12921

Amount of Each Receipt this Period
61.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	119.00
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 10 OF 87
	<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)
Nixon Peabody LLP PAC

A. BURNHAM, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 KIEFER RIDGE DRIVE
 City BALLWIN State MO Zip Code 63021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 493.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : SA11AI.12793
 Amount of Each Receipt this Period
 155.00
 Memo Item

B. BURNHAM, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 KIEFER RIDGE DRIVE
 City BALLWIN State MO Zip Code 63021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 647.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017
Transaction ID : SA11AI.12922
 Amount of Each Receipt this Period
 154.00
 Memo Item

C. CANERDAY, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 943 CRESCENT BLVD
 City GLEN ELLYN State IL Zip Code 60137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017
Transaction ID : SA11AI.12924
 Amount of Each Receipt this Period
 34.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	343.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 87
	<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)
Nixon Peabody LLP PAC

A. CANERDAY, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 943 CRESCENT BLVD
 City GLEN ELLYN State IL Zip Code 60137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt **11 / 30 / 2017**
Transaction ID : SA11AI.12986
 Amount of Each Receipt this Period 34.00
 Memo Item

B. CANERDAY, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 943 CRESCENT BLVD
 City GLEN ELLYN State IL Zip Code 60137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.00

Date of Receipt **12 / 29 / 2017**
Transaction ID : SA11AI.13022
 Amount of Each Receipt this Period 34.00
 Memo Item

C. CHARAMBA, AMELIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CENTRE STREET APT. #4
 City CAMBRIDGE State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12796
 Amount of Each Receipt this Period 202.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 87
	<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)
Nixon Peabody LLP PAC

A. CHARAMBA, AMELIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CENTRE STREET
 APT. #4
 City CAMBRIDGE State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 606.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017
Transaction ID : SA11AI.12925
 Amount of Each Receipt this Period
 202.00
 Memo Item

B. CHRISTMAS, ROBERT, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 CLUB ROAD
 City UPPER MONTCLAIR State NJ Zip Code 07043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2017
Transaction ID : SA11AI.13118
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. COGEN, RICHARD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 RIVERVIEW ROAD
 City REXFORD State NY Zip Code 12148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 329.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : SA11AI.12798
 Amount of Each Receipt this Period
 61.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	463.00
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 87
	<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)
Nixon Peabody LLP PAC

A. COGEN, RICHARD, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 RIVERVIEW ROAD
 City REXFORD State NY Zip Code 12148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 389.00

Date of Receipt 08 / 31 / 2017
Transaction ID : SA11AI.12858
 Amount of Each Receipt this Period 60.00
 Memo Item

B. COGEN, RICHARD, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 RIVERVIEW ROAD
 City REXFORD State NY Zip Code 12148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 449.00

Date of Receipt 09 / 29 / 2017
Transaction ID : SA11AI.12889
 Amount of Each Receipt this Period 60.00
 Memo Item

C. COGEN, RICHARD, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 RIVERVIEW ROAD
 City REXFORD State NY Zip Code 12148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 509.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12927
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 87
	<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)
Nixon Peabody LLP PAC

A. COGEN, RICHARD, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 RIVERVIEW ROAD
 City REXFORD State NY Zip Code 12148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 569.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.12987
 Amount of Each Receipt this Period 60.00
 Memo Item

B. COGEN, RICHARD, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 RIVERVIEW ROAD
 City REXFORD State NY Zip Code 12148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 629.00

Date of Receipt 12 / 29 / 2017
Transaction ID : SA11AI.13023
 Amount of Each Receipt this Period 60.00
 Memo Item

C. COHEN, ALLAN, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 KATHLEEN DR
 City SYOSSET State NY Zip Code 11791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 648.00

Date of Receipt 07 / 31 / 2017
Transaction ID : SA11AI.12799
 Amount of Each Receipt this Period 206.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	326.00
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 87
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	<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)
Nixon Peabody LLP PAC

A. COHEN, ALLAN, H, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 KATHLEEN DR

City SYOSSET	State NY	Zip Code 11791
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
853.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Transaction ID : SA11AI.12928

Amount of Each Receipt this Period
205.00

Memo Item

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

Mailing Address 178 BARD ROAD

City BENNINGTON	State VT	Zip Code 05201
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Transaction ID : SA11AI.12929

Amount of Each Receipt this Period
93.00

Memo Item

C. COHEN, MICHAEL, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2896 BAYVIEW AVENUE

City WANTAGH	State NY	Zip Code 11793
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
317.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : SA11AI.12801

Amount of Each Receipt this Period
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Memo Item

SUBTOTAL of Receipts This Page (optional).....	381.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 16 OF 87
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. COHEN, MICHAEL, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2896 BAYVIEW AVENUE
 City WANTAGH State NY Zip Code 11793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2017
Transaction ID : SA11AI.12859
 Amount of Each Receipt this Period 83.00
 Memo Item

B. COHEN, MICHAEL, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2896 BAYVIEW AVENUE
 City WANTAGH State NY Zip Code 11793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 482.00

Date of Receipt 09 / 29 / 2017
Transaction ID : SA11AI.12890
 Amount of Each Receipt this Period 82.00
 Memo Item

C. COHEN, MICHAEL, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2896 BAYVIEW AVENUE
 City WANTAGH State NY Zip Code 11793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 564.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12930
 Amount of Each Receipt this Period 82.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 247.00
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 87
	<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)
Nixon Peabody LLP PAC

A. COHEN, MICHAEL, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2896 BAYVIEW AVENUE

City WANTAGH	State NY	Zip Code 11793
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
646.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2017

Transaction ID : SA11AI.12988

Amount of Each Receipt this Period
82.00

Memo Item

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

Mailing Address 2896 BAYVIEW AVENUE

City WANTAGH	State NY	Zip Code 11793
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
728.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : SA11AI.13024

Amount of Each Receipt this Period
82.00

Memo Item

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

Mailing Address 10 DOWNING STREET

City EAST GREENWICH	State RI	Zip Code 20818
------------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
211.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2017

Transaction ID : SA11AI.12989

Amount of Each Receipt this Period
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Memo Item

SUBTOTAL of Receipts This Page (optional).....	194.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
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FOR LINE NUMBER: PAGE 18 OF 87
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. COLLIER, STACIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 DOWNING STREET
 City EAST GREENWICH State RI Zip Code 20818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 12 / 29 / 2017
Transaction ID : SA11AI.13025
 Amount of Each Receipt this Period 30.00
 Memo Item

B. COLUMBO, ELIZABETH, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 STAYMAN COURT
 City MANALAPAN State NJ Zip Code 07726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt 07 / 31 / 2017
Transaction ID : SA11AI.12803
 Amount of Each Receipt this Period 218.00
 Memo Item

C. COLUMBO, ELIZABETH, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 STAYMAN COURT
 City MANALAPAN State NJ Zip Code 07726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 655.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12932
 Amount of Each Receipt this Period 218.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 466.00
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 87
	<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)
Nixon Peabody LLP PAC

A. COONEY, MICHAEL, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 PARK STREET NE
 City VIENNA State VA Zip Code 22180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 283.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : SA11AI.12804
 Amount of Each Receipt this Period
 77.00
 Memo Item

B. COONEY, MICHAEL, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 PARK STREET NE
 City VIENNA State VA Zip Code 22180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt
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 08 / 31 / 2017
Transaction ID : SA11AI.12861
 Amount of Each Receipt this Period
 76.00
 Memo Item

C. COONEY, MICHAEL, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 PARK STREET NE
 City VIENNA State VA Zip Code 22180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
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 09 / 29 / 2017
Transaction ID : SA11AI.12892
 Amount of Each Receipt this Period
 76.00
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SUBTOTAL of Receipts This Page (optional).....▶	229.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 87
	<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)
Nixon Peabody LLP PAC

A. COONEY, MICHAEL, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 PARK STREET NE
 City VIENNA State VA Zip Code 22180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 511.00

Date of Receipt
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 10 / 31 / 2017
Transaction ID : SA11AI.12933
 Amount of Each Receipt this Period
 76.00
 Memo Item

B. COONEY, MICHAEL, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 PARK STREET NE
 City VIENNA State VA Zip Code 22180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 587.00

Date of Receipt
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 11 / 30 / 2017
Transaction ID : SA11AI.12990
 Amount of Each Receipt this Period
 76.00
 Memo Item

C. COONEY, MICHAEL, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 PARK STREET NE
 City VIENNA State VA Zip Code 22180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 663.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2017
Transaction ID : SA11AI.13026
 Amount of Each Receipt this Period
 76.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	228.00
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 21 OF 87
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	<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)
Nixon Peabody LLP PAC

A. DAFOE, COLETTE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1668 BEEKMAN PLACE NW

City WASHINGTON	State DC	Zip Code 20009
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
253.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2017

Transaction ID : SA11AI.13119

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 115 7TH STREET, NE

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2017

Transaction ID : SA11AI.13108

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 173 BROMPTON ROAD

City GARDEN CITY	State NY	Zip Code 11530
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
747.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : SA11AI.12805

Amount of Each Receipt this Period
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Memo Item

SUBTOTAL of Receipts This Page (optional).....	717.00
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 22 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<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)
Nixon Peabody LLP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. EGAN, PETER, , ,		Date of Receipt
Mailing Address 173 BROMPTON ROAD		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City GARDEN CITY	State NY	Zip Code 11530
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Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1013.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FAHEY, THOMAS, , ,		Date of Receipt
Mailing Address 9421 S WINCHESTER		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City CHICAGO	State IL	Zip Code 60643
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.12806
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="146.00"/>
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="293.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FAHEY, THOMAS, , ,		Date of Receipt
Mailing Address 9421 S WINCHESTER		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City CHICAGO	State IL	Zip Code 60643
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.12935
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="146.00"/>
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="439.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="558.00"/>
TOTAL 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: PAGE 23 OF 87
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. FEIRMAN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 HALESWORTH DRIVE
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 08 / 31 / 2017
Transaction ID : SA11AI.12862
 Amount of Each Receipt this Period 56.00
 Memo Item

B. FEIRMAN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 HALESWORTH DRIVE
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 29 / 2017
Transaction ID : SA11AI.12893
 Amount of Each Receipt this Period 56.00
 Memo Item

C. FEIRMAN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 HALESWORTH DRIVE
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12936
 Amount of Each Receipt this Period 55.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 167.00
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 24 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. FEIRMAN, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 HALESWORTH DRIVE

City POTOMAC	State MD	Zip Code 20854
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2017

Transaction ID : SA11AI.12991

Amount of Each Receipt this Period
55.00

Memo Item

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

Mailing Address 1101 HALESWORTH DRIVE

City POTOMAC	State MD	Zip Code 20854
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2017

Transaction ID : SA11AI.13027

Amount of Each Receipt this Period
55.00

Memo Item

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

Mailing Address 555 WASHINGTON AVENUE
APT. 3c

City BROOKLYN	State NY	Zip Code 11238
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : SA11AI.12808

Amount of Each Receipt this Period
89.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	199.00
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 25 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GAUTAM, RICHA, , ,		Date of Receipt
Mailing Address 555 WASHINGTON AVENUE APT. 3c		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City BROOKLYN	State NY	Zip Code 11238
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.12937
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period
Occupation (for Individual) ATTORNEY		<input type="text" value="88.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
<input type="text" value="338.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GIBLIN, THOMAS, A, ,		Date of Receipt
Mailing Address 1 AVERY STREET, UNIT 31C		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City BOSTON	State MA	Zip Code 02111
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.12809
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period
Occupation (for Individual) ATTORNEY		<input type="text" value="73.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
<input type="text" value="262.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GIBLIN, THOMAS, A, ,		Date of Receipt
Mailing Address 1 AVERY STREET, UNIT 31C		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City BOSTON	State MA	Zip Code 02111
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.12863
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period
Occupation (for Individual) ATTORNEY		<input type="text" value="73.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
<input type="text" value="335.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="234.00"/>
TOTAL 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 26 OF 87
	<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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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)
Nixon Peabody LLP PAC

A. GIBLIN, THOMAS, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 AVERY STREET, UNIT 31C
 City BOSTON State MA Zip Code 02111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt 09 / 29 / 2017
Transaction ID : SA11AI.12894
 Amount of Each Receipt this Period 73.00
 Memo Item

B. GIBLIN, THOMAS, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 AVERY STREET, UNIT 31C
 City BOSTON State MA Zip Code 02111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12938
 Amount of Each Receipt this Period 72.00
 Memo Item

C. GIBLIN, THOMAS, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 AVERY STREET, UNIT 31C
 City BOSTON State MA Zip Code 02111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 552.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.12992
 Amount of Each Receipt this Period 72.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	217.00
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 27 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. GIBLIN, THOMAS, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 AVERY STREET, UNIT 31C

City BOSTON	State MA	Zip Code 02111
----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
624.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : SA11AI.13028

Amount of Each Receipt this Period
72.00

Memo Item

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

Mailing Address 60 COWDIN CIRCLE

City CHAPPAQUA	State NY	Zip Code 10514
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
284.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2017

Transaction ID : SA11AI.13107

Amount of Each Receipt this Period
200.00

Memo Item

C. GOLDMAN, MICHAEL, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12628 GREENBRIAR ROAD

City POTOMAC	State MD	Zip Code 20854
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : SA11AI.12810

Amount of Each Receipt this Period
252.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	524.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 28 OF 87
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Nixon Peabody LLP PAC

A. GOLDMAN, MICHAEL, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12628 GREENBRIAR ROAD

City POTOMAC	State MD	Zip Code 20854
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
502.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2017

Transaction ID : SA11AI.13109

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 12628 GREENBRIAR ROAD

City POTOMAC	State MD	Zip Code 20854
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
754.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2017

Transaction ID : SA11AI.12939

Amount of Each Receipt this Period
252.00

Memo Item

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

Mailing Address 530 S HEWITT ST, APT 143

City LOS ANGELES	State CA	Zip Code 90013
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
575.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2017

Transaction ID : SA11AI.12811

Amount of Each Receipt this Period
107.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	609.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 87
	<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)
Nixon Peabody LLP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GORDON, JILL, , ,		Date of Receipt
Mailing Address 530 S HEWITT ST, APT 143		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City LOS ANGELES	State CA	Zip Code 90013
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.12864
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="107.00"/>
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="682.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GORDON, JILL, , ,		Date of Receipt
Mailing Address 530 S HEWITT ST, APT 143		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2017"/>
City LOS ANGELES	State CA	Zip Code 90013
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.12895
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="107.00"/>
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="789.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GORDON, JILL, , ,		Date of Receipt
Mailing Address 530 S HEWITT ST, APT 143		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City LOS ANGELES	State CA	Zip Code 90013
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.12940
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="107.00"/>
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="896.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="321.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 87
	<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)
Nixon Peabody LLP PAC

A. GORDON, JILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 530 S HEWITT ST, APT 143

City LOS ANGELES	State CA	Zip Code 90013
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1003.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2017

Transaction ID : SA11AI.12995

Amount of Each Receipt this Period
107.00

Memo Item

B. GORDON, JILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 530 S HEWITT ST, APT 143

City LOS ANGELES	State CA	Zip Code 90013
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1110.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2017

Transaction ID : SA11AI.13029

Amount of Each Receipt this Period
107.00

Memo Item

C. GREEN, LORI, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 BARRINGTON HILLS

City PITTSFORD	State NY	Zip Code 14534
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017

Transaction ID : SA11AI.12941

Amount of Each Receipt this Period
91.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	305.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 87
	<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)
Nixon Peabody LLP PAC

A. HARRIS, PATRICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 TUCKERMAN STREET, NW
 City WASHINGTON State DC Zip Code 20011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2017
Transaction ID : SA11AI.13110
 Amount of Each Receipt this Period 250.00
 Memo Item

B. HOLMES, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22353 LINDEN DRIVE
 City BARRINGTON State IL Zip Code 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 714.00

Date of Receipt 07 / 31 / 2017
Transaction ID : SA11AI.12813
 Amount of Each Receipt this Period 159.00
 Memo Item

C. HOLMES, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22353 LINDEN DRIVE
 City BARRINGTON State IL Zip Code 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 873.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12942
 Amount of Each Receipt this Period 159.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	568.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 87
	<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)
Nixon Peabody LLP PAC

A. HORTON, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 ELMWOOD AVE
 City WILMETTE State IL Zip Code 60091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt **11 / 30 / 2017**
Transaction ID : SA11AI.12997
 Amount of Each Receipt this Period 30.00
 Memo Item

B. HORTON, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 ELMWOOD AVE
 City WILMETTE State IL Zip Code 60091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt **12 / 29 / 2017**
Transaction ID : SA11AI.13030
 Amount of Each Receipt this Period 30.00
 Memo Item

C. JACOBS, CHARLES, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 LINCOLN WOODS LANE
 City BUFFALO State NY Zip Code 14222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12815
 Amount of Each Receipt this Period 97.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	157.00
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 33 OF 87
	<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)
Nixon Peabody LLP PAC

A. JACOBS, CHARLES, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 LINCOLN WOODS LANE

City BUFFALO	State NY	Zip Code 14222
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
492.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2017

Transaction ID : SA11AI.12866

Amount of Each Receipt this Period
97.00

Memo Item

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

Mailing Address 17 LINCOLN WOODS LANE

City BUFFALO	State NY	Zip Code 14222
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2017

Transaction ID : SA11AI.12897

Amount of Each Receipt this Period
96.00

Memo Item

C. JACOBS, CHARLES, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 LINCOLN WOODS LANE

City BUFFALO	State NY	Zip Code 14222
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
684.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Transaction ID : SA11AI.12944

Amount of Each Receipt this Period
96.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	289.00
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 34 OF 87
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. JACOBS, CHARLES, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 LINCOLN WOODS LANE
 City BUFFALO State NY Zip Code 14222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt: 11 / 30 / 2017
Transaction ID : SA11AI.12998
 Amount of Each Receipt this Period: 96.00
 Memo Item

B. JACOBS, CHARLES, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 LINCOLN WOODS LANE
 City BUFFALO State NY Zip Code 14222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 876.00

Date of Receipt: 12 / 29 / 2017
Transaction ID : SA11AI.13031
 Amount of Each Receipt this Period: 96.00
 Memo Item

C. JONES, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 MONTEROY ROAD
 City ROCHESTER State NY Zip Code 14618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt: 09 / 29 / 2017
Transaction ID : SA11AI.12898
 Amount of Each Receipt this Period: 47.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	239.00
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 35 OF 87
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. JONES, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 MONTEROY ROAD
 City ROCHESTER State NY Zip Code 14618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 283.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12945
 Amount of Each Receipt this Period 47.00
 Memo Item

B. JONES, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 MONTEROY ROAD
 City ROCHESTER State NY Zip Code 14618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.12999
 Amount of Each Receipt this Period 47.00
 Memo Item

C. JONES, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 MONTEROY ROAD
 City ROCHESTER State NY Zip Code 14618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt 12 / 29 / 2017
Transaction ID : SA11AI.13032
 Amount of Each Receipt this Period 47.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	141.00
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 87
	<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)
Nixon Peabody LLP PAC

A. KAMEROS, ILANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WEST 48TH ST, APT 11E
 City NEW YORK State NY Zip Code 10036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12946
 Amount of Each Receipt this Period 38.00
 Memo Item

B. KAMEROS, ILANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WEST 48TH ST, APT 11E
 City NEW YORK State NY Zip Code 10036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.13000
 Amount of Each Receipt this Period 38.00
 Memo Item

C. KAMEROS, ILANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WEST 48TH ST, APT 11E
 City NEW YORK State NY Zip Code 10036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 303.00

Date of Receipt 12 / 29 / 2017
Transaction ID : SA11AI.13033
 Amount of Each Receipt this Period 37.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	113.00
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 87
	<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)
Nixon Peabody LLP PAC

A. KELLY, HARRY, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8306 RAMPART CT.
 City ALEXANDRIA State VA Zip Code 22308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 239.00

Date of Receipt 08 / 08 / 2017
Transaction ID : SA11AI.13120
 Amount of Each Receipt this Period 200.00
 Memo Item

B. KELLY, JOHN, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 72 HORATIO STREET, APT 2N
 City NEW YORK State NY Zip Code 10014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 12 / 05 / 2017
Transaction ID : SA11AI.13106
 Amount of Each Receipt this Period 500.00
 Memo Item

C. KRAVITZ, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 WILLARD ROAD
 City BROOKLINE State MA Zip Code 02445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 952.00

Date of Receipt 07 / 31 / 2017
Transaction ID : SA11AI.12818
 Amount of Each Receipt this Period 476.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1176.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 OF 87
	(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)
Nixon Peabody LLP PAC

A. KRAVITZ, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 WILLARD ROAD
 City BROOKLINE State MA Zip Code 02445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1427.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017
Transaction ID : SA11AI.12947
 Amount of Each Receipt this Period
 475.00
 Memo Item

B. KROB, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1121 S. PLYMOUTH CT TOWNHOUSE A
 City CHICAGO State IL Zip Code 60605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2017
Transaction ID : SA11AI.12900
 Amount of Each Receipt this Period
 33.00
 Memo Item

C. KROB, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1121 S. PLYMOUTH CT TOWNHOUSE A
 City CHICAGO State IL Zip Code 60605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017
Transaction ID : SA11AI.12948
 Amount of Each Receipt this Period
 33.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	541.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 87
	<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)
Nixon Peabody LLP PAC

A. KROB, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1121 S. PLYMOUTH CT
TOWNHOUSE A

City CHICAGO	State IL	Zip Code 60605
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2017

Transaction ID : SA11AI.13001

Amount of Each Receipt this Period

33.00

 Memo Item

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

Mailing Address 1121 S. PLYMOUTH CT
TOWNHOUSE A

City CHICAGO	State IL	Zip Code 60605
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : SA11AI.13034

Amount of Each Receipt this Period

33.00

 Memo Item

C. LESK, JEFFREY, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2315 KIMBRO STREET

City ALEXANDRIA	State VA	Zip Code 22307
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2017

Transaction ID : SA11AI.13112

Amount of Each Receipt this Period

700.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	766.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 87
	<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)
Nixon Peabody LLP PAC

A. LEVENSTEIN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2020 PARTRIDGE LANE
 City HIGHLAND PARK State IL Zip Code 60035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 258.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12949
 Amount of Each Receipt this Period 60.00
 Memo Item

B. LEVY, SETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6330 QUEBEC DRIVE
 City LOS ANGELES State CA Zip Code 90068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 642.00

Date of Receipt 07 / 31 / 2017
Transaction ID : SA11AI.12821
 Amount of Each Receipt this Period 321.00
 Memo Item

C. LEVY, SETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6330 QUEBEC DRIVE
 City LOS ANGELES State CA Zip Code 90068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 963.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12950
 Amount of Each Receipt this Period 321.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 702.00
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 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<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)
Nixon Peabody LLP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MASON, CHRISTOPHER, M, ,		Date of Receipt MM / DD / YYYY 07 / 31 / 2017 Transaction ID : SA11AI.12822
Mailing Address 320 E. 72ND STREET APT. 11B		Amount of Each Receipt this Period 67.00
City NEW YORK	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) NIXON PEABODY LLY	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MASON, CHRISTOPHER, M, ,		Date of Receipt MM / DD / YYYY 08 / 31 / 2017 Transaction ID : SA11AI.12870
Mailing Address 320 E. 72ND STREET APT. 11B		Amount of Each Receipt this Period 67.00
City NEW YORK	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) NIXON PEABODY LLY	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MASON, CHRISTOPHER, M, ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2017 Transaction ID : SA11AI.12901
Mailing Address 320 E. 72ND STREET APT. 11B		Amount of Each Receipt this Period 67.00
City NEW YORK	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) NIXON PEABODY LLY	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 335.00	

SUBTOTAL of Receipts This Page (optional).....▶	201.00
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 42 OF 87
	<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)
Nixon Peabody LLP PAC

A. MASON, CHRISTOPHER, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 E. 72ND STREET
 APT. 11B
 City NEW YORK State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12951
 Amount of Each Receipt this Period 67.00
 Memo Item

B. MASON, CHRISTOPHER, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 E. 72ND STREET
 APT. 11B
 City NEW YORK State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.13002
 Amount of Each Receipt this Period 66.00
 Memo Item

C. MASON, CHRISTOPHER, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 E. 72ND STREET
 APT. 11B
 City NEW YORK State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 534.00

Date of Receipt 12 / 29 / 2017
Transaction ID : SA11AI.13035
 Amount of Each Receipt this Period 66.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	199.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 OF 87
	(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
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		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. MCCREARY, JEAN, H, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 BARCHAN DUNE RISE

City VICTOR	State NY	Zip Code 14564
----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : SA11AI.12823

Amount of Each Receipt this Period
108.00

Memo Item

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

Mailing Address 55 BARCHAN DUNE RISE

City VICTOR	State NY	Zip Code 14564
----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Transaction ID : SA11AI.12952

Amount of Each Receipt this Period
108.00

Memo Item

C. MCGUIRK, RICHARD, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 140 CAVERSHAM WOODS

City PITTSFORD	State NY	Zip Code 14534
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Transaction ID : SA11AI.12953

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	251.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 44 OF 87
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. MCGUIRK, RICHARD, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 CAVERSHAM WOODS
 City PITTSFORD State NY Zip Code 14534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.13003
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MCGUIRK, RICHARD, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 CAVERSHAM WOODS
 City PITTSFORD State NY Zip Code 14534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt 12 / 29 / 2017
Transaction ID : SA11AI.13036
 Amount of Each Receipt this Period 34.00
 Memo Item

C. MCNAMARA, NEAL, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 PROSPECT STREET
 City EACH GREENWICH State RI Zip Code 02818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 12 / 29 / 2017
Transaction ID : SA11AI.13037
 Amount of Each Receipt this Period 22.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 91.00
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 45 OF 87
	<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)
Nixon Peabody LLP PAC

A. MORENO, EVELYN, V, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 CATLIN ROAD
 City BROOKLINE State MA Zip Code 02445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 322.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : SA11AI.12826
 Amount of Each Receipt this Period
 116.00
 Memo Item

B. MORENO, EVELYN, V, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 CATLIN ROAD
 City BROOKLINE State MA Zip Code 02445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017
Transaction ID : SA11AI.12955
 Amount of Each Receipt this Period
 115.00
 Memo Item

C. NEULIGHT, SETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 MIDHILL DRIVE
 City MILL VALLEY State CA Zip Code 94941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017
Transaction ID : SA11AI.12957
 Amount of Each Receipt this Period
 33.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	264.00
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 46 OF 87
	<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)
Nixon Peabody LLP PAC

A. NEULIGHT, SETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 MIDHILL DRIVE

City MILL VALLEY	State CA	Zip Code 94941
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2017

Transaction ID : SA11AI.13005

Amount of Each Receipt this Period

33.00

 Memo Item

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

Mailing Address 38 MIDHILL DRIVE

City MILL VALLEY	State CA	Zip Code 94941
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
267.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : SA11AI.13038

Amount of Each Receipt this Period

33.00

 Memo Item

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

Mailing Address 5000 DUBLIN AVE

City OAKLAND	State CA	Zip Code 94602
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2017

Transaction ID : SA11AI.12874

Amount of Each Receipt this Period

47.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	113.00
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 87
	<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
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. PETTY, ROSS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5000 DUBLIN AVE

City OAKLAND	State CA	Zip Code 94602
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
267.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2017

Transaction ID : SA11AI.12905

Amount of Each Receipt this Period
47.00

Memo Item

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

Mailing Address 5000 DUBLIN AVE

City OAKLAND	State CA	Zip Code 94602
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
314.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Transaction ID : SA11AI.12958

Amount of Each Receipt this Period
47.00

Memo Item

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

Mailing Address 5000 DUBLIN AVE

City OAKLAND	State CA	Zip Code 94602
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
361.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2017

Transaction ID : SA11AI.13006

Amount of Each Receipt this Period
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Memo Item

SUBTOTAL of Receipts This Page (optional).....	141.00
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 48 OF 87
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. PETTY, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5000 DUBLIN AVE
 City OAKLAND State CA Zip Code 94602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt **12 / 29 / 2017**
Transaction ID : SA11AI.13039
 Amount of Each Receipt this Period 47.00
 Memo Item

B. PRESCOTT, ANDREW, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 BONNET SHORES ROAD
 City NARRAGANSETT State RI Zip Code 02882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12830
 Amount of Each Receipt this Period 113.00
 Memo Item

C. PRESCOTT, ANDREW, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 BONNET SHORES ROAD
 City NARRAGANSETT State RI Zip Code 02882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 339.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12959
 Amount of Each Receipt this Period 113.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	273.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 49 OF 87
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. PRICE, RICHARD, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9117 ROUEN DRIVE
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt 07 / 31 / 2017
Transaction ID : SA11AI.12831
 Amount of Each Receipt this Period 91.00
 Memo Item

B. PRICE, RICHARD, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9117 ROUEN DRIVE
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 886.00

Date of Receipt 08 / 08 / 2017
Transaction ID : SA11AI.13113
 Amount of Each Receipt this Period 450.00
 Memo Item

C. PRICE, RICHARD, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9117 ROUEN DRIVE
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 977.00

Date of Receipt 08 / 31 / 2017
Transaction ID : SA11AI.12875
 Amount of Each Receipt this Period 91.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 632.00
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 87
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
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A. PRICE, RICHARD, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9117 ROUEN DRIVE
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1067.00

Date of Receipt **09 / 29 / 2017**
Transaction ID : SA11AI.12906
 Amount of Each Receipt this Period 90.00
 Memo Item

B. PRICE, RICHARD, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9117 ROUEN DRIVE
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1157.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12960
 Amount of Each Receipt this Period 90.00
 Memo Item

C. PRICE, RICHARD, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9117 ROUEN DRIVE
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1247.00

Date of Receipt **11 / 30 / 2017**
Transaction ID : SA11AI.13007
 Amount of Each Receipt this Period 90.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 87
	<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)
Nixon Peabody LLP PAC

A. PRICE, RICHARD, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9117 ROUEN DRIVE
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1337.00

Date of Receipt **12 / 29 / 2017**
Transaction ID : SA11AI.13040
 Amount of Each Receipt this Period 90.00
 Memo Item

B. PURSLEY, DENISE, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 RIVIERA DRIVE WEST
 City MASSAPEQUA State NY Zip Code 11758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 627.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12832
 Amount of Each Receipt this Period 232.00
 Memo Item

C. PURSLEY, DENISE, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 RIVIERA DRIVE WEST
 City MASSAPEQUA State NY Zip Code 11758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 858.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12961
 Amount of Each Receipt this Period 231.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	553.00
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 87
	<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)
Nixon Peabody LLP PAC

A. RAPAPORT, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7505 MARBURY ROAD
 City BETHESDA State MD Zip Code 20817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12833
 Amount of Each Receipt this Period 150.00
 Memo Item

B. RAPAPORT, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7505 MARBURY ROAD
 City BETHESDA State MD Zip Code 20817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12962
 Amount of Each Receipt this Period 150.00
 Memo Item

C. REIL, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5635 PINE GLEN ROAD
 City LA CRESCENTA State CA Zip Code 91214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12963
 Amount of Each Receipt this Period 90.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	390.00
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 53 OF 87
	<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)
Nixon Peabody LLP PAC

A. ROBINSON, WILLIAM, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 RIVO ALTO
 City LONG BEACH State CA Zip Code 90803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11Al.12835
 Amount of Each Receipt this Period 87.00
 Memo Item

B. ROBINSON, WILLIAM, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 RIVO ALTO
 City LONG BEACH State CA Zip Code 90803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt **08 / 31 / 2017**
Transaction ID : SA11Al.12876
 Amount of Each Receipt this Period 87.00
 Memo Item

C. ROBINSON, WILLIAM, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 RIVO ALTO
 City LONG BEACH State CA Zip Code 90803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt **09 / 29 / 2017**
Transaction ID : SA11Al.12907
 Amount of Each Receipt this Period 87.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	261.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 54 OF 87
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. ROBINSON, WILLIAM, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 218 RIVO ALTO

City LONG BEACH	State CA	Zip Code 90803
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
629.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2017

Transaction ID : SA11AI.12964

Amount of Each Receipt this Period
87.00

Memo Item

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

Mailing Address 218 RIVO ALTO

City LONG BEACH	State CA	Zip Code 90803
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
716.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2017

Transaction ID : SA11AI.13009

Amount of Each Receipt this Period
87.00

Memo Item

C. ROBINSON, WILLIAM, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 218 RIVO ALTO

City LONG BEACH	State CA	Zip Code 90803
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
802.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : SA11AI.13042

Amount of Each Receipt this Period
86.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	260.00
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 55 OF 87
	<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)
Nixon Peabody LLP PAC

A. ROSE, ANDREW, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 STONEWALL LANE
 City DELMAR State NY Zip Code 12054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 313.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12836
 Amount of Each Receipt this Period 137.00
 Memo Item

B. ROSE, ANDREW, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 STONEWALL LANE
 City DELMAR State NY Zip Code 12054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12965
 Amount of Each Receipt this Period 137.00
 Memo Item

C. ROSENBERG, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 CAROLANNE DRIVE
 City DELMAR State NY Zip Code 12054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12837
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	399.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 56 OF 87
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. ROSENBERG, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 CAROLANNE DRIVE
 City DELMAR State NY Zip Code 12054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12966
 Amount of Each Receipt this Period 125.00
 Memo Item

B. ROTHCHILD, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 LASALLE AVENUE
 City CRANFORD State NJ Zip Code 07016
 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 ▼ 258.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12838
 Amount of Each Receipt this Period 86.00
 Memo Item

C. ROTHCHILD, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 LASALLE AVENUE
 City CRANFORD State NJ Zip Code 07016
 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 ▼ 343.00

Date of Receipt **08 / 31 / 2017**
Transaction ID : SA11AI.12877
 Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 296.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 87
	<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)
Nixon Peabody LLP PAC

A. ROTHCHILD, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 LASALLE AVENUE
 City CRANFORD State NJ Zip Code 07016
 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 ▼
 428.00

Date of Receipt
 09 / 29 / 2017
Transaction ID : SA11AI.12908
 Amount of Each Receipt this Period
 85.00
 Memo Item

B. ROTHCHILD, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 LASALLE AVENUE
 City CRANFORD State NJ Zip Code 07016
 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 ▼
 513.00

Date of Receipt
 10 / 31 / 2017
Transaction ID : SA11AI.12967
 Amount of Each Receipt this Period
 85.00
 Memo Item

C. ROTHCHILD, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 LASALLE AVENUE
 City CRANFORD State NJ Zip Code 07016
 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 ▼
 598.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.13010
 Amount of Each Receipt this Period
 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	255.00
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 58 OF 87
	<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)
Nixon Peabody LLP PAC

A. ROTHCHILD, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 LASALLE AVENUE
 City CRANFORD State NJ Zip Code 07016
 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 ▼ 683.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2017
Transaction ID : SA11AI.13043
 Amount of Each Receipt this Period
 85.00
 Memo Item

B. SAVAGE, TYLER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 ESKER RISE
 City VICTOR State NY Zip Code 14564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NIXON PEABODY LLP ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2017
Transaction ID : SA11AI.12909
 Amount of Each Receipt this Period
 45.00
 Memo Item

C. SAVAGE, TYLER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 ESKER RISE
 City VICTOR State NY Zip Code 14564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NIXON PEABODY LLP ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017
Transaction ID : SA11AI.12968
 Amount of Each Receipt this Period
 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 87
	<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)
Nixon Peabody LLP PAC

A. SAVAGE, TYLER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 ESKER RISE
 City VICTOR State NY Zip Code 14564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 318.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2017
Transaction ID : SA11AI.13011
 Amount of Each Receipt this Period
 45.00
 Memo Item

B. SAVAGE, TYLER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 ESKER RISE
 City VICTOR State NY Zip Code 14564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 363.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2017
Transaction ID : SA11AI.13044
 Amount of Each Receipt this Period
 45.00
 Memo Item

C. SCHNIPPER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 COLONIAL STREET
 City EAST NORTHPORT State NY Zip Code 11731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 258.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2017
Transaction ID : SA11AI.12840
 Amount of Each Receipt this Period
 55.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 60 OF 87
	<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)
Nixon Peabody LLP PAC

A. SCHNIPPER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 COLONIAL STREET

City EAST NORTHPORT	State NY	Zip Code 11731
------------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
313.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2017

Transaction ID : SA11AI.12879

Amount of Each Receipt this Period
55.00

Memo Item

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

Mailing Address 9 COLONIAL STREET

City EAST NORTHPORT	State NY	Zip Code 11731
------------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
368.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2017

Transaction ID : SA11AI.12910

Amount of Each Receipt this Period
55.00

Memo Item

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

Mailing Address 9 COLONIAL STREET

City EAST NORTHPORT	State NY	Zip Code 11731
------------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
423.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Transaction ID : SA11AI.12969

Amount of Each Receipt this Period
55.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	165.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 87
	<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)
Nixon Peabody LLP PAC

A. SCHNIPPER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 COLONIAL STREET

City EAST NORTHPORT	State NY	Zip Code 11731
------------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
478.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2017

Transaction ID : SA11AI.13012

Amount of Each Receipt this Period
55.00

Memo Item

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

Mailing Address 9 COLONIAL STREET

City EAST NORTHPORT	State NY	Zip Code 11731
------------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
533.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2017

Transaction ID : SA11AI.13045

Amount of Each Receipt this Period
55.00

Memo Item

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

Mailing Address 1507 CORCORAN ST, NW

City WASHINGTON	State DC	Zip Code 20009
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2017

Transaction ID : SA11AI.13114

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	360.00
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 62 OF 87
	<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)
Nixon Peabody LLP PAC

A. SCHRIER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 614 BLACKSTONE
 City SAN RAFAEL State CA Zip Code 94903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12970
 Amount of Each Receipt this Period 33.00
 Memo Item

B. SCHRIER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 614 BLACKSTONE
 City SAN RAFAEL State CA Zip Code 94903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.13013
 Amount of Each Receipt this Period 33.00
 Memo Item

C. SCHRIER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 614 BLACKSTONE
 City SAN RAFAEL State CA Zip Code 94903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 267.00

Date of Receipt 12 / 29 / 2017
Transaction ID : SA11AI.13046
 Amount of Each Receipt this Period 33.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	99.00
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 63 OF 87
	<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)
Nixon Peabody LLP PAC

A. SERGIO, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2582 HOLLY MANOR DRIVE
 City FALLS CHURCH State VA Zip Code 22043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 08 / 2017
Transaction ID : SA11AI.13115
 Amount of Each Receipt this Period 700.00
 Memo Item

B. SILVERBERG, KENNETH, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8165 SHIPS CURVE LANE
 City ALEXANDRIA State VA Zip Code 22307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 558.00

Date of Receipt 07 / 31 / 2017
Transaction ID : SA11AI.12843
 Amount of Each Receipt this Period 86.00
 Memo Item

C. SILVERBERG, KENNETH, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8165 SHIPS CURVE LANE
 City ALEXANDRIA State VA Zip Code 22307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 644.00

Date of Receipt 08 / 31 / 2017
Transaction ID : SA11AI.12881
 Amount of Each Receipt this Period 86.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	872.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 87
	<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)
Nixon Peabody LLP PAC

A. SILVERBERG, KENNETH, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8165 SHIPS CURVE LANE
 City ALEXANDRIA State VA Zip Code 22307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt 09 / 29 / 2017
Transaction ID : SA11AI.12912
 Amount of Each Receipt this Period 86.00
 Memo Item

B. SILVERBERG, KENNETH, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8165 SHIPS CURVE LANE
 City ALEXANDRIA State VA Zip Code 22307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 816.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12972
 Amount of Each Receipt this Period 86.00
 Memo Item

C. SILVERBERG, KENNETH, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8165 SHIPS CURVE LANE
 City ALEXANDRIA State VA Zip Code 22307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 902.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.13014
 Amount of Each Receipt this Period 86.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	258.00
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 65 OF 87
	<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)
Nixon Peabody LLP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SILVERBERG, KENNETH, H, ,		Date of Receipt
Mailing Address 8165 SHIPS CURVE LANE		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2017"/>
City ALEXANDRIA	State VA	Zip Code 22307
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.13047
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="86.00"/>
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="988.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SIMONE, REBECCA, , ,		Date of Receipt
Mailing Address 1653 PARKVIEW AVE		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City SEAFORD	State NY	Zip Code 11783
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.12844
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="66.00"/>
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="204.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SIMONE, REBECCA, , ,		Date of Receipt
Mailing Address 1653 PARKVIEW AVE		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City SEAFORD	State NY	Zip Code 11783
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.12973
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="66.00"/>
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="270.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="218.00"/>
TOTAL 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:	PAGE 66 OF 87
	(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)
Nixon Peabody LLP PAC

A. STAUBER, THADDEUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2408 WILSON AVENUE
 City VENICE State CA Zip Code 90291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12845
 Amount of Each Receipt this Period 135.00
 Memo Item

B. STAUBER, THADDEUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2408 WILSON AVENUE
 City VENICE State CA Zip Code 90291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12974
 Amount of Each Receipt this Period 134.00
 Memo Item

C. STEVENS, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6216 GARNETT DRIVE
 City CHEVY CHASE State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12846
 Amount of Each Receipt this Period 126.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	395.00
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 67 OF 87
	<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)
Nixon Peabody LLP PAC

A. STEVENS, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6216 GARNETT DRIVE
 City CHEVY CHASE State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 422.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12975
 Amount of Each Receipt this Period 126.00
 Memo Item

B. SUSSMAN, MONICA, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7924 LAKENHEATH WAY
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1221.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12847
 Amount of Each Receipt this Period 525.00
 Memo Item

C. SUSSMAN, MONICA, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7924 LAKENHEATH WAY
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1721.00

Date of Receipt **08 / 08 / 2017**
Transaction ID : SA11AI.13116
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **1151.00**
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 68 OF 87
	<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)
Nixon Peabody LLP PAC

A. SUSSMAN, MONICA, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7924 LAKENHEATH WAY
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2246.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12976
 Amount of Each Receipt this Period 525.00
 Memo Item

B. TAUBIN, MICHAEL, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 EAST END AVENUE
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1440.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12848
 Amount of Each Receipt this Period 509.00
 Memo Item

C. TAUBIN, MICHAEL, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 EAST END AVENUE
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1949.00

Date of Receipt **10 / 31 / 2017**
Transaction ID : SA11AI.12977
 Amount of Each Receipt this Period 509.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1543.00
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 69 OF 87
	<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)
Nixon Peabody LLP PAC

A. TIDGEWELL, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CASTLEGATE ROAD
 City BALLSTON LAKE State NY Zip Code 12019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.12849
 Amount of Each Receipt this Period 56.00
 Memo Item

B. TIDGEWELL, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CASTLEGATE ROAD
 City BALLSTON LAKE State NY Zip Code 12019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **08 / 31 / 2017**
Transaction ID : SA11AI.12882
 Amount of Each Receipt this Period 56.00
 Memo Item

C. TIDGEWELL, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CASTLEGATE ROAD
 City BALLSTON LAKE State NY Zip Code 12019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt **09 / 29 / 2017**
Transaction ID : SA11AI.12913
 Amount of Each Receipt this Period 56.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	168.00
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 70 OF 87
	<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)
Nixon Peabody LLP PAC

A. TIDGEWELL, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CASTLEGATE ROAD
 City BALLSTON LAKE State NY Zip Code 12019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 387.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017
Transaction ID : SA11AI.12978
 Amount of Each Receipt this Period
 56.00
 Memo Item

B. TIDGEWELL, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CASTLEGATE ROAD
 City BALLSTON LAKE State NY Zip Code 12019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 443.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2017
Transaction ID : SA11AI.13015
 Amount of Each Receipt this Period
 56.00
 Memo Item

C. TIDGEWELL, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CASTLEGATE ROAD
 City BALLSTON LAKE State NY Zip Code 12019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 498.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2017
Transaction ID : SA11AI.13048
 Amount of Each Receipt this Period
 55.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	167.00
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 71 OF 87
	<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)
Nixon Peabody LLP PAC

A. TRIPP, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 SOUTH LINCOLN LANE
 City ARLINGTON HEIGHTS State IL Zip Code 60005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12979
 Amount of Each Receipt this Period 38.00
 Memo Item

B. TRIPP, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 SOUTH LINCOLN LANE
 City ARLINGTON HEIGHTS State IL Zip Code 60005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.13016
 Amount of Each Receipt this Period 38.00
 Memo Item

C. TRIPP, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 SOUTH LINCOLN LANE
 City ARLINGTON HEIGHTS State IL Zip Code 60005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 303.00

Date of Receipt 12 / 29 / 2017
Transaction ID : SA11AI.13049
 Amount of Each Receipt this Period 37.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	113.00
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 72 OF 87
	<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)
Nixon Peabody LLP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. TURNER, SCOTT, M, ,		Date of Receipt
Mailing Address 3455 ELMWOOD AVENUE		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2017"/>
City ROCHESTER	State NY	Zip Code 14610
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.12915
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="41.00"/>
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="205.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TURNER, SCOTT, M, ,		Date of Receipt
Mailing Address 3455 ELMWOOD AVENUE		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City ROCHESTER	State NY	Zip Code 14610
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.12980
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="40.00"/>
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="245.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TURNER, SCOTT, M, ,		Date of Receipt
Mailing Address 3455 ELMWOOD AVENUE		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City ROCHESTER	State NY	Zip Code 14610
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.13017
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="40.00"/>
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="285.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="121.00"/>
TOTAL 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 73 OF 87
	<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)
Nixon Peabody LLP PAC

A. TURNER, SCOTT, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3455 ELMWOOD AVENUE

City ROCHESTER	State NY	Zip Code 14610
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : SA11AI.13050

Amount of Each Receipt this Period
40.00

Memo Item

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

Mailing Address 740 W. WILLOW STREET

City CHICAGO	State IL	Zip Code 60614
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
723.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : SA11AI.12852

Amount of Each Receipt this Period
163.00

Memo Item

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

Mailing Address 740 W. WILLOW STREET

City CHICAGO	State IL	Zip Code 60614
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
886.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2017

Transaction ID : SA11AI.12981

Amount of Each Receipt this Period
163.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	366.00
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 74 OF 87
	<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)
Nixon Peabody LLP PAC

A. WALLACE, STEPHEN, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 309 VIRGINIA AVENUE
 City ALEXANDRIA State VA Zip Code 22302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3103.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.13018
 Amount of Each Receipt this Period 3103.00
 Memo Item

B. WEIKERT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91 TIGER TAIL COURT
 City ORINDA State CA Zip Code 94563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.12982
 Amount of Each Receipt this Period 78.00
 Memo Item

C. WELLER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 PLYMOUTH ROAD
 City DIX HILLS State NY Zip Code 11746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 08 / 31 / 2017
Transaction ID : SA11AI.12885
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3231.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 OF 87
	(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)
Nixon Peabody LLP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WELLER, JAMES, , ,			Date of Receipt
Mailing Address 14 PLYMOUTH ROAD			<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2017"/>
City DIX HILLS	State NY	Zip Code 11746	Transaction ID : SA11AI.12916
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NIXON PEABODY		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="252.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WELLER, JAMES, , ,			Date of Receipt
Mailing Address 14 PLYMOUTH ROAD			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City DIX HILLS	State NY	Zip Code 11746	Transaction ID : SA11AI.12983
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NIXON PEABODY		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="302.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WELLER, JAMES, , ,			Date of Receipt
Mailing Address 14 PLYMOUTH ROAD			<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City DIX HILLS	State NY	Zip Code 11746	Transaction ID : SA11AI.13019
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NIXON PEABODY		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="352.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL 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: PAGE 76 OF 87
(check only one)

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

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WELLER, JAMES, , ,

Mailing Address **14 PLYMOUTH ROAD**

City DIX HILLS	State NY	Zip Code 11746
--------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) NIXON PEABODY	Occupation (for Individual) ATTORNEY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **402.00**

Date of Receipt
12 / 29 / 2017

Transaction ID : SA11AI.13051

Amount of Each Receipt this Period
50.00

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

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
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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 ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	27282.00

**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 77 OF 87
<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)
Nixon Peabody LLP PAC

A. COMMITTEE FOR A DEMOCRATIC HOUSE

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

Mailing Address 202 BONHAM ROAD

City DEDHAM	State MA	Zip Code 02026
----------------	-------------	-------------------

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 ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		17		2017

Transaction ID : SA16.13079

Amount of Each Receipt this Period
500.00

Memo Item
REFUND OF EXCESS CONTRIBUTION

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00

**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)
Nixon Peabody LLP PAC

Full Name (Last, First, Middle Initial) A. JP MORGAN CHASE BANK		Date of Disbursement MM / DD / YYYY 07 / 15 / 2017
Mailing Address CHASE SQUARE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.13053 Amount of Each Disbursement this Period [REDACTED] 78.90
City ROCHESTER	State NY	Zip Code 14692
Purpose of Disbursement BANK FEE		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. JP MORGAN CHASE BANK		Date of Disbursement MM / DD / YYYY 08 / 15 / 2017
Mailing Address CHASE SQUARE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.13061 Amount of Each Disbursement this Period [REDACTED] 83.18
City ROCHESTER	State NY	Zip Code 14692
Purpose of Disbursement BANK FEE		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. JP MORGAN CHASE BANK		Date of Disbursement MM / DD / YYYY 09 / 15 / 2017
Mailing Address CHASE SQUARE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.13066 Amount of Each Disbursement this Period [REDACTED] 76.11
City ROCHESTER	State NY	Zip Code 14692
Purpose of Disbursement BANK FEE		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:	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 238.19
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)
Nixon Peabody LLP PAC

Full Name (Last, First, Middle Initial)

A. JP MORGAN CHASE BANK

Mailing Address CHASE SQUARE

City ROCHESTER State NY Zip Code 14692

Purpose of Disbursement
BANK FEES

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.13078
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. JP MORGAN CHASE BANK

Mailing Address CHASE SQUARE

City ROCHESTER State NY Zip Code 14692

Purpose of Disbursement
BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.13090
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. JP MORGAN CHASE BANK

Mailing Address CHASE SQUARE

City ROCHESTER State NY Zip Code 14692

Purpose of Disbursement
BANK FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.13125
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 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)
Nixon Peabody LLP PAC

A. NIXON PEABODY LLP

Full Name (Last, First, Middle Initial)
Mailing Address 1300 CLINTON SQUARE

City ROCHESTER State NY Zip Code 14604

Purpose of Disbursement PROFESSIONAL FEES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 10 / 2017

FEC Identification Number: C
Transaction ID : SB21B.13055
Amount of Each Disbursement this Period: 416.25

Memo Item

B. NIXON PEABODY LLP

Full Name (Last, First, Middle Initial)
Mailing Address 1300 CLINTON SQUARE

City ROCHESTER State NY Zip Code 14604

Purpose of Disbursement PROFESSIONAL FEES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 28 / 2017

FEC Identification Number: C
Transaction ID : SB21B.13062
Amount of Each Disbursement this Period: 963.11

Memo Item

C. NIXON PEABODY LLP

Full Name (Last, First, Middle Initial)
Mailing Address 1300 CLINTON SQUARE

City ROCHESTER State NY Zip Code 14604

Purpose of Disbursement PROFESSIONAL SERVICES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 06 / 2017

FEC Identification Number: C
Transaction ID : SB21B.13071
Amount of Each Disbursement this Period: 182.32

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1561.68

TOTAL This Period (last page this line number only)..... ▶ 1973.57

**SCHEDULE B (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)
Nixon Peabody LLP PAC

A. BEN CARDIN FOR SENATE

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 21093

City CATONSVILLE State MD Zip Code 21228

Purpose of Disbursement CONTRIBUTION

011
Category/Type

Candidate Name
CARDIN, BENJAMIN L, , ,

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

Date of Disbursement
MM / DD / YYYY
07 / 06 / 2017

FEC Identification Number
C C00411587
Transaction ID : SB23.13052
Amount of Each Disbursement this Period
1000.00

Memo Item

B. BILL CASSIDY FOR US SENATE

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 80505

City BATON ROUGE State LA Zip Code 70898

Purpose of Disbursement CONTRIBUTION

011
Category/Type

Candidate Name
CASSIDY, WILLIAM M, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: LA District: 00

Date of Disbursement
MM / DD / YYYY
10 / 05 / 2017

FEC Identification Number
C C00543983
Transaction ID : SB23.13072
Amount of Each Disbursement this Period
1000.00

Memo Item

C. BILL FOSTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 9104

City AURORA State IL Zip Code 60598

Purpose of Disbursement CONTRIBUTION

011
Category/Type

Candidate Name
FOSTER, BILL, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: IL District: 11

Date of Disbursement
MM / DD / YYYY
12 / 08 / 2017

FEC Identification Number
C C00435099
Transaction ID : SB23.13098
Amount of Each Disbursement this Period
500.00

Memo Item

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

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 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)
Nixon Peabody LLP PAC

A. COMMITTEE FOR A DEMOCRATIC HOUSE

Full Name (Last, First, Middle Initial)

Mailing Address 202 BONHAM ROAD

City DEDHAM State MA Zip Code 02026

Purpose of Disbursement VOIDED CHECK

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MA District:

Date of Disbursement: 07 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB23.13128

Amount of Each Disbursement this Period: - 1000.00

Memo Item

B. COMMITTEE FOR A DEMOCRATIC HOUSE

Full Name (Last, First, Middle Initial)

Mailing Address 202 BONHAM ROAD

City DEDHAM State MA Zip Code 02026

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MA District:

Date of Disbursement: 09 / 22 / 2017

FEC Identification Number: C

Transaction ID : SB23.13071

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. COMMITTEE FOR A DEMOCRATIC SENATE

Full Name (Last, First, Middle Initial)

Mailing Address 10 EAST 39TH STREET SUITE 601

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement VOIDED CHECK

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: IA District:

Date of Disbursement: 07 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB23.13127

Amount of Each Disbursement this Period: - 1000.00

Memo Item

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

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

- 1000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)
Nixon Peabody LLP PAC

Full Name (Last, First, Middle Initial)
A. COMMITTEE TO ELECT BARBARA L'ITALIEN

Date of Disbursement: / /

Mailing Address: PO BOX 1936

City: ANDOVER State: MA Zip Code: 01810

Purpose of Disbursement: CONTRIBUTION Category/Type:

Candidate Name: L'ITALIEN, BARBARA, , ,

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

State: MA District: 03

FEC Identification Number: Transaction ID : **SB23.13084**
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
B. COMMITTEE TO ELECT DAN KOH

Date of Disbursement: / /

Mailing Address: PO BOX 723

City: ANDOVER State: MA Zip Code: 01810

Purpose of Disbursement: CONTRIBUTION Category/Type:

Candidate Name: KOH, DANIEL ARRIGG, , ,

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

State: MA District: 03

FEC Identification Number: C00654509 Transaction ID : **SB23.13103**
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
C. FRIENDS OF CHRIS MURPHY

Date of Disbursement: / /

Mailing Address: PO BOX 127

City: CHESHIRE State: CT Zip Code: 06410

Purpose of Disbursement: CONTRIBUTION Category/Type:

Candidate Name: MURPHY, CHRISTOPHER S MR, , ,

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

State: CT District: 00

FEC Identification Number: S2CT00132 Transaction ID : **SB23.13095**
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 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)
Nixon Peabody LLP PAC

A. FRIENDS OF DAVE JOYCE

Full Name (Last, First, Middle Initial)

Mailing Address 320 KENARDEN DRIVE

City CLEVELAND State OH Zip Code 44143

Purpose of Disbursement CONTRIBUTION

011
Category/Type

Candidate Name JOYCE, DAVID P, , ,

Office Sought: House Senate President
State: OH District: 14

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
08 / 15 / 2017

FEC Identification Number
C C00527457
Transaction ID : SB23.13056
Amount of Each Disbursement this Period
1000.00

Memo Item

B. HATCH ELECTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3986

City WASHINGTON State DC Zip Code 20027

Purpose of Disbursement CONTRIBUTION

Category/Type

Candidate Name HATCH, ORRIN G, , ,

Office Sought: House Senate President
State: UT District: 00

Disbursement For: Primary General Other (specify)

Date of Disbursement
MM / DD / YYYY
09 / 06 / 2017

FEC Identification Number
C C00104752
Transaction ID : SB23.13067
Amount of Each Disbursement this Period
2500.00

Memo Item

C. KAINE FOR VIRGINIA

Full Name (Last, First, Middle Initial)

Mailing Address 1751 POTOMAC GREENS DRIVE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CONTRIBUTION

011
Category/Type

Candidate Name KAINE, TIMOTHY MICHAEL, , ,

Office Sought: House Senate President
State: VA District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
11 / 15 / 2017

FEC Identification Number
C C00495358
Transaction ID : SB23.13088
Amount of Each Disbursement this Period
2000.00

Memo Item

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

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

5500.00

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

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<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)
Nixon Peabody LLP PAC

A. MARKEY COMMITTEE; THE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 120029

City BOSTON State MA Zip Code 02112

Purpose of Disbursement CONTRIBUTION

Candidate Name
MARKEY, EDWARD JOHN MR, , ,

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

State: MA District: 00

Date of Disbursement: 09 / 22 / 2017

FEC Identification Number: C00196774
Transaction ID : SB23.13069
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. MARTIN HEINRICH FOR SENATE

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 25763

City ALBUQUERQUE State NM Zip Code 87125

Purpose of Disbursement CONTRIBUTION

Candidate Name
HEINRICH, MARTIN, , ,

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

State: NM District: 01

Date of Disbursement: 08 / 30 / 2017

FEC Identification Number: C00434563
Transaction ID : SB23.13063
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. MASSACHUSETTS DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)
Mailing Address 11 BEACON ST SUITE 410

City BOSTON State MA Zip Code 02108

Purpose of Disbursement CONTRIBUTION

Candidate Name

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

State: MA District:

Date of Disbursement: 12 / 05 / 2017

FEC Identification Number: C
Transaction ID : SB23.13093
Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2250.00

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

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

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<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)
Nixon Peabody LLP PAC

A. MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

Mailing Address 85 MERRIMAC ST.
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

FEC Identification Number

C C00042622

Transaction ID : SB23.13054

Amount of Each Disbursement this Period

2000.00

Memo Item

B. MASSACHUSETTS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

Mailing Address 85 MERRIMAC ST.
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 13 / 2017

FEC Identification Number

C C00042622

Transaction ID : SB23.13101

Amount of Each Disbursement this Period

1000.00

Memo Item

C. RI DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 6004

City PROVIDENCE State RI Zip Code 02940

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 04 / 2017

FEC Identification Number

C C00136200

Transaction ID : SB23.13091

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

5000.00

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

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

Full Name (Last, First, Middle Initial) A. ROSEN FOR NEVADA		Date of Disbursement MM / DD / YYYY 11 / 06 / 2017
Mailing Address PO BOX 27195		FEC Identification Number C00606939 Transaction ID : SB23.13085
City LAS VEGAS	State NV	Zip Code 89126
Purpose of Disbursement CONTRIBUTION		Category/Type 011
Candidate Name ROSEN, JACKY, , ,		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV District: 00	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. SCHIFF FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 06 / 2017
Mailing Address 777 S. Figueroa St. Suite 4050		FEC Identification Number C00343871 Transaction ID : SB23.13066
City Los Angeles	State CA	Zip Code 90017
Purpose of Disbursement CONTRIBUTION		Category/Type 011
Candidate Name SCHIFF, ADAM, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 29	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. TOM REED FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 12 / 2017
Mailing Address PO BOX 10847		FEC Identification Number C00464032 Transaction ID : SB23.13077
City ROCHESTER	State NY	Zip Code 14610
Purpose of Disbursement CONTRIBUTION		Category/Type 011
Candidate Name		Amount of Each Disbursement this Period 2500.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 23	<input type="checkbox"/> Memo Item	

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

5500.00

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

23550.00