PAGE 1 / 16

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TORWI 3X	For Other	Than An Aut	horized Co	mmittee		Office Us	se Only
NAME OF COMMITTEE (in full)	TYPE OR PI	RINT ▼	Example over the	If typing, type lines.	12FE	24M5	
Perimeter PAC							
<u> </u>							
ADDRESS (number and street) Check if different than previously reported. (ACC)	Suite 101 Foxboro	ngton Street			MA L	02035	5 –
2. FEC IDENTIFICATION N	IUMBER ▼	CIT	ΥΔ		STATE A		ZIP CODE ▲
C C00544254			S THIS REPORT	NEW (N) C	R 🔲	AMENDED (A)	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	(b) Month Repo Due (ort Dn: Mar	20 (M2) 20 (M3) 20 (M4)	May 20 (Jun 20 (M	16)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10)	Nov 20 (M (Non-Election Year Only) Dec 20 (M (Non-Election Year Only) Jan 31 (YE
April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31	(Q2)	12-Day PRE-Election Report for the:	Conv	rention (12C)	H	neral (12G)	Runoff (12F
Year-End Report July 31 Mid-Year Report (Non-elect Year Only) (MY) Termination Report (TER)	ion (d)	Election 30-Day POST-Election Report for the:	Gene	eral (30G)	Rur	noff (30R)	State of Special (30 in the
5. Covering Period	D7 01	/ Y Y Y Y 2020	Y	rough 07	, M / D 31	D / Y Y 202	State of 20
I certify that I have examined Type or Print Name of Treasur	Lowey, Ke		my knowledg	e and belief it i	s true, correc	ct and comple	te.
Signature of Treasurer	vey, Keith, D., ,		[Elect	tronically Filed]	Date	M M / D 08 20	2020
NOTE: Submission of false, erro	neous, or incor	nplete informatio	n may subject	the person signi	ng this Repor	t to the penalti	es of 52 U.S.C. § 30
Office Use							FORM 3X Rev. 05/2016

SUMMARY PAGE

OF FEC Form 3X (Rev. 05/2016)	RECEIPTS AND DISBURSEMENTS	Ⅰ Page 2
Write or Type Committee Name		. ago _
Perimeter PAC		
- Commeter 1746		
Report Covering the Period: From: 07	01 / 2020 To:	07 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
-	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2020		84292.16
(b) Cash on Hand at Beginning of Reporting Period	31680.70	
(c) Total Receipts (from Line 19)	13550.00	118941.58
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	45230.70	203233.74
7. Total Disbursements (from Line 31)	8916.43	166919.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	36314.27	36314.27
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)	0.00	
This committee has qualified as a multicand	didate committee. (see FEC FORM 1M)	
Fo	or further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530	

Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

D۸	rim	neter	D	1
re	1111	ietei	r	ヽし

Report Covering the Period: From:	01 / 2020 To	o: 07 31 2020
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	4000.00	16250.00
(i) Itemized (use Schedule A)	4000.00	16250.00
(ii) Unitemized	50.00	635.00
(iii) TOTAL (add	4 3	7 7 555.55
Lines 11(a)(i) and (ii)	4050.00	16885.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	2522.00	
(such as PACs)	9500.00	79500.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	13550.00	96385.00
Totals to Line 33, page 5)	15550.00	30303.00
2. Transfers From Affiliated/Other	0.00	22500.00
Party Committees	0.00	75 75 75 75
B. All Loans Received	0.00	0.00
7.11 254.10 7.0001764	4 4	4 4
L Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures	7 7	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	56.58
6. Refunds of Contributions Made	45.	75 75 75
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(IIOIII Scriedule FIS)	0.00	0.00
(b) Lovin Fundo (from Caladala LIF)	0.00	0.00
(b) Levin Funds (from Schedule H5)	4 4	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(6) 1014. 114.101010 (444.10(4) 4114.10(5))	4 4	4
). Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	13550.00	118941.58
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	13550.00	118941.58

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Caroniaa Tour to Buto
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	4 4 4	
Expenditures(c) Total Operating Expenditures	8916.43	49419.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8916.43	49419.47
Transfers to Affiliated/Other Party	0.00	0.00
Committees Contributions to Federal Candidates/Committees	0.00	0.00
and Other Political Committees	0.00	102500.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	7 7 7
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	4 4	
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	, 5.60	7 7 7
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	15000.00
Federal Election Activity (52 U.S.C. § 30101(2) (a) Allocated Federal Election Activity (from Schedule H6)	20))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	200	200
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	8916.43	166919.47
Total Federal Disbursements		, , , , , , , , , , , , , , , , , , , ,
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	8916.43	166919.47

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	13550.00	96385.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13550.00	96385.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8916.43	49419.47
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	56.58
8. Net Operating Expenditures (subtract Line 37 from Line 36)	8916.43	49362.89

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

16

Detailed Summary Page 13 14 15 16 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) Perimeter PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Daschle, Thomas, , , Date of Receipt Mailing Address 1155 23Rd St NW 14 2020 Apt 7A City State Zip Code Transaction ID: VN8KPFJ0846 DC Washington 20037-3308 Amount of Each Receipt this Period FEC ID number of contributing C 2500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Daschle Group Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Eggert, Carol, , , Date of Receipt Mailing Address 251 Foxgayte Ln 2020 City State Zip Code Transaction ID: VN8KPFJB0A3 PA Pottstown 19465-8544 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Comcast Executive Receipt For: Aggregate Year-to-Date ▼ Primary General * Earmarked Contribution: See Below Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. ActBlue Date of Receipt Mailing Address PO Box 382110 26 2020 City Zip Code State Transaction ID: VN8KPFJB0A3E MA Cambridge 02238-2110 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C00401224 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field Receipt For: Aggregate Year-to-Date ▼ Primary General Note: Above Contribution earmarked through this 1050.00 Other (specify) organization. 3500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FEC ID number of contributing

Name of Employer (for Individual)

federal political committee.

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

-	OH	LINE	NU	IMBER	:	PAGE	-	1	OF	10
(0	che	ck only	or	ne)						
	×	11a		11b		11c		12		
		13		14		15		16	;	17

Memo Item

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) Perimeter PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Leon, Pete, , , Date of Receipt Mailing Address 2006 Columbia Rd NW 2020 Apt 7 City State Zip Code Transaction ID: VN8KPFJB0D7 Washington DC 20009-1320 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Government Relations Scrivner Leon Group, LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period

	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼	
C.	Full Name of Individual (Last, First, Middle In Mailing Address	itial) or Full Orga	anization Name	Date of Receipt
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼	
Γ,	NUDTOTAL of Preside This Press (autional)			500.00

Occupation (for Individual)

C

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

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

4000.00

SCHEDIII E A (EEC Form 2V)			Г	FOR LINE NUMBER: PAGE 8 OF 16					
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 16 (check only one)					
IT	EMIZED RECEIPTS		for each category of the	11a 11b X 11c 12					
			Detailed Summary Page	13 14 15 16 17					
Γ.	ny information copied from such Reports and St	atamanta m	l	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	for commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full) Perimeter PAC								
	I elimetel I AC								
_	Full Name of Individual (Last, First, Middle Initi American Society Of Anesthesiologists P			Date of Descipt					
Α.	Mailing Address 1061 American Ln	Unitical Act	ion committee (ASA 1 AO)	Date of Receipt					
	Maining Address 1001 American En			07 27 2020					
	City	State	Zip Code	Transaction ID: VN8KPFJHY70					
	Schaumburg	IL	60173-4973	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C co	0255752	2500.00					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
	Traine or Employer (i.e. manually)		apation (ioi mamada)						
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General		2500.00						
	Other (specify) ▼		2500.00						
_	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Organization Name						
В.	BNSF RAILWAY COMPANY RAILPA	AC (BNSF	RAILPAC)	Date of Receipt					
	Mailing Address PO Box 961039	07 21 2020							
	City	State	Zip Code	Transaction ID : VN8KPFJ0812					
	Fort Worth	TX	76161-0039	Amount of Each Receipt this Period					
	FEC ID number of contributing	C co	0235739	2500.00					
	federal political committee.	O Co	0233739	2500.00					
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General	/ iggrogato	Total to Bate						
	Other (specify) ▼		2500.00						
_	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Organization Name						
C.	National Emergency Medicine Political Action Committe	e / American C	College Of Emergency Physicians	Date of Receipt					
	Mailing Address 4950 W Royal Ln			07 27 2020					
	City	State	Zip Code	Transaction ID : VN8KPFJB0C9					
	Irving	TX	75063-2524	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.		C co	0140061	1500.00					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General	35 0 11							
	Other (specify)		1500.00						
5	SUBTOTAL of Receipts This Page (optional)			6500.00					
L	1 -3- (-1								

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

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 9 OF 1	6					
	·		Use separate schedule(s)	(check only one)						
"	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a11b x 11c12						
					17					
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements mand a	ay not be sold or used by any penderess of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)									
	Perimeter PAC									
<u></u>	Full Name of Individual (Last, First, Middle Initi									
A.	NCTA - The Internet And Television Associatio	n Political A	ction Committee (NCTA PAC)	Date of Receipt						
	Mailing Address 25 Massachusetts Ave NW			07 28 2020						
	Ste 100 City	State	Zip Code	Transaction ID : VN8KPFJHY88						
	Washington	DC	20001-1434	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C co	0010082	2500.00	1					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General	33 73								
	Other (specify) ▼		2500.00							
_	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Organization Name							
В.	WILLIAMS AND JENSEN, PLLC PO			Date of Receipt						
	Mailing Address 1201 Pennsylvania Ave NW Ste 800			07 21 2020						
	City	State DC	Zip Code	Transaction ID : VN8KPFJ07Z6						
	Washington	DC	20004-2401	Amount of Each Receipt this Period	_					
	FEC ID number of contributing federal political committee.	C co	0039206	500.00						
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		500.00							
	Other (specify)		300.00							
C.	Full Name of Individual (Last, First, Middle Initi	al) or Full C	organization Name	Date of Receipt						
	Mailing Address			M = M / D = D / Y = Y = Y						
	City	State	Zip Code							
	FEC ID number of contributing federal political committee.		<u> </u>	Amount of Each Receipt this Period	-					
					J					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
	Receipt For:			_						
	Primary General	Aggregate	Year-to-Date ▼							
	Other (specify)		4							
Γ.	SURTOTAL of Receipts This Page (ontional)			3000.00	ī					

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

9500.00

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. ANAME OF COMMITTEE (in Full) Perimeter PAC Full Name (Last, First, Middle Initial) A. ActBlue Technical Services Mailing Address 366 Summer St City West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 366 Summer St Category/ Type Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 366 Summer St Category/ Type Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 366 Summer St City West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Category/ Type Date of Disbursement Category/ Type Transaction ID: VN7ME32DY2 Amount of Each Disbursement this Period Transaction ID: VN7ME32DY2 Amount of Each Disbursement this Period Transaction ID: VN7ME32DY2 Amount of Each Disbursement this Period Type Office Sought: House Disbursement For: Senate President Disbursement This Period Type Office Sought: House Disbursement For: Senate President Disbursement This Period Type Transaction ID: VN7ME32DY2 Amount of Each Disbursement this Period Memo Item Full Name (Last, First, Middle Initial)	SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 10				
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for commercial purposes, other than using the name and address of any political committee to aclicit contributions from such committee. NAME OF COMMITTEE (in Full) Perimeter PAC Full Name (Last, First, Middle Initial) A. ActBlue Technical Services Mailing Address 366 Summer St City West Somewille Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 366 Summer St City State: District Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 366 Summer St City West Somewille Purpose of Disbursement Test President City State: District Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 366 Summer St City West Somewille Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Credit Card Processing Fee Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Credit Card Processing Fee Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Credit Card Processing Fee Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Credit Card Processing Fee Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Credit Card Processing Fee Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Office Sough	ITEMIZED DISBURSEMENTS			I ` ′				
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 committees. NAME OF COMMITTEE (In Full) Perimeter PAC Full Name (Last, First, Middle Initial) A. ActBlue Technical Services Mailing Address 368 Summer St City West Somervitle Purpose of Disbursement Credit Card Processing Fee Candidate Name Category/ Type Prisident State: District Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 368 Summer St City West Somervitle Primary General								
A ActBlue Technical Services Mailing Address 366 Summer St City West Somerville Prince of Disbursement Cried Carlo Processing Fee Candidate Name City West Somerville Prince of Disbursement Cried Carlo Processing Fee Candidate Name City West Somerville Prince of Disbursement Cried Carlo Processing Fee Candidate Name City West Somerville Prince of Disbursement Cried Carlo Processing Fee Candidate Name City West Somerville Prince Sought: State: District Full Name (Last, First, Middle Initial) A ActBlue Technical Services Mailing Address 366 Summer St City West Somerville Full Name (Last, First, Middle Initial) City West Somerville Full Name (Last, First, Middle Initial) City West Somerville Prince of Disbursement City City State: District Full Name (Last, First, Middle Initial) City City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, F	Anninformation coming from such Deposits and	Ctatamanta man						
Perimeter PAC Full Name (Last, First, Middle Initial) A ActBlue Technical Services Mailing Address 366 Summer St City West Somerville West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Other (specify) State Office Sought: House President State: District City West Somerville President State: District Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 366 Summer St City West Somerville West Somerville NA Category' Type Office Sought: House Office Sought: President Office Sought: President State: District Full Name (Last, First, Middle Initial) Category' Type Office Sought: President State: District Full Name (Last, First, Middle Initial) Category' Type Office Sought: President State: District Full Name (Last, First, Middle Initial) Category' Type Office Sought: Full Name (Last, First, Middle Initial) Category' Type Office Sought: Full Name (Last, First, Middle Initial) Category' Type Office Sought: Full Name (Last, First, Middle Initial) Category' Type Office Sought: Full Name (Last, First, Middle Initial) Category' Type Office Sought: Senate President State: District District State Disbursement President State: District Ma O1104-3211 President State: District Memo Item FEC Identification Number Category' Type Office Sought: FEC Identification Number Category' Transaction ID: VNTME92XB Amount of Each Disbursement this Period Transaction ID: VNTME92XB Amount of Each Disbursement this Period Transaction ID: VNTME92XB Amount of Each Disbursement this Period FEC Identification Number Category' Transaction ID: VNTME92XB Amount of Each Disbursement this Period Transaction ID: VNTME92XB Amount of Each Disbursement this Period Transaction ID: VNTME92XB Amount of Each Disbursement this Period Transaction ID: VNTME92XB Amount of Each Disbursement this Period Transaction ID: VNTME92XB Amount of Each Disbursement this Period Transaction ID: VNTME92XB Amount of Each Disbursement this Period Transaction ID: VNT								
Full Name (Last, First, Middle Initial) A ctBlue Technical Services Mailing Address 366 Summer St City West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: House Senate Primary Primary General Purpose of Disbursement Initial B. ActBlue Technical Services Mailing Address 366 Summer St City West Somerville MA Zip Code MA Q2144-3132 Prissident State: District Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Fill Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Springfield MA Q1104-3211 Prycose of Disbursement Payroll Taxes Candidate Name Category/ Office Sought: House Disbursement For: Senate President Disbursement Disbursemen	NAME OF COMMITTEE (In Full)							
A ctBlue Technical Services Mailing Address 366 Summer St City West Somarville President State: District: City West Somerville NA Or 19 2020 FEC Identification Number Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Fill Name (Last, First, Middle Initial) Credit Card Processing Fee Candidate Name Office Sought: Fill Name (Last, First, Middle Initial) Fill Name (Last, First, Middle Initial) Credit Card President Office Sought: Fill Name (Last, First, Middle Initial) Credit Card Processing Fee Candidate Name Office Sought: Fill Name (Last, First, Middle Initial) Credit Card Processing Fee Candidate Name Office Sought: Fill Name (Last, First, Middle Initial) Credit Card Processing Fee Candidate Name Office Sought: Fill Name (Last, First, Middle Initial) Credit Card Processing Fee Candidate Name Office Sought: Fill Name (Last, First, Middle Initial) Credit Card Processing Fee Candidate Name Office Sought: Fill Name (Last, First, Middle Initial) Credit Card Processing Fee Candidate Name Office Sought: Fill Name (Last, First, Middle Initial) Category/ Category/ Transaction ID : WTME3ZDR Amount of Each Disbursement Inits Period Fec Identification Number Category/ Transaction ID : WTME3ZDR Amount of Each Disbursement Inits Period Fec Identification Number Category/ Transaction ID : WTME3ZDR Amount of Each Disbursement Inits Period Fec Identification Number Comparison Initial Processing Fee Transaction ID : WTME3ZDR Amount of Each Disbursement Inits Period Fec Identification Number Comparison Initial	Perimeter PAC							
City State Zip Code MA O2144-3132 FEC Identification Number Category/ Type Disbursement Other (specify) ▼ Disbursement Other (specify) Transaction ID : VN7ME9ZDR Amount of Each Disbursement this Period Disbursement Other (specify) Transaction ID : VN7ME9ZDR Amount of Each Disbursement this Period Disbursement Date of Disburs					5			
City West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought:					M = M /	D D / Y Y Y Y		
West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Category/ Type Office Sought: House Prisident Other (specify) ▼ State: Disfinct: Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 366 Summer St City West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: House Disbursement For: Category/ Type Date of Disbursement Category/ Type Date of Disbursement Category/ Type FEC Identification Number Category/ Type Fec Ident	Mailing Address 300 Summer St				U/	19 2020		
Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: House Senate Primary General State: District: Other (specify) ▼ Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 366 Summer St City West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement President Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Primary General Other (specify) Type Office Sought: House Disbursement Primary General Other (specify) Transaction ID: VN7ME9ZDV2 Amount of Each Disbursement Transaction ID: VN7ME9ZE6: Amount of Each Disbursement Transact					FEC Identi	ification Number		
Cradit Card Processing Fee Candidate Name Category/ Office Sought:		IVIA	02144-3132					
Caregory/ Office Sought: House Senate Primary General Primary								
Office Sought: House Disbursement For: Senate President Other (specify) Memo Item Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 366 Summer St Date of Disbursement City West Somerville MA	Candidate Name			Category/				
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 366 Summer St City West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: House Primary General Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: House Disbursement For: Senate Purpose of Disbursement Tor: Category/ Type Office Sought: House Disbursement For: Gategory/ Type Office Sought: House Disbur								
State: District: District						1.98		
State: District: Full Name (Last, First, Middle Initial) B. ActBlue Technical Services Mailing Address 366 Summer St City West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: State President Payroll Taxes Candidate Name Office Sought: State President Payroll Taxes Candidate Name Office Sought: House President Payroll Taxes Candidate Name Office Sought: House President Payroll Taxes Candidate Name Office Sought: House President Payroll Taxes Category/ Type Office Sought: House President Payroll Taxes Category/ Type Office Sought: House President President State: Disbursement For: Senate President President State: Disbursement This Page (optional) Memo Item FEC Identification Number Category/ Type 608.12 Memo Item Memo Item Memo Item Substortal of Disbursements This Page (optional)								
B. ActBlue Technical Services Mailling Address 366 Summer St City West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Office Sought: Fec Identification Number Category/ Type Transaction ID : VN7ME92D72 Amount of Each Disbursement this Period Office Sought: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: Disbursement For: Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: House Disbursement For: Category/ Type Office Sought: Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item FEC Identification Number Category/ Type FEC Identification Number Category/ Type Office Sought: Memo Item FEC Identification Number Category/ Type Office Sought: Memo Item Senate Primary General Other (specify) Memo Item Substortal of Disbursements This Page (optional)		Other (sp	ecity) \blacktriangledown		Memo	Item		
Mailing Address 366 Summer St City West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Other (specify) State President Springfield Purpose of Disbursement Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Other (specify) State Disbursement For: Category/ Type District: Date of Disbursement Date of Disbursement FEC Identification Number Category/ Type Date of Disbursement Date of Disbursement FEC Identification Number Category/ Type Date of Disbursement FEC Identification Number FEC Identification Number Category/ Total FEC Identification Number FEC Identification Number Category/ Transaction ID : VN7ME92DY2 Amount of Each Disbursement FEC Identification Number Category/ Transaction ID : VN7ME92E6; Amount of Each Disbursement this Period FEC Identification Number Category/ Transaction ID : VN7ME92E6; Amount of Each Disbursement this Period FEC Identification Number Category/ Type Office Sought: House Primary General Other (specify) ▼ SubstortAL of Disbursements This Page (optional)	Full Name (Last, First, Middle Initial)							
Mailing Address 366 Summer St City West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: President State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Mailing Address 1 Carando Dr City Springfield MA Office Sought: President State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA Office Sought: Purpose of Disbursement Payroll Taxes Candidate Name Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House President Other (specify) Memo Item State: Disbursement For: Category/ Type Memo Item Substruction ID: VN7ME9ZE6: Amount of Each Disbursement this Period Category/ Type Memo Item Substruction Number Category/ Type General Other (specify) Memo Item Substruction ID: VN7ME9ZE6: Amount of Each Disbursement this Period Memo Item Substruction ID: VN7ME9ZE6: Amount of Each Disbursement this Period Substruction ID: VN7ME9ZE6: Amount of Each Disbursement this Period Memo Item					Date of Di	isbursement		
City West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Other (specify) FEC Identification Number Category/ Amount of Each Disbursement this Period Office Sought:					M M /	D D / Y Y Y Y		
West Somerville Purpose of Disbursement Credit Card Processing Fee Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City State Zip Code Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: House Disbursement For: Senate Primary General Office Sought: Memo Item	Mailing Address 366 Summer St				07 26 2020			
Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) State Zip Code MA O1104-3211 FEC Identification Number Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item FEC Identification Number Category/ Type Memo Item Substitute: District: Substitute: District: Memo Item Substitute: District: Memo Item		1	·			ification Number		
Credit Card Processing Fee Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Category/ Type Transaction ID: VN7ME9ZDY2 Amount of Each Disbursement this Period Memo Item FEC Identification Number Category/ Type Category/ Type Office Sought: House Disbursement For: Senate Primary General		IVIA						
Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Category/ Type Memo Item Date of Disbursement Office Sought: House Office Sought: House Primary General Other (specify) Memo Item Transaction ID: VN7ME9ZE6: Amount of Each Disbursement his Period FEC Identification Number Category/ Type Office Sought: House Primary General Other (specify) Memo Item State: District: Substorate Primary General Other (specify) Memo Item Substorate Other (specify) Memo Item	•							
Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Purpose of Disbursement Payroll Taxes Candidate Name Category/ Type Office Sought: House Disbursement For: General Primary General Primary General State: District: Substortal of Disbursements This Page (optional)	Candidate Name			Category/				
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: House Primary General Other (specify) State: District: Memo Item PEC Identification Number Category/ Type Office Sought: House Primary General Other (specify) State: District: Substoctant Primary General Other (specify) Memo Item 649.60								
State: District: Other (specify) Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: House Primary General Office Sought: District: District: Substotal of Disbursements This Page (optional)	<u> </u>					39.50		
State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Candidate Name Disbursement For: Senate Primary Office Sought: House Disbursement For: Senate Primary Other (specify) State: District: Memo Item Date of Disbursement Date of Disbursement FEC Identification Number Category/ Type Category/ Type Memo Item Memo Item Subtrotal of Disbursements This Page (optional)		1 1						
Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: House President State: District: Date of Disbursement PC Tode 01104-3211 FEC Identification Number Category/ Type Category/ Type Memo Item Subtrotal of Disbursements This Page (optional)		Other (sp	ecity)		Memo	Item		
C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Category/ Type Office Sought: House President State: District: District: Date of Disbursement Disbursement FEC Identification Number Category/ Type Category/ Type Memo Item 649.60								
City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: House President President State: District: D	c. Complete Payroll Solutions							
Springfield Purpose of Disbursement Payroll Taxes Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ Substrict: Substrict: MA 01104-3211 Category/ Type Category/ Type Category/ Type Ma 01104-3211 Category/ Type Category/ Type Memo Item 649.60	Mailing Address 1 Carando Dr				1	1 1 1		
Springfield Purpose of Disbursement Payroll Taxes Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Substrict: Max O1104-3211 Category/ Type Category/ Type Max O1104-3211 Category/ Type Memount of Each Disbursement this Period Memo Item 649.60	City		Zip Code		FFC Identi	ification Number		
Payroll Taxes Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substrict: Memo Item Fransaction ID: VN7ME9ZE6: Amount of Each Disbursement this Period Memo Item 649.60		MA	01104-3211		1.1			
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Substract: District: Substract: Disbursements This Page (optional)						action ID : VN7ME97E6:		
Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Candidate Name							
Senate Primary General Other (specify) Memo Item Substrict: Substrict: Memo Item 649.60	Office Sought: House Dis	sbursement For:		1,400		608.12		
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)		Primary				7 7 7		
State: District: SUBTOTAL of Disbursements This Page (optional)	President	Other (sp	ecify) 🔻		Memo	Item		
30BTOTAL OF DISDUISEMENTS THIS Fage (Optional)	State: District:				L Monto			
TOTAL This Paried (lest page this line purchase only)	SUBTOTAL of Disbursements This Page (opt	ional)				649.60		
	TOTAL This Deviced (feet many this line	or only)		<u> </u>				

Distance Summary Fage Page Page	SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 11 OF					16
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) Perimeter PAC Full Name (Last, First, Middle Initial) A. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield President State: District Full Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Full Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Full Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Full Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Full Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Full Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Full Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Full Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Fell Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Fell Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Fell Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Fell Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Fell	ITEMIZED DISBURSEMENTS								
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 PLAN)									
NAME OF COMMITTEE (in Full) Perimeter PAC Full Name (Last, First, Middle Initial) A. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield State Disbursement Full Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield State Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Office Sought: Full Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Office Sought: Full Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Disbursement Payroll Solutions Mailing Address 1 Carando Dr City Springfield Disbursement For: Senate Primacy General Primacy General Primacy General Category Transaction ID: VNTME9ZE63 Amount of Each Disbursement This Period Category Transaction ID: VNTME9ZE63 Amount of Each Disbursement Category Transaction ID: VNTME9ZE63 Amount of Each Disbursement Payroll Sorvice Fee Candidate Name City Springfield MA 01104-3211 Date of Disbursement FEC Identification Number Category Transaction ID: VNTME9ZE63 Amount of Each Disbursement Payroll Sorvice Fee Candidate Name City Springfield MA 01104-3211 Primacy Category Category Transaction ID: VNTME9ZE64 Amount of Each Disbursement Ins Period Transaction ID: VNTME9ZE64 Amount of Each Disbursement Ins Period Transaction ID: VNTME9ZE64 Amount of Each Disbursement Ins Period Transaction ID: VNTME9ZE64 Amount of Each Disbursement Ins Period Transaction ID: VNTME9ZE64 Amount of Each Disbursement Ins Period Transaction ID: VNTME9ZE64 Amount of Each Disbursement Ins Period Transaction ID: VNTME9ZE64 Amount of Each Disbursement Ins Period Transaction ID: VNTME9ZE64 Amount of Each Disbursement Ins Period Transaction ID: VNTME9ZE64 Amount of Each Disbursement Ins Period	Any information conicd from such Departs and State	monto mov	not be cold or use						
Perimeter PAC Full Name (Last, First, Middle Initial) A. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Purpose of Disbursement Perimary General Primary Disbursement District: Full Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 FEC Identification Number Category/ Type Transaction ID: WN7ME92E65 Amount of Each Disbursement His Period Disbursement For: Salate: District: Full Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Figure of Disbursement Perimary General Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement Primary General Disbursement District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City State: Zip Code Other (specify) Mamo Item Date of Disbursement Disbursement For: Senate Primary General Disbursement For: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 FEC Identification Number Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Fec Identification Number Complete Payroll Solutions Category: Transaction ID: WN7ME92E63 Amount of Each Disbursement For: Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Fec Identification Number Complete Payroll Solutions Category: Transaction ID: VN7ME92E63 Amount of Each Disbursement Instruction Payrol Service Fee Candidate Name Complete Payroll Solutions General Payrol Service Fee Candidate Name Category: Category: Transaction ID: VN7ME92E63 Amount of Each Disbursement Instruction Payroll Solutions Amount of Each Disbursement Instruction Payroll Solutions Complete Payroll Solutions Complete Payroll Solutions Category: Transaction ID: VN7ME92E63 Amount of Each Disbursement Payrol									
A. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Office Sought: Fell Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield President State: District: Full Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Purpose of Disbursement Payroll Taxass Candidate Name Office Sought: Fec Identification Number Category/ Type 39.10 Date of Disbursement Fec Identification Number Category/ Type 39.10 Date of Disbursement Fec Identification Number Category/ Type Category/ Type Cother (specify) Date of Disbursement Fec Identification Number Category/ Type Category/ Type Cother (specify) Date of Disbursement Fec Identification Number Category/ Transaction ID: VN7ME9ZE63 Amount of Each Disbursement Payroll Service Fee Candidate Name Category/ Transaction ID: VN7ME9ZE64 Amount of Each Disbursement Payroll Service Fee Candidate Name Category/ Transaction ID: VN7ME9ZE64 Amount of Each Disbursement this Period Fec Identification Number Category/ Transaction ID: VN7ME9ZE64 Amount of Each Disbursement Payroll Service Fee Candidate Name Office Sought: House Disbursement For: Senate Primary General	NAME OF COMMITTEE (In Full)								
A. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA O1104-3211 Purpose of Disbursement Payroll Service Fee Candidate Name Other (specify) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA Other (specify) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA Other (specify) Office Sought:	Perimeter PAC								
Mailing Address 1 Carando Dr City Springfield MA O1104-3211 Purpose of Disbursement Payroll Service Fee Candidate Name Disbursement For: Senate Primary General Other (specify) City Springfield MA O1104-3211 Purpose of Disbursement this Period Office Sought: House President Other (specify) ▼ State: District Full Name (Last, First, Middle Initial) Fill Name (Last, First, Middle Initial) Fill Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA O1104-3211 Purpose of Disbursement Primary General Office Sought: House Disbursement For: Senate Primary General Complete Payroll Solutions Mailing Address 1 Carando Dr Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr Fill Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Name Category/ Type General FEC Identification Number Category/ Type Typ									
City Springfield Prepose of Disbursement Payroll Solutions Malling Address 1 Carando Dr City Springfield Name City Springfield Purpose of Disbursement For: Senate President Office Sought: State: District: Full Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Name Candidate Name Caregory/ Type Office Sought: House Disbursement For: Senate President Office Sought: State Disbursement For: Senate President Office Sought: Disbursement For: Senate President Office Sought: House Disbursement For: Senate Primary General Office Sought: Senate Primary General Office Sought: Disbursement Office Sought: Senate President Office Sought: Senate Office Sought Office Sought Office Sought Office Sought Office Sought Office Sought Offi					M = M	/ D D	/ Y		
Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Office Sought: House Senate Primary General Primary General Purpose of Disbursement this Period State: District: District: Mailing Address 1 Carando Dr City Springfield Name Category/ Type Office Sought: House Disbursement For: Gategory/ Type Office Sought: House Disbursement For: Mailing Address 1 Carando Dr City Springfield Name Category/ Type Office Sought: House Disbursement For: Gategory/ Type Office Sought: District: District: District: District: Primary General Primary General Primary General Disbursement Tot: Gategory/ Type Complete Payroll Solutions Mailing Address 1 Carando Dr City State President Other (specify) State: District: Di	Mailing Address 1 Carando Dr				07	<u>0</u> 1		2020	
Purpose of Disbursement Payroll Service Fee Candidate Name Office Sought: House Senate Primary General President State: District: Dist	,				FEC Iden	tification	Number		
Payroll Service Fee Candidate Name Cotalegory/ Type Office Sought: House Senate Primary General Primary General Primary General President District: Full Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailling Address 1 Carando Dr City Springfield MA 01104-3211 Purpose of Disbursement For: Senate Primary General Primary General Office Sought: House Disbursement For: General Primary General Office Sought: District: Full Name (Last, First, Middle Initial) Category/ Type FEC Identification Number Category/ Type Fec Identification Number Category/ Type Fec Identification Number Category/ Transaction ID: VN7ME9ZE63 Amount of Each Disbursement this Period Fell Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Purpose of Disbursement Payroll Service Fee Candidate Name Category/ Type Category/ Type Category/ Type Office Sought: House Disbursement For: Gategory/ Type Cotalegory/ Type Transaction ID: VN7ME9ZE61 Amount of Each Disbursement Payroll Solutions FEC Identification Number C Category/ Type Transaction ID: VN7ME9ZE61 Transaction ID: VN7	, ,	IVIA	01104-3211					-	
Candidate Name Office Sought:									
Office Sought: House Senate Primary General Other (specify) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Disbursement For: Senate Primary General Other (specify) Date of Disbursement Primary General Disbursement Date of Disbursement Primary Date of Disbursement Amount of Each Disbursement this Period Transaction ID: VN7ME9ZE63 Amount of Each Disbursement District: Memo Item FEC Identification Number Category/ Type Office Sought: House Disbursement For: General Other (specify) Date of Disbursement this Period Transaction ID: VN7ME9ZE63 Amount of Each Disbursement this Period Date of Disbursement Date of Disbursement Primary General Other (specify) Date of Disbursement Office Sought: House Disbursement For: Category/ Type Transaction ID: VN7ME9ZE64 Amount of Each Disbursement Office Sought: House Disbursement For: Senate Primary General Office Sought: House Disbursement For: Senate Primary General Office Sought: House Disbursement For: Senate Primary General	Candidate Name			Catagony					od
Senate President Other (specify) Full Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Purpose of Disbursement Payroll Taxes Candidate Name Disbursement For: Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Disbursement FEC Identification Number Category/ Type Office Sought: House Disbursement For: Memory General Other (specify) State: District: Full Name (Last, First, Middle Initial) Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Purpose of Disbursement Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Purpose of Disbursement Payroll Service Fee Candidate Name Category/ Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Transaction ID: VN7ME9ZE6I Amount of Each Disbursement Payroll Service Fee Category/ Type Office Sought: House Disbursement For: 39.10					Amount	Lacii D	isbui seille	ant tins i en	ou
State District: Date of Disbursement Date o	Office Sought: House Disburse	ment For:			11	20 I	1 20 1	39.10	
State: District: Full Name (Last, First, Middle Initial) B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Disbursement For: Senate Primary Other (specify) State: Disbursement Primary Category/ Type Memo Item FEC Identification Number Category/ Transaction ID: VN7ME9ZE63 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Memo Item FEC Identification Number Category/ Type General District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Office Sought: House Disbursement Payroll Service Fee Candidate Name Office Sought: House Senate Primary General Date of Disbursement FEC Identification Number FEC Identification Number Category/ Type Transaction ID: VN7ME9ZE6I Amount of Each Disbursement this Period Transaction ID: VN7ME9ZE6I Amount of Each Disbursement this Period							, , , , ,		
B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Office Sought: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Category/ Type Date of Disbursement Date of Disbursement FEC Identification Number FEC Identification Number FEC Identification Number Category/ Type Transaction ID: VNTME9ZE6I Amount of Each Disbursement this Period Transaction ID: VNTME9ZE6I Amount of Each Disbursement this Period Office Sought: House Disbursement For: Senate Primary General		Other (spe	ecify) 🔻		Memo) Item			
B. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement For: Senate President Other (specify) Memo Item Date of Disbursement FEC Identification Number Category/ Type Other (specify) Date of Disbursement Date of Disbursement this Period FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number FEC Identification Number Category/ Type Office Sought: House Senate Primary General FEC Identification Number Category/ Type FEC Identification Number Salate Category/ Type FEC Identification Number General FEC Identification Number General FEC Identification Number General General FEC Identification Number General FEC Identification Number General General General FEC Identification Number General					_				
City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Category/ State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Primary General Other (specify) Date of Disbursement Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Disbursement For: Category/ Type Date of Disbursement FEC Identification Number Category/ Type Office Sought: House Disbursement For: Senate Primary General					Date of D	isbursem	ent		
Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: House Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Category/ Type Date of Disbursement Ma 01104-3211 FEC Identification Number Category/ Type Date of Disbursement FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Category/ Type Office Sought: House Disbursement For: Senate Primary General Office Sought: House Senate Primary General Office Sought: Anount of Each Disbursement this Period FEC Identification Number Category/ Type Transaction ID: VN7ME9ZE6 Amount of Each Disbursement this Period Transaction ID: VN7ME9ZE6 Amount of Each Disbursement this Period	2. Complete Fayron Solutions				M M			Y Y Y	
Springfield Purpose of Disbursement Payroll Taxes Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Category/ Type Office Sought: House Disbursement Payroll Service Fee Candidate Name Disbursement For: Category/ Type Category/ Type Category/ Type Office Sought: House Disbursement For: Senate Primary General	Mailing Address 1 Carando Dr				07 15 2020				
Purpose of Disbursement Payroll Taxes Candidate Name Category/ Type Office Sought: House Primary General President State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA 01104-3211 Purpose of Disbursement Payroll Service Fee Candidate Name Office Sought: House Disbursement For: Senate Primary General Category/ Type Date of Disbursement FEC Identification Number Category/ Transaction ID: VN7ME9ZE63 Amount of Each Disbursement FEC Identification Number Category/ Transaction ID: VN7ME9ZE64 Amount of Each Disbursement this Period	•		'		FEC Iden	tification	Number		
Payroll Taxes Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Office Sought: House Senate Primary General Disbursement Payroll Service Fee Candidate Name Disbursement For: Category/ Type Category/ Type Office Sought: House Senate Primary General Transaction ID: VN7ME9ZE6 Amount of Each Disbursement FEC Identification Number Category/ Type Transaction ID: VN7ME9ZE6 Amount of Each Disbursement this Period		MA	01104-3211					-	
Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Category/ Type Amount of Each Disbursement this Period Memo Item Date of Disbursement Pip Code O1104-3211 FEC Identification Number Category/ Type Category/ Type Office Sought: House Disbursement For: Senate Primary General									
Office Sought: House Senate Primary General Other (specify) State: District: Memo Item Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Office Sought: House Senate Primary General Disbursement For: Senate Primary General Type Other (specify) Memo Item Date of Disbursement FEC Identification Number Category/ Type Transaction ID: VN7ME9ZE6 Amount of Each Disbursement this Period	Candidate Name			Category/					od
Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield MA O1104-3211 Purpose of Disbursement Payroll Service Fee Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Memo Item Memo Item Date of Disbursement Page Code O1104-3211 FEC Identification Number Category/ Type Transaction ID: VN7ME9ZE6(Amount of Each Disbursement this Period) 39.10					7 tillodill o	Lacil B	iobaroomo	THE THIS T OF	
State: District: Other (specify) Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Office Sought: House Senate Disbursement For: Senate Other (specify) Memo Item Mamo Item Memo Item Memo Item Mamo Item Memo Item Memo Item Memo Item Memo Item Memo Item Memo Item Mamo Item Memo Item Memo Item Mamo Item Date of Disbursement And O1104-3211 FEC Identification Number Category/ Type Office Sought: House Senate Disbursement For: Senate Disbursement For: Senate Other (specify) Memo Item Memo Item	Office Sought: House Disburse	ment For:			1			608.11	
State: District: Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Office Sought: House Disbursement For: Senate Primary General Memo Item An approximately a spring primary and a spri		,				,	,		
Full Name (Last, First, Middle Initial) C. Complete Payroll Solutions Mailing Address 1 Carando Dr City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Office Sought: House Senate Disbursement For: Senate Primary General Date of Disbursement Payroll Service Fee Transaction ID: VN7ME9ZE6 Amount of Each Disbursement this Period		Other (spe	ecify)		Memo) Item			
City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Office Sought: House Senate Date of Disbursement Date of									
City Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Senate State Zip Code 01104-3211 C C Transaction ID: VN7ME9ZE6t Amount of Each Disbursement this Period 39.10	C. Complete Payroll Solutions								
Springfield Purpose of Disbursement Payroll Service Fee Candidate Name Category/ Type Office Sought: House Senate Disbursement For: Senate Primary General FEC Identification Number C Transaction ID: VN7ME9ZE6(Amount of Each Disbursement this Period	Mailing Address 1 Carando Dr				7 1 1				
Springfield MA 01104-3211 Purpose of Disbursement Payroll Service Fee Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General	City	State	Zip Code		EEC Iden	tification	Number		
Payroll Service Fee Candidate Name Category/ Type Office Sought: House Senate Primary General Transaction ID: VN7ME9ZE6(Amount of Each Disbursement this Period		MA	01104-3211		I LO Idell	incation	INGITIDE	-	
Candidate Name Category/ Type Office Sought: House Senate Primary General Category/ Type Amount of Each Disbursement this Period						saction II) · VN7MF	97F6(
Office Sought: House Disbursement For: 39.10 Senate Primary General	Candidate Name							-	od
	Office Sought: House Disburse	ment For:		. , , , ,	1			39.10	
Description Court (1/2)	Senate	Primary						- 4	
President	President	Other (spe	ecify) ▼		Memo	ltem			
State: District:	State: District:				Ц				
SUBTOTAL of Disbursements This Page (optional)	SUBTOTAL of Disbursements This Page (optional).			·····•		7		686.31	
TOTAL This Period (last page this line number only)	TOTAL This Davied (lest years this lies years)	٨							Ī

SCHEDULE B (FEC Form 3X)			l llac concrete cohodulo(c) l				NE NUMBER: PAGE 12 OF 16			
ITEMIZED DISBURSEMENTS			Use separate schedule(s) for each category of the Detailed Summary Page		only 21b	one) 22	23	26	26 27	
	Detailed	28a			28b	28c	29	30b		
Any information copied from s	such Reports and State	ments mav	not be sold or use	ed bv anv	perso	n for the	purpose	of soliciting	a contributio	ons
or for commercial purposes, of										
NAME OF COMMITTEE (I	n Full)									
Perimeter PAC										
Full Name (Last, First, Mid										
A. Complete Payroll	Solutions					Date of	f Disburs			
Mailing Address 1 Carando	Dr					07		B1 / Y	2020	
City		State	Zip Code			FEC Id	entificatio	n Number		
Springfield		MA	01104-3211							
Purpose of Disbursement Payroll Taxes						С				
Candidate Name					-	Transaction ID: VN7ME9ZE64 Amount of Each Disbursement this Period				- ui - al
				Categor Type	y/	Amoun	t of Each	Disburser	nent this Pe	∌riod
Office Sought: Ho	use Disburse	ement For:				Ι.		1 75	605.12	
	nate	Primary	General							
State: District:	esident	Other (spe	ecity) 🔻			Me	mo Item			
Full Name (Last, First, Mid	dle Initial)									
B. Complete Payroll	•					Date o	f Disburs	ement		
						M = M / D = D / Y = Y = Y				
Mailing Address 1 Carand	o Dr					07		31	2020	
City Springfield		State MA	Zip Code 01104-3211			FEC Id	entificatio	n Number		
Purpose of Disbursement			01104 0211		_	С				
Payroll Service Fee				1			nsaction	ID : VN7N	/F9ZF67	
Candidate Name				Categor	y/				nent this Pe	eriod
Office Sought: Ho	use Dishured	mont For:		Туре					39.10	
Office Sought: House Disbursement For: Senate Primary General									00.10	_
President Other (specify)						Mo	emo Item			
State: District:		1				IVIE	ino item			
Full Name (Last, First, Mid	dle Initial)					Doto o	f Disburs	amant		
C. Fahey, Kaitlin, , ,						M M	/ D		TY TY TY	
Mailing Address 2723 Prai	rie Ave					07)1	2020	
City		State	Zip Code			EEC Id	entificatio	n Number		
Evanston		IL	60201-1482				- I mound	rannber		
Purpose of Disbursement Salary				· · ·		C				
Candidate Name Category/					v/			i ID : VN7I Disburser	ME9ZE6I nent this Pe	eriod
				Type	y'	Allioun	t or Edon	Biobarooi	Horit tillo i c	71100
Office Sought: House Disbursement For:									230.87	
Senate Primary General										
☐ President ☐ Other (specify) ▼ State: District:						Me	emo Item			
Diodiot.										=
SUBTOTAL of Disbursement	s This Page (optional).				•		40		875.09)
										一
TOTAL This Period (last page	e this line number only	/)								

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(cricok only one)				
	Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam-						
NAME OF COMMITTEE (In Full) Perimeter PAC						
Full Name (Last, First, Middle Initial) A. Fahey, Kaitlin, , ,			Date of Disbursement			
Mailing Address 2723 Prairie Ave			07 15 2020			
Evanston	State Zip Code IL 60201-1482		FEC Identification Number			
Purpose of Disbursement Salary Candidate Name	Transaction ID : VN7ME9ZE6C Amount of Each Disbursement this Period					
Office Sought: House Disbursem Senate President	Category/ Type	230.88				
State: District:	Other (specify) ▼		Memo Item			
Full Name (Last, First, Middle Initial) B. Fahey, Kaitlin, , , Mailing Address 2723 Prairie Ave	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Evanston	State Zip Code IL 60201-1482		FEC Identification Number			
Purpose of Disbursement Salary Candidate Name	Transaction ID : VN7ME9ZE6H Amount of Each Disbursement this Period					
	nent For: Primary General Other (specify)	Type	230.87 Memo Item			
Full Name (Last, First, Middle Initial) C. Kohnstamm, Paul, W, ,			Date of Disbursement			
Mailing Address 4200 38Th St NW			07 01 2020			
City S Washington Purpose of Disbursement Salary	FEC Identification Number C Transaction ID : VN7ME9ZE6					
Candidate Name		Category/ Type	Amount of Each Disbursement this Period			
	nent For: Primary General Other (specify) ▼		439.66 Memo Item			
SUBTOTAL of Disbursements This Page (optional)			901.41			
TOTAL This Period (last page this line number only).						

SCHEDULE B (FEC Form 3X)						PAGE	14 OF	16
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		y one)	□ 23 [26 27	
	Detailed	Detailed Summary Page		28b	28c	29	30b	
Any information copied from such Reports and State	ments mav	not be sold or use	ed by any pers	son for the pu	rpose of	soliciting	contribution	
or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
Perimeter PAC								
Full Name (Last, First, Middle Initial)								
A. Kohnstamm, Paul, W, ,				Date of D	isbursen			
Mailing Address 4200 38Th St NW				07	15		2020	
City	State	Zip Code		FEC Iden	tification	Number		
Washington	DC	20016-2220			inoation	Tumber		
Purpose of Disbursement Salary				C				
Candidate Name			لبييا			D : VN7ME		
Canadate Hamo			Category/ Type	Amount o	t Each L	Disburseme	ent this Per	riod
Office Sought: House Disburse	ment For:		71: -	1 []			439.66	
Senate	Primary	General			,			
State: District:	Other (spe	ecify) 🔻		Memo	Item			
Full Name (Last, First, Middle Initial)								
B. Kohnstamm, Paul, W, ,				Date of D	isbursen	nent		
				M M / D D / Y Y Y Y				1
Mailing Address 4200 38Th St NW				07	31		2020	
City	State DC	Zip Code		FEC Iden	tification	Number		
Washington Purpose of Disbursement	ЪС	20016-2220		C				
Salary					aatian II	D : VN7ME	07560	
Candidate Name			Category/	1			ent this Per	riod
Office Country			Type				420.66	
Office Sought: House Disbursement For: Senate Primary General							439.66	
President	п							
State: District:	Other (spe			Memo	Item			
Full Name (Last, First, Middle Initial)								
C. Medvedec, Monica, , ,				Date of D				
Mailing Address 1920 14Th St NW				07	01		2020	
Apt 629								
	State DC	Zip Code 20009-3770		FEC Iden	tification	Number		
Washington Purpose of Disbursement		20009-3770		C				
Salary					saction I	D : VN7ME	97F6.	
Candidate Name			Category/				ent this Per	riod
Office Sought: House Disburse	ment For		Туре				1182.69	
Office Sought: House Disbursement For: Senate Primary General					7	7	. 102.00	
President Other (specify) ▼				Mama	ltom			
State: District:					Item			
							0000 5	$\overline{}$
SUBTOTAL of Disbursements This Page (optional).			············ >		7		2062.01	
TOTAL This Period (last page this line number only	<u> </u>							

ľ

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		FOR LINE NUMBER: PAGE 15 OF 16 (check only one)				
		Detailed Summary Page		22 23 26 27 28b 28c 29 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full) Perimeter PAC							
Full Name (Last, First, Middle Initial) A. Medvedec, Monica, , ,		Date of Disbursement					
Mailing Address 1920 14Th St NW Apt 629				07 15 2020			
City Washington		FEC Identification Number					
Purpose of Disbursement Salary Candidate Name	Category/	Transaction ID : VN7ME9ZE6F Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President	Type	1182.69					
State: District: Full Name (Last, First, Middle Initial) B. Medvedec, Monica, , , Mailing Address 1920 14Th St NW Apt 629				Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Washington Purpose of Disbursement Salary Candidate Name	State DC	Zip Code 20009-3770		FEC Identification Number C Transaction ID: VN7ME9ZE6N			
Office Sought: House Senate President State: Disburse	ement For: Primary Other (spec	General	Category/ Type	Amount of Each Disbursement this Period 1182.69 Memo Item			
Full Name (Last, First, Middle Initial) C. NGP VAN, Inc.				Date of Disbursement			
Mailing Address 1101 15Th St NW Ste 500	lo	T 0 1		07 06 2020			
City Washington Purpose of Disbursement Database Services Candidate Name	State DC	Zip Code 20005-5006	Category/ Type	FEC Identification Number C Transaction ID: VN7ME9ZE6! Amount of Each Disbursement this Period			
Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General Telephone		300.00 Memo Item			

ľ

SCHEDULE B (FEC Form 3X)	Use separate schedule		FOR LINE NUMBER: PAGE 16 OF 16 (check only one)				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	e (check only	22 23 26 27 28b 28c 29 30b				
Any information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)	, po						
Perimeter PAC							
Full Name (Last, First, Middle Initial)							
The Hartford			Date of Disbursement				
Mailing Address PO Box 660916			07 01 2020				
,	State Zip Code		FEC Identification Number				
Dallas Purpose of Disbursement	TX 75266-0916)	0				
Insurance			C				
Candidate Name			Transaction ID : VN7ME9ZE6L				
		Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disbursen	nent For:	.,,,,,	31.00				
	Primary General	I	7 7				
President State: District:	Other (specify) ▼		Memo Item				
Full Name (Last, First, Middle Initial)							
3. Verdolino & Lowey, PC			Date of Disbursement				
Mailing Address 124 Washington St Ste 101			07 22 2020				
,	State Zip Code MA 02035-1368	o	FEC Identification Number				
Foxboro Purpose of Disbursement	С						
Accounting & Compliance							
Candidate Name	Transaction ID: VN7ME9ZE6E Amount of Each Disbursement this Period						
Office Sought: House Disbursem	nent For:	Туре	1006.50				
	Primary General	I	7 7				
State: President District:	Other (specify)		Memo Item				
Full Name (Last, First, Middle Initial)			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address			m = m / D = D / T = T = T = T				
City	State Zip Code		FEC Identification Number				
Purpose of Disbursement	C						
Candidate Name	Amount of Each Disbursement this Period						
Office Sought: House Disbursen	nent For:	Type					
	Primary General	I	4 4				
	Other (specify) ▼		Memo Item				
State: District:			Memo item				
CUPTOTAL of Dights compared This Days (anti-ser)			1037.50				
SUBTOTAL of Disbursements This Page (optional)		·····	1007.50				
TOTAL This Period (last page this line number only)			8877.30				