

**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

Perimeter PAC

ADDRESS (number and street)

124 Washington Street

Suite 101

Check if different
than previously
reported. (ACC)

Foxboro

MA

02035

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00544254

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2020

through

M M M / D D D / Y Y Y Y Y Y
07 31 2020

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

Lowey, Keith, D., ,

Type or Print Name of Treasurer

Signature of Treasurer

Lowey, Keith, D., ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
08 20 2020

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Perimeter PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07		01		2020

To:

M M	/	D D	/	Y Y Y Y Y
07		31		2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2020</td></tr></table>	Y	Y	Y	Y	Y	2020						<table><tr><td colspan="5">84292.16</td></tr></table>	84292.16				
Y	Y	Y	Y	Y													
2020																	
84292.16																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">31680.70</td></tr></table>	31680.70															
31680.70																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">13550.00</td></tr></table>	13550.00					<table><tr><td colspan="5">118941.58</td></tr></table>	118941.58									
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).....	<table><tr><td colspan="5">45230.70</td></tr></table>	45230.70					<table><tr><td colspan="5">203233.74</td></tr></table>	203233.74									
45230.70																	
203233.74																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">8916.43</td></tr></table>	8916.43					<table><tr><td colspan="5">166919.47</td></tr></table>	166919.47									
8916.43																	
166919.47																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">36314.27</td></tr></table>	36314.27					<table><tr><td colspan="5">36314.27</td></tr></table>	36314.27									
36314.27																	
36314.27																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Perimeter PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
07	/	01	/	2020

To:

M M	/	D D	/	Y Y Y Y
07	/	31	/	2020

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).....

4000.00

16250.00

(ii) Unitemized

50.00

635.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

4050.00

16885.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

9500.00

79500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

13550.00

96385.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

22500.00

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

56.58

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

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

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

13550.00

118941.58

20. 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
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	8916.43	49419.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8916.43	49419.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	102500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	15000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8916.43	166919.47
32. 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
33. Total Contributions (other than loans) (from Line 11(d), page 3)	13550.00	96385.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13550.00	96385.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	8916.43	49419.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	56.58
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	8916.43	49362.89

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

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

FOR LINE NUMBER: PAGE 6 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Perimeter PAC

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

A. Daschle, Thomas, , ,

Mailing Address 1155 23Rd St NW

Apt 7A

City

Washington

State

DC

Zip Code

20037-3308

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Daschle Group

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2020

Transaction ID : VN8KPFJ0846

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

B. Eggert, Carol, , ,

Mailing Address 251 Foxgayte Ln

City

Pottstown

State

PA

Zip Code

19465-8544

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Comcast

Occupation (for Individual)

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2020

Transaction ID : VN8KPFJB0A3

Amount of Each Receipt this Period

1000.00

☐ Memo Item

* Earmarked Contribution: See Below

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

C. ActBlue

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2020

Transaction ID : VN8KPFJB0A3E

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

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

3500.00

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 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Perimeter PAC

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

A. Leon, Pete, , ,

Mailing Address 2006 Columbia Rd NW
Apt 7

City
Washington

State
DC

Zip Code
20009-1320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Scrivner Leon Group, LLC

Occupation (for Individual)
Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 24 / 2020

Transaction ID : VN8KPFJB0D7

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

500.00

4000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 16

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Perimeter PAC

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

A. American Society Of Anesthesiologists Political Action Committee (ASA PAC)

Mailing Address 1061 American Ln

City
Schaumburg

State
IL

Zip Code
60173-4973

FEC ID number of contributing
federal political committee.

C C00255752

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

07 / **27** / **2020**

Transaction ID : VN8KPFJHY70

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

B. BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)

Mailing Address PO Box 961039

City
Fort Worth

State
TX

Zip Code
76161-0039

FEC ID number of contributing
federal political committee.

C C00235739

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

07 / **21** / **2020**

Transaction ID : VN8KPFJ0812

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

C. National Emergency Medicine Political Action Committee / American College Of Emergency Physicians

Mailing Address 4950 W Royal Ln

City
Irving

State
TX

Zip Code
75063-2524

FEC ID number of contributing
federal political committee.

C C00140061

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

07 / **27** / **2020**

Transaction ID : VN8KPFJB0C9

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

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

6500.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 16

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

Perimeter PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NCTA - The Internet And Television Association Political Action Committee (NCTA PAC)

Mailing Address 25 Massachusetts Ave NW
Ste 100

City
Washington

State
DC

Zip Code
20001-1434

FEC ID number of contributing
federal political committee.

C

C00010082

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2020

Transaction ID : VN8KPFJHY88

Amount of Each Receipt this Period

2500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WILLIAMS AND JENSEN, PLLC POLITICAL ACTION COMMITTEE

Mailing Address 1201 Pennsylvania Ave NW
Ste 800

City
Washington

State
DC

Zip Code
20004-2401

FEC ID number of contributing
federal political committee.

C

C00039206

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2020

Transaction ID : VN8KPFJ07Z6

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

3000.00

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

9500.00

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

PAGE 10 OF 16

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

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NAME OF COMMITTEE (In Full)

Perimeter PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer St

City
West SomervilleState
MAZip Code
02144-3132Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		19		2020

FEC Identification Number

C

Transaction ID : VN7ME9ZDRI

Amount of Each Disbursement this Period

1.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer St

City
West SomervilleState
MAZip Code
02144-3132Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		26		2020

FEC Identification Number

C

Transaction ID : VN7ME9ZDY2

Amount of Each Disbursement this Period

39.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Complete Payroll Solutions

Mailing Address 1 Carando Dr

City
SpringfieldState
MAZip Code
01104-3211Purpose of Disbursement
Payroll Taxes

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2020

FEC Identification Number

C

Transaction ID : VN7ME9ZE6;

Amount of Each Disbursement this Period

608.12

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

649.60

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

PAGE 11 OF 16

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

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NAME OF COMMITTEE (In Full)

Perimeter PAC

Full Name (Last, First, Middle Initial)

A. Complete Payroll Solutions

Mailing Address 1 Carando Dr

City
SpringfieldState
MAZip Code
01104-3211Purpose of Disbursement
Payroll Service Fee

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2020

FEC Identification Number

C

Transaction ID : VN7ME9ZE65

Amount of Each Disbursement this Period

39.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Complete Payroll Solutions

Mailing Address 1 Carando Dr

City
SpringfieldState
MAZip Code
01104-3211Purpose of Disbursement
Payroll Taxes

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		15		2020

FEC Identification Number

C

Transaction ID : VN7ME9ZE63

Amount of Each Disbursement this Period

608.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Complete Payroll Solutions

Mailing Address 1 Carando Dr

City
SpringfieldState
MAZip Code
01104-3211Purpose of Disbursement
Payroll Service Fee

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		15		2020

FEC Identification Number

C

Transaction ID : VN7ME9ZE61

Amount of Each Disbursement this Period

39.10

☐ Memo Item

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

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

686.31

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

PAGE 12 OF 16

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

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NAME OF COMMITTEE (In Full)

Perimeter PAC

Full Name (Last, First, Middle Initial)

A. Complete Payroll Solutions

Mailing Address 1 Carando Dr

City
SpringfieldState
MAZip Code
01104-3211Purpose of Disbursement
Payroll Taxes

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	2	0		

FEC Identification Number

C

Transaction ID : VN7ME9ZE64

Amount of Each Disbursement this Period

605.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Complete Payroll Solutions

Mailing Address 1 Carando Dr

City
SpringfieldState
MAZip Code
01104-3211Purpose of Disbursement
Payroll Service Fee

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	2	0		

FEC Identification Number

C

Transaction ID : VN7ME9ZE67

Amount of Each Disbursement this Period

39.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fahey, Kaitlin, , ,

Mailing Address 2723 Prairie Ave

City
EvanstonState
ILZip Code
60201-1482Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	1			2	0	2	0		

FEC Identification Number

C

Transaction ID : VN7ME9ZE61

Amount of Each Disbursement this Period

230.87

☐ Memo Item

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

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

875.09

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

PAGE 13 OF 16

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

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NAME OF COMMITTEE (In Full)

Perimeter PAC

Full Name (Last, First, Middle Initial)

A. Fahey, Kaitlin, , ,

Mailing Address 2723 Prairie Ave

City
EvanstonState
ILZip Code
60201-1482Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		15		2020

FEC Identification Number

C

Transaction ID : VN7ME9ZE6C

Amount of Each Disbursement this Period

 230.88☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Fahey, Kaitlin, , ,

Mailing Address 2723 Prairie Ave

City
EvanstonState
ILZip Code
60201-1482Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2020

FEC Identification Number

C

Transaction ID : VN7ME9ZE6H

Amount of Each Disbursement this Period

 230.87☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kohnstamm, Paul, W, ,

Mailing Address 4200 38Th St NW

City
WashingtonState
DCZip Code
20016-2220Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2020

FEC Identification Number

C

Transaction ID : VN7ME9ZE6,

Amount of Each Disbursement this Period

 439.66☐ Memo Item

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

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

 901.41

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

PAGE 14 OF 16

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

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NAME OF COMMITTEE (In Full)

Perimeter PAC

Full Name (Last, First, Middle Initial)

A. Kohnstamm, Paul, W, ,

Mailing Address 4200 38Th St NW

City
WashingtonState
DCZip Code
20016-2220Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	2	0		

FEC Identification Number

C

Transaction ID : VN7ME9ZE6E

Amount of Each Disbursement this Period

439.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kohnstamm, Paul, W, ,

Mailing Address 4200 38Th St NW

City
WashingtonState
DCZip Code
20016-2220Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	2	0		

FEC Identification Number

C

Transaction ID : VN7ME9ZE6C

Amount of Each Disbursement this Period

439.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Medvedec, Monica, , ,

Mailing Address 1920 14Th St NW
Apt 629City
WashingtonState
DCZip Code
20009-3770Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	1			2	0	2	0		

FEC Identification Number

C

Transaction ID : VN7ME9ZE6.

Amount of Each Disbursement this Period

1182.69

☐ Memo Item

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

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

2062.01

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

PAGE 15 OF 16

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

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NAME OF COMMITTEE (In Full)

Perimeter PAC

Full Name (Last, First, Middle Initial)

A. Medvedec, Monica, , ,Mailing Address 1920 14Th St NW
Apt 629City
WashingtonState
DCZip Code
20009-3770Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		15		2020

FEC Identification Number

C

Transaction ID : VN7ME9ZE61

Amount of Each Disbursement this Period

1182.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Medvedec, Monica, , ,Mailing Address 1920 14Th St NW
Apt 629City
WashingtonState
DCZip Code
20009-3770Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2020

FEC Identification Number

C

Transaction ID : VN7ME9ZE61

Amount of Each Disbursement this Period

1182.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VAN, Inc.Mailing Address 1101 15Th St NW
Ste 500City
WashingtonState
DCZip Code
20005-5006Purpose of Disbursement
Database Services

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		06		2020

FEC Identification Number

C

Transaction ID : VN7ME9ZE61

Amount of Each Disbursement this Period

300.00

☐ Memo Item

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

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

2665.38

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

PAGE 16 OF 16

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

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NAME OF COMMITTEE (In Full)

Perimeter PAC

Full Name (Last, First, Middle Initial)

A. The Hartford

Mailing Address PO Box 660916

City
DallasState
TXZip Code
75266-0916Purpose of Disbursement
Insurance

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2020

FEC Identification Number

C**Transaction ID : VN7ME9ZE6I**

Amount of Each Disbursement this Period

31.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Verdolino & Lowey, PCMailing Address 124 Washington St
Ste 101City
FoxboroState
MAZip Code
02035-1368Purpose of Disbursement
Accounting & Compliance

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2020

FEC Identification Number

C**Transaction ID : VN7ME9ZE6E**

Amount of Each Disbursement this Period

1006.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

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

1037.50

8877.30