

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 1001 G Street, NW
Suite 800
Washington DC 20001
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00519413 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 11 / 29 / 2016 through [MM] / [DD] / [YYYY] 12 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Rosen, Hilary, , ,
Type or Print Name of Treasurer

Signature of Treasurer Rosen, Hilary, , , [Electronically Filed] Date [MM] / [DD] / [YYYY] 02 / 03 / 2017

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

L PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="92680.76"/>	<input type="text" value="92680.76"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="119065.56"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2445.32"/>	<input type="text" value="1279623.57"/>
(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="121510.88"/>	<input type="text" value="1372304.33"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="56688.62"/>	<input type="text" value="1307482.06"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="64822.26"/>	<input type="text" value="64822.27"/>
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

L PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
11 / 29 / 2016 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	290.32	91885.52
(ii) Unitemized	45.00	6394.01
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	335.32	98279.53
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	11147.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	335.32	109426.53
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	35616.82
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2110.00	1132080.22
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2445.32	1279623.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2445.32	1279623.57

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	1996.79	158754.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1996.79	158754.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	139994.71
24. Independent Expenditures (use Schedule E)	0.00	27022.27
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	52691.83	981710.39
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)) ..	56688.62	1307482.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56688.62	1307482.06

DETAILED SUMMARY PAGE
of Disbursements

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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)	335.32	109426.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	335.32	109426.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1996.79	158754.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	35616.82
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1996.79	123137.87

**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 24
	<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)
L PAC

A. Filardi, Del, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1203
 PO Box1203
 City Truro State MA Zip Code 02666-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Sculptor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2016
Transaction ID : VNW3HF0M2K7
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. York, Beverly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Bean Creek Rd
 Unit 35
 City Scotts Valley State CA Zip Code 95066-4136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2016
Transaction ID : VNW3HF0N1W2
 Amount of Each Receipt this Period
 20.16
 Memo Item

C. York, Beverly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Bean Creek Rd
 Unit 35
 City Scotts Valley State CA Zip Code 95066-4136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2016
Transaction ID : VNW3HF0N237
 Amount of Each Receipt this Period
 20.16
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	290.32
TOTAL This Period (last page this line number only).....	290.32

**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 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Felicio, Diane, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2016
Mailing Address 39 Westchester Rd Address Line 2		Transaction ID : VNW3HF0FCM7
City Jamaica Plain	State MA	Zip Code 02130-3451
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Community Catalyst	Occupation (for Individual) Fundraiser	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1650.00	Non Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Haycox, Karen, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 21 / 2016
Mailing Address 374 7th St # 403		Transaction ID : VNW3HF0MCH3
City Jersey City	State NJ	Zip Code 07302-1805
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) Habitat for Humanity NYC	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.00	Non Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hunt, Kim, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2016
Mailing Address 5514 S Woodlawn Ave		Transaction ID : VNW3HEZSD58
City Chicago	State IL	Zip Code 60637-1636
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) AIDS Foundation of Chicago	Occupation (for Individual) Activist	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 275.00	Non contribution account

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Lewis, Catherine, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2016
Mailing Address 20 Bluhm Rd		Transaction ID : VNW3HF0D1M7
City Fairport	State NY	Zip Code 14450-9450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	Non Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Newstat, Joyce, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2016
Mailing Address 1200 California St # 27		Transaction ID : VNW3HF0GYX4
City San Francisco	State CA	Zip Code 94109-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer (for Individual) Self	Occupation (for Individual) Policy consultant	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 27475.00	Non Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pawlitschek, Jennifer, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2016
Mailing Address 1621 65th St Apt D3		Transaction ID : VNW3HF02JM8
City Brooklyn	State NY	Zip Code 11204-3620
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Self-employed, The Jasprizza Group	Occupation (for Individual) Communications Training	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 360.00	Non Contribution Account

SUBTOTAL of Receipts This Page (optional).....	130.00
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 9 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Podlodowski, Tina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1620 7th Ave W
 City Seattle State WA Zip Code 98119-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 08 / 2016**
Transaction ID : VNW3HF0D2A0
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non Contribution Account

B. Podlodowski, Tina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1620 7th Ave W
 City Seattle State WA Zip Code 98119-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **12 / 14 / 2016**
Transaction ID : VNW3HF0FJ10
 Amount of Each Receipt this Period 75.00
 Memo Item
 Non Contribution Account

C. Shepardson, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 Warren St Apt 3
 City New Haven State CT Zip Code 06511-5765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Yale Occupation (for Individual) Development Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 03 / 2016**
Transaction ID : VNW3HF0D7T7
 Amount of Each Receipt this Period 300.00
 Memo Item
 Non contribution account

SUBTOTAL of Receipts This Page (optional).....	625.00
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 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Stark, Martha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 Union St
 Apt 2D
 City Brooklyn State NY Zip Code 11215-1619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Baruch College City University Occupation (for Individual) Attorney/Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 12 / 21 / 2016
Transaction ID : VNW3HF0MGV1
 Amount of Each Receipt this Period 50.00
 Memo Item
 Non Contribution Account

B. Thibeault, Kim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 High St
 Apt 4
 City Medway State MA Zip Code 02053-1654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Barber
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 10 / 2016
Transaction ID : VNW3HF0E522
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non Contribution Account

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
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	1590.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)

A. First Data - Merchant Services

Mailing Address 1 Western Maryland Pkwy

City Hagerstown State MD Zip Code 21740-5146

Purpose of Disbursement
Credit card processing fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2016

FEC Identification Number

C
Transaction ID : VNV499V806!
Amount of Each Disbursement this Period
262.72

Memo Item

Full Name (Last, First, Middle Initial)

B. Harmon, Curran, Spielberg & Eisenberg, LLC

Mailing Address 1726 M St NW
Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement
Legal Fees

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2016

FEC Identification Number

C
Transaction ID : VNV499V809!
Amount of Each Disbursement this Period
633.51

Memo Item

Full Name (Last, First, Middle Initial)

C. PCMS, LLC

Mailing Address 1050 17th St NW
Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement
Accounting services

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2016

FEC Identification Number

C
Transaction ID : VNV499V80C
Amount of Each Disbursement this Period
996.88

Memo Item

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

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

1893.11

1893.11

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)
A. PRAMILA FOR CONGRESS

Mailing Address PO Box 20753

City Seattle State WA Zip Code 98102-1753

Purpose of Disbursement
Candidate Contribution (debt retirement)

Candidate Name
JAYAPAL, PRAMILA, , ,

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

State: WA District: 07

Date of Disbursement
MM / DD / YYYY
12 / 16 / 2016

FEC Identification Number
C C00605592
Transaction ID : VNV499V80S
Amount of Each Disbursement this Period
1000.00
General Debt 2016
 Memo Item

Full Name (Last, First, Middle Initial)
B. PRAMILA FOR CONGRESS

Mailing Address PO Box 20753

City Seattle State WA Zip Code 98102-1753

Purpose of Disbursement
Candidate Contribution (debt retirement)

Candidate Name
JAYAPAL, PRAMILA, , ,

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

State: WA District: 07

Date of Disbursement
MM / DD / YYYY
12 / 20 / 2016

FEC Identification Number
C C00605592
Transaction ID : VNV499VD6Y
Amount of Each Disbursement this Period
1000.00
General Debt 2016
 Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

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

TOTAL This Period (last page this line number only)..... ▶ 2000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement MM / DD / YYYY 12 / 03 / 2016	
Mailing Address PO Box 8999		FEC Identification Number C [REDACTED] Transaction ID : VNV499V7ZS	
City San Francisco	State CA	Zip Code 94128-8999	Amount of Each Disbursement this Period [REDACTED] 40.70
Purpose of Disbursement Credit card processing fee		Category/Type [REDACTED]	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement MM / DD / YYYY 12 / 07 / 2016	
Mailing Address 700 13th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499V7ZT	
City Washington	State DC	Zip Code 20005-3950	Amount of Each Disbursement this Period [REDACTED] 15.00
Purpose of Disbursement Bank fee		Category/Type [REDACTED]	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Carefirst Bluecross/Blueshield		Date of Disbursement MM / DD / YYYY 12 / 02 / 2016	
Mailing Address 840 1st St NE		FEC Identification Number C [REDACTED] Transaction ID : VNV499V7ZZ	
City Washington	State DC	Zip Code 20065-0003	Amount of Each Disbursement this Period [REDACTED] 694.26
Purpose of Disbursement Health Insurance		Category/Type [REDACTED]	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 749.96
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)

A. Carr Workplace

Mailing Address 1101 Connecticut Ave NW
Ste 450

City Washington State DC Zip Code 20036-4359

Purpose of Disbursement
Rent

001
Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : VNV499V800f
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ClickMeeting

Mailing Address ul. Arkonska 6
A4 80-387

City Gdansk State Po Zip Code

Purpose of Disbursement
website

001
Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : VNV499V801f
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Collective Conscience, LLC

Mailing Address 2112 8th St NW
Apt 524

City Washington State DC Zip Code 20001-8208

Purpose of Disbursement
Digital Communications

001
Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : VNV499V802
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Collective Conscience, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 2112 8th St NW
Apt 524

City Washington State DC Zip Code 20001-8208

Purpose of Disbursement Digital Communications

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 16 / 2016

FEC Identification Number: C

Transaction ID : VNV499V803

Amount of Each Disbursement this Period: 1386.86

Memo Item

B. First Data - Merchant Services

Full Name (Last, First, Middle Initial)

Mailing Address 1 Western Maryland Pkwy

City Hagerstown State MD Zip Code 21740-5146

Purpose of Disbursement Credit card processing fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2016

FEC Identification Number: C

Transaction ID : VNV499V807

Amount of Each Disbursement this Period: 84.69

Memo Item

C. Google

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Internet

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : VNV499V808

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1506.55

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Harmon, Curran, Spielberg & Eisenberg, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1726 M St NW
Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement Legal Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 16 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80A

Amount of Each Disbursement this Period: 366.00

Memo Item

B. Kaiser HPS

Full Name (Last, First, Middle Initial)

Mailing Address 1615 L St NW

City Washington State DC Zip Code 20036-5610

Purpose of Disbursement Health Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 01 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80E

Amount of Each Disbursement this Period: 209.66

Memo Item

C. Kight, Kate, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1629 L St NE
Unit 303

City Washington State DC Zip Code 20002-3055

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 30 / 2016

FEC Identification Number: C

Transaction ID : VNV499V7ZV

Amount of Each Disbursement this Period: 1278.14

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1853.80

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Kight, Kate, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1629 L St NE
Unit 303

City Washington State DC Zip Code 20002-3055

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 15 / 2016

FEC Identification Number: C

Transaction ID : VNV499V7ZX

Amount of Each Disbursement this Period: 1278.14

Memo Item

B. Kight, Kate, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1629 L St NE
Unit 303

City Washington State DC Zip Code 20002-3055

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 30 / 2016

FEC Identification Number: C

Transaction ID : VNV499V8Y6I

Amount of Each Disbursement this Period: 1278.15

Memo Item

C. Maestro Conference

Full Name (Last, First, Middle Initial)

Mailing Address 1025 3rd St

City Oakland State CA Zip Code 94607-2507

Purpose of Disbursement Conference line service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 13 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80F

Amount of Each Disbursement this Period: 97.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2653.29

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Micioni, Maria, , ,			Date of Disbursement MM / DD / YYYY 12 / 05 / 2016		
Mailing Address 68 Bradhurst Ave Apt 7M			FEC Identification Number C		
City New York		State NY	Zip Code 10039-3311		Transaction ID : VNV499V80G
Purpose of Disbursement Event expense - Interpreter			Amount of Each Disbursement this Period 300.00		
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. Mida, Jason, , ,			Date of Disbursement MM / DD / YYYY 11 / 30 / 2016		
Mailing Address 526 12th St NE			FEC Identification Number C		
City Washington		State DC	Zip Code 20002-6310		Transaction ID : VNV499V64Zi
Purpose of Disbursement Fundraising consultant			Amount of Each Disbursement this Period 10000.00		
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. New York Times			Date of Disbursement MM / DD / YYYY 12 / 13 / 2016		
Mailing Address 620 8th Ave			FEC Identification Number C		
City New York		State NY	Zip Code 10018-1618		Transaction ID : VNV499V80J
Purpose of Disbursement Subscription			Amount of Each Disbursement this Period 37.01		
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).....▶	10337.01
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Nopa Kitchen		Date of Disbursement MM / DD / YYYY 12 / 13 / 2016	
Mailing Address 800 F St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499V80K Amount of Each Disbursement this Period [REDACTED] 578.40	
City Washington	State DC	Zip Code 20004-1505	Category/ Type [REDACTED]
Purpose of Disbursement Meals		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Olive Street Design		Date of Disbursement MM / DD / YYYY 12 / 15 / 2016	
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV499V80M Amount of Each Disbursement this Period [REDACTED] 25.00	
City Villa Park	State IL	Zip Code 60181-5502	Category/ Type [REDACTED]
Purpose of Disbursement Website services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV499V52J Amount of Each Disbursement this Period [REDACTED] 98.20	
City Rochester	State NY	Zip Code 14625-2311	Category/ Type 001
Purpose of Disbursement Payroll processing fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

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

[REDACTED] 701.60
[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement Payroll taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2016

FEC Identification Number: C

Transaction ID : VNV499V64T

Amount of Each Disbursement this Period: 2369.32

Memo Item

B. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement Payroll taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80N

Amount of Each Disbursement this Period: 2209.09

Memo Item

C. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement Payroll processing fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80P

Amount of Each Disbursement this Period: 148.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4726.61

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement MM / DD / YYYY 12 / 27 / 2016	
Mailing Address 911 Panorama Trl S			
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll processing fee		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/Type	Transaction ID : VNV499V8YN
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period <input type="text" value="98.20"/>
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 12 / 27 / 2016	
Mailing Address 911 Panorama Trl S			
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll taxes		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/Type	Transaction ID : VNV499V8YP
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period <input type="text" value="1723.48"/>
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PCMS, LLC		Date of Disbursement MM / DD / YYYY 12 / 16 / 2016	
Mailing Address 1050 17th St NW Ste 590			
City Washington	State DC	Zip Code 20036-5592	
Purpose of Disbursement Accounting services		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/Type	Transaction ID : VNV499V80R
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period <input type="text" value="1935.11"/>
State: District:			<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="3756.79"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Practice Makes Progress

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1875 Connecticut Ave NW
FI 10

M M M	/	D D D	/	Y Y Y Y Y
12		16		2016

City Washington State DC Zip Code 20009-5728

FEC Identification Number

Purpose of Disbursement
Digital strategy consultant

C

Candidate Name

001
Category/ Type

Transaction ID : VNV499V80C
Amount of Each Disbursement this Period

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

10000.00

Memo Item

B. Practice Makes Progress

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1875 Connecticut Ave NW
FI 10

M M M	/	D D D	/	Y Y Y Y Y
12		16		2016

City Washington State DC Zip Code 20009-5728

FEC Identification Number

Purpose of Disbursement
Void check issued 11/15

C

Candidate Name

001
Category/ Type

Transaction ID : VNV499V80D
Amount of Each Disbursement this Period

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

-5000.00

Memo Item

C. Seamless

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1065 Avenue Of The Americas

M M M	/	D D D	/	Y Y Y Y Y
12		14		2016

City New York State NY Zip Code 10018-1878

FEC Identification Number

Purpose of Disbursement
Catering

C

Candidate Name

Category/ Type

Transaction ID : VNV499V80T
Amount of Each Disbursement this Period

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

490.51

Memo Item

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

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

5490.51

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

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

FOR LINE NUMBER:
(check only one)

21b 22 23 26 27
 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Shipp, Elizabeth, , ,				Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 15955 Frederick Rd 1308				FEC Identification Number C Transaction ID : VNV499V64X Amount of Each Disbursement this Period 3374.47	
City Rockville	State MD	Zip Code 20855-2286			
Purpose of Disbursement Payroll			001	Memo Item <input type="checkbox"/>	
Candidate Name			Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Shipp, Elizabeth, , ,				Date of Disbursement MM / DD / YYYY 12 / 14 / 2016	
Mailing Address 15955 Frederick Rd 1308				FEC Identification Number C Transaction ID : VNV499V8Y4 Amount of Each Disbursement this Period 3454.55	
City Rockville	State MD	Zip Code 20855-2286			
Purpose of Disbursement Payroll			001	Memo Item <input type="checkbox"/>	
Candidate Name			Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Shipp, Elizabeth, , ,				Date of Disbursement MM / DD / YYYY 12 / 30 / 2016	
Mailing Address 15955 Frederick Rd 1308				FEC Identification Number C Transaction ID : VNV499V8Y5 Amount of Each Disbursement this Period 3697.39	
City Rockville	State MD	Zip Code 20855-2286			
Purpose of Disbursement Payroll			001	Memo Item <input type="checkbox"/>	
Candidate Name			Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional)..... ▶	10526.41
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
L PAC

A. Simple Texting

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2016

Mailing Address 18851 NE 29th Ave
Ste 700

FEC Identification Number

C [Redacted]
Transaction ID : VNV499V80V
Amount of Each Disbursement this Period
[Redacted] 45.00

City Miami State FL Zip Code 33180-2845

Purpose of Disbursement
Phones

[Redacted]
Category/
Type

Candidate Name

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

Memo Item

State: District:

B. SkipJack

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2016

Mailing Address 8500 Governors Hill Dr

FEC Identification Number

C [Redacted]
Transaction ID : VNV499V80W
Amount of Each Disbursement this Period
[Redacted] 1185.62

City Symmes Twp State OH Zip Code 45249-1384

Purpose of Disbursement
Insurance

001
Category/
Type

Candidate Name

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

Memo Item

State: District:

C. VSP

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2016

Mailing Address 3333 Quality Dr

FEC Identification Number

C [Redacted]
Transaction ID : VNV499V80Y
Amount of Each Disbursement this Period
[Redacted] 28.88

City Rancho Cordova State CA Zip Code 95670-7985

Purpose of Disbursement
Insurance

[Redacted]
Category/
Type

Candidate Name

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

Memo Item

State: District:

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

[Redacted] 1259.50

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

[Redacted] 52457.66