

**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

Immigrants' List

ADDRESS (number and street)

2001 S Street, NW

Suite 550

Check if different  
than previously  
reported. (ACC)

Washington

DC

20009

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00430280

3. IS THIS  
REPORTNEW  
(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

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

[ ]

(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

[ ]

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer Mr Ira Kurzban

Signature of Treasurer

Mr Ira Kurzban

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Immigrants' List

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y Y Y 09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2014		23709.40
(b) Cash on Hand at Beginning of Reporting Period.....	20193.77	
(c) Total Receipts (from Line 19) .....	10155.73	62440.04
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	30349.50	86149.44
7. Total Disbursements (from Line 31) .....	25759.98	81559.92
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	4589.52	4589.52
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Immigrants' List**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
07 / 01 / 2014

To:

M M / D D / Y Y Y Y  
09 / 30 / 2014
**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).....**

9200.00

53975.00

**(ii) Unitemized .....**

955.00

8463.00

**(iii) TOTAL (add**

Lines 11(a)(i) and (ii)..... ►

10155.00

62438.00

**(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) ..... ►

10155.00

62438.00

**12. Transfers From Affiliated/Other**

Party Committees.....

0.00

0.00

**13. All Loans Received .....**

0.00

0.00

**14. Loan Repayments Received.....**

0.00

0.00

**15. Offsets To Operating Expenditures**

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

**16. Refunds of Contributions Made**

to Federal Candidates and Other

Political Committees.....

0.00

0.00

**17. Other Federal Receipts**

(Dividends, Interest, etc.).....

0.73

2.04

**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))..... ►**

10155.73

62440.04

**20. Total Federal Receipts**

(subtract Line 18(c) from Line 19) ..... ►

10155.73

62440.04

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	13009.98	63809.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	13009.98	63809.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12750.00	17750.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25759.98	81559.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25759.98	81559.92

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	10155.00	62438.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10155.00	62438.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	13009.98	63809.92
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	13009.98	63809.92

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

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

FOR LINE NUMBER: PAGE 6 OF 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**Immigrants' List**

Full Name (Last, First, Middle Initial)

## **A. Royal Berg**

Mailing Address 33 N. La Salle Street  
Suite 2300

City State Zip Code  
Chicago IL 60602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Law Offices of Royal Berg

Occupation

Immigration Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 25 / 2014

**Transaction ID : C8989483**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. Royal Berg**

Mailing Address 33 N. La Salle Street  
Suite 2300

City State Zip Code  
Chicago IL 60602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Law Offices of Royal Berg

Occupation

Immigration Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : C9075809**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **C. Lori Chesser**

Mailing Address 3612 Adams Ave.

City State Zip Code  
Des Moines IA 50310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Davis Brown Law Firm

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 25 / 2014

**Transaction ID : C8989485**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

800.00

# **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 7 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**Immigrants' List**

Full Name (Last, First, Middle Initial)

**A. Robert Gibbs**

Mailing Address 21901 Vashon Hwy SW  
Suite 1600

City Vashon State WA Zip Code 98070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self employed

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 14 / 2014

**Transaction ID : C8888328**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Robert Gibbs**

Mailing Address 21901 Vashon Hwy SW  
Suite 1600

City Vashon State WA Zip Code 98070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self employed

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 12 / 2014

**Transaction ID : C8968710**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Robert Gibbs**

Mailing Address 21901 Vashon Hwy SW  
Suite 1600

City Vashon State WA Zip Code 98070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self employed

Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 12 / 2014

**Transaction ID : C9080038**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00

# **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 8 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**Immigrants' List**

Full Name (Last, First, Middle Initial)

**A. Amy Novick**

Mailing Address 1555 Connecticut Ave., NW #200

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Haynes Novick Immigration

Occupation

Immigration Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

MM / DD / YYYY  
 07 / 01 / 2014

**Transaction ID : C8888325**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Gordon Quan**

Mailing Address 2 W. Terrace

City State Zip Code  
 Houston TX 77007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Foster Quan

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
 07 / 22 / 2014

**Transaction ID : C8927236**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Ted Ruthizer**

Mailing Address 522 West End Avenue  
 Apt. 10A

City State Zip Code  
 New York NY 10024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kramer Levin Naftalis & Frankel LLP

Occupation

Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
 09 / 11 / 2014

**Transaction ID : C9017980**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2000.00



# **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 9 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**Immigrants' List**

Full Name (Last, First, Middle Initial)

## **A. Denyse Sabagh**

Mailing Address 1728 Lamont St NW  
N.W.

City State Zip Code  
Washington DC 20010-2602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Duane Morris

Occupation

attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2014

**Transaction ID : C8888371**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Marcine Seid**

Mailing Address 1530 The Alameda #310  
Suite 310

City State Zip Code  
San Jose CA 95126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Law Offices of Marcine Seid

Occupation

Immigration Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2014

**Transaction ID : C8888330**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Marcine Seid**

Mailing Address 1530 The Alameda #310  
Suite 310

City State Zip Code  
San Jose CA 95126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Law Offices of Marcine Seid

Occupation

Immigration Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 18 / 2014

**Transaction ID : C8968706**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

5500.00

# **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 10 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**Immigrants' List**

Full Name (Last, First, Middle Initial)

**A. Vera Weisz**

Mailing Address 9911 W Pico Blvd

City

Los Angeles

State

CA

Zip Code

90035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Law Office of Vera A Weisz

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2014

**Transaction ID : C8860954**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Vera Weisz**

Mailing Address 9911 W Pico Blvd

City

Los Angeles

State

CA

Zip Code

90035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Law Office of Vera A Weisz

Occupation

Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2014

**Transaction ID : C9037659**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

600.00

9200.00

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

## Immigrants' List

2777.12

4329.70

3500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 15

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 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)

**Immigrants' List**

Full Name (Last, First, Middle Initial)

**A. Cybersource**

Mailing Address 1295 Charleston Rd.

City Mountain View      State CA      Zip Code 94043

Purpose of Disbursement  
Credit card processing fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 03 / 2014
**Transaction ID : D579864**

Amount of Each Disbursement this Period

100.74

Full Name (Last, First, Middle Initial)

**B. Cybersource**

Mailing Address 1295 Charleston Rd.

City Mountain View      State CA      Zip Code 94043

Purpose of Disbursement  
Credit card processing fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 02 / 2014
**Transaction ID : D577894**

Amount of Each Disbursement this Period

75.85

Full Name (Last, First, Middle Initial)

**C. Cybersource**

Mailing Address 1295 Charleston Rd.

City Mountain View      State CA      Zip Code 94043

Purpose of Disbursement  
Credit card processing fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 04 / 2014
**Transaction ID : D578561**

Amount of Each Disbursement this Period

48.74

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

225.33

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 15

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 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)

**Immigrants' List**

Full Name (Last, First, Middle Initial)

**A. NGP VAN INC**Mailing Address 1101 15th Street NW  
#500

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Quarterly fee for NGP Campaign Software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 28 2014**Transaction ID : D578940**

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**B. Sandler, Reiff, Young & Lamb, P.C.**Mailing Address 1025 Vermont Ave, N.W.  
Ste 300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 01 2014**Transaction ID : D577890**

Amount of Each Disbursement this Period

1170.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

1920.00

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

12752.15

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 15

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

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

NAME OF COMMITTEE (In Full)

**Immigrants' List**

Full Name (Last, First, Middle Initial)

**A. Bruce Braley for Iowa**

Mailing Address PO Box 856

City	State	Zip Code
Des Moines	IA	50304-0856

Purpose of Disbursement  
Campaign contribution

Candidate Name

**Bruce L Braley**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

**Transaction ID : D584698**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. DUCKWORTH FOR CONGRESS**

Mailing Address P.O. BOX 59568

City	State	Zip Code
SCHAUMBURG	IL	60159

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**L. TAMMY DUCKWORTH**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		18		2014

**Transaction ID : D578734**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Mowrer for Iowa**

Mailing Address PO Box 9

City	State	Zip Code
Boone	IA	50036

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**Jim Mowrer**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

**Transaction ID : D583013**

Amount of Each Disbursement this Period

5000.00
---------

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

7000.00
---------

--

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 15

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

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

NAME OF COMMITTEE (In Full)

**Immigrants' List**

Full Name (Last, First, Middle Initial)

**A. Recchia for Congress**

Mailing Address 172 Gravesend Neck Road

City	State	Zip Code
Brooklyn	NY	11223

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**Domenic M. Recchia Jr.**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2014

**Transaction ID : D571604**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Recchia for Congress**

Mailing Address 172 Gravesend Neck Road

City	State	Zip Code
Brooklyn	NY	11223

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**Domenic M. Recchia Jr.**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D581975**

Amount of Each Disbursement this Period

750.00
--------

Full Name (Last, First, Middle Initial)

**C. Udall for Colorado**

Mailing Address PO Box 40158

City	State	Zip Code
Denver	CO	80204-0158

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**Mark E Udall**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

**Transaction ID : D583005**

Amount of Each Disbursement this Period

2500.00
---------

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

5750.00
---------

12750.00
----------