

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 POWERPACPLUS

ADDRESS (number and street) 268 Bush Street Unit4409 San Francisco CA 94104

2. FEC IDENTIFICATION NUMBER C C00516500 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 Year-End Report (YE) (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 11 / 25 / 2014 through 12 / 31 / 2014

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 Lisa Le

Signature of Treasurer Lisa Le [Electronically Filed] Date 01 / 18 / 2015

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

POWERPACPLUS

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="2014"/>		21303.87
(b) Cash on Hand at Beginning of Reporting Period.....	26042.01	
(c) Total Receipts (from Line 19)	566.00	59077.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	26608.01	80380.87
7. Total Disbursements (from Line 31).....	47.77	53820.63
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	26560.24	26560.24
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	3856.25	

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

POWERPACPLUS

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).....	311.00	11168.00
(ii) Unitemized	230.00	2858.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	541.00	14026.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	300.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	541.00	14326.00
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.).....	25.00	44751.00
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))..... ▶	566.00	59077.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	566.00	59077.00

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	45.51	227.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	45.51	227.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5500.00
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	370.00
(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	370.00
29. Other Disbursements	2.26	47723.46
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)) ..	47.77	53820.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47.77	53820.63

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)	541.00	14326.00
34. Total Contribution Refunds (from Line 28(d))	0.00	370.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	541.00	13956.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	45.51	227.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	45.51	227.17

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

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

NAME OF COMMITTEE (In Full)
POWERPACPLUS

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Receipt
Mailing Address P.O. Box 382110		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City Cambridge	State MA	Zip Code 02238-2110
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.10483
Name of Employer		Amount of Each Receipt this Period <input type="text" value="134.47"/>
Occupation		Total earmarked through conduit; PAC limit not affected.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]
Aggregate Year-to-Date ▼ <input type="text"/>		

Full Name (Last, First, Middle Initial) B. ActBlue		Date of Receipt
Mailing Address P.O. Box 382110		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City Cambridge	State MA	Zip Code 02238-2110
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.10484
Name of Employer		Amount of Each Receipt this Period <input type="text" value="337.11"/>
Occupation		Total earmarked through conduit; PAC limit not affected.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]
Aggregate Year-to-Date ▼ <input type="text"/>		

Full Name (Last, First, Middle Initial) C. Marjorie Berk		Date of Receipt
Mailing Address 7 East 14 St. #1117		<input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City New York	State NY	Zip Code 10003
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.10465
Name of Employer		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Occupation Not Employed		Earmarked through ActBlue.
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="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 7 OF 15
	(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)
POWERPACPLUS

A. Beth Broderick
Full Name (Last, First, Middle Initial)

Mailing Address 1935 Palmerston Place

City	State	Zip Code
Los Angeles	CA	90027

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

Name of Employer	Occupation
Self	Actor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2014

Transaction ID : SA11AI.10468

Amount of Each Receipt this Period
20.00

Earmarked through ActBlue.

B. Christian Dorsey
Full Name (Last, First, Middle Initial)

Mailing Address 1009 S. Columbus St.

City	State	Zip Code
Arlington	VA	22204

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

Name of Employer	Occupation
Economic Policy Institute	Director

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
11	/	30	/	2014

Transaction ID : SA11AI.10454

Amount of Each Receipt this Period
20.00

Earmarked through ActBlue.

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

Mailing Address 1009 S. Columbus St.

City	State	Zip Code
Arlington	VA	22204

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

Name of Employer	Occupation
Economic Policy Institute	Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SA11AI.10473

Amount of Each Receipt this Period
20.00

Earmarked through ActBlue.

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 15
<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)
POWERPACPLUS

A. Julie Martinez
Full Name (Last, First, Middle Initial)

Mailing Address 1240 Lawrence St. NE

City Washington	State DC	Zip Code 20017
--------------------	-------------	-------------------

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

Name of Employer PowerPAC.org	Occupation Policy Advocate & Researcher
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **251.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2014

Transaction ID : SA11AI.10455

Amount of Each Receipt this Period

20.00

Earmarked through ActBlue.

B. Julie Martinez
Full Name (Last, First, Middle Initial)

Mailing Address 1240 Lawrence St. NE

City Washington	State DC	Zip Code 20017
--------------------	-------------	-------------------

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

Name of Employer PowerPAC.org	Occupation Policy Advocate & Researcher
----------------------------------	--

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
12	/	04	/	2014

Transaction ID : SA11AI.10456

Amount of Each Receipt this Period

1.00

Earmarked through ActBlue.

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

Mailing Address 2621 Anuenue St.

City Honolulu	State HI	Zip Code 96822
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FEC ID number of contributing federal political committee. **C**

Name of Employer Univ of Hawaii	Occupation Professor
------------------------------------	-------------------------

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
12	/	07	/	2014

Transaction ID : SA11AI.10463

Amount of Each Receipt this Period

20.00

Earmarked through ActBlue.

SUBTOTAL of Receipts This Page (optional).....▶	41.00
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 15
<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)
POWERPACPLUS

A. Jane Norman
Full Name (Last, First, Middle Initial)

Mailing Address 1221 Massachusetts Ave.,NW
Suite 622815

City Washington State DC Zip Code 20005

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

Name of Employer American Rights At Work Occupation NonProfit Advocate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 06 / 2014
Transaction ID : SA11AI.10460

Amount of Each Receipt this Period
20.00

Earmarked through ActBlue.

B. Dina Shek
Full Name (Last, First, Middle Initial)

Mailing Address 737 Olokele Avenue, #803

City Honolulu State HI Zip Code 96816

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

Name of Employer University of Hawaii Law Schoo Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
12 / 22 / 2014
Transaction ID : SA11AI.10471

Amount of Each Receipt this Period
20.00

Earmarked through ActBlue.

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

Mailing Address 3514 California St.

City Oakland State CA Zip Code 94619

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

Name of Employer TURN Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 05 / 2014
Transaction ID : SA11AI.10457

Amount of Each Receipt this Period
20.00

Earmarked through ActBlue.

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	311.00

**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
<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)
POWERPACPLUS

A. Democracy Engine, LLC
 Full Name (Last, First, Middle Initial)
 Mailing Address 850 Quincy St., NW# 402
 City Washington State DC Zip Code 20011
 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
 11 / 28 / 2014
Transaction ID : SA17.10478
 Amount of Each Receipt this Period
 23.87
 Total earmarked through conduit; PAC limit not affected.
[MEMO ITEM]

B. Democracy Engine, LLC
 Full Name (Last, First, Middle Initial)
 Mailing Address 850 Quincy St., NW# 402
 City Washington State DC Zip Code 20011
 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
 12 / 04 / 2014
Transaction ID : SA17.10481
 Amount of Each Receipt this Period
 23.87
 Total earmarked through conduit; PAC limit not affected.
[MEMO ITEM]

C.
 Full Name (Last, First, Middle Initial)
 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
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	0.00

**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"/> 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

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NAME OF COMMITTEE (In Full)
POWERPACPLUS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
CC online fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 26 / 2014

Transaction ID : SB21B.10505

Amount of Each Disbursement this Period

24.11

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
CC online fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 26 / 2014

Transaction ID : SB21B.10506

Amount of Each Disbursement this Period

1.98

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
CC online fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : SB21B.10507

Amount of Each Disbursement this Period

4.74

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

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

30.83

**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"/> 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

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NAME OF COMMITTEE (In Full)
POWERPACPLUS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
CC online fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : SB21B.10508

Amount of Each Disbursement this Period

0.79

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
CC online fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 23 / 2014

Transaction ID : SB21B.10509

Amount of Each Disbursement this Period

1.58

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
CC online fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 23 / 2014

Transaction ID : SB21B.10510

Amount of Each Disbursement this Period

11.52

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

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

13.89

**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"/> 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)
POWERPACPLUS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
CC online fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 23 / 2014

Transaction ID : SB21B.10511

Amount of Each Disbursement this Period

0.79

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

0.79

45.51

**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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
POWERPACPLUS

Full Name (Last, First, Middle Initial)

A. Democracy Engine, LLC

Mailing Address 850 Quincy St., NW# 402

City Washington State DC Zip Code 20011

Purpose of Disbursement
Noncontribution account. CC online fee

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : SB29.10487

Amount of Each Disbursement this Period

1.13

Full Name (Last, First, Middle Initial)

B. Democracy Engine, LLC

Mailing Address 850 Quincy St., NW# 402

City Washington State DC Zip Code 20011

Purpose of Disbursement
Noncontribution account. CC online fee

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SB29.10488

Amount of Each Disbursement this Period

1.13

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2.26

2.26

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
POWERPACPLUS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PVL Accounting Services	Nature of Debt (Purpose): Bookkeeping services
Mailing Address 44 Montgomery St Suite 2310	
City State Zip Code San Francisco CA 94107	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.10513	
Amount Incurred This Period <input type="text" value="3856.25"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3856.25"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>
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C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>
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1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="3856.25"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="3856.25"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="3856.25"/>