

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.

L PAC

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

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

Rosen, Hilary, , ,

Type or Print Name of Treasurer

Signature of Treasurer Rosen, Hilary, , , [Electronically Filed] Date / /

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									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

L PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		9498.11
(b) Cash on Hand at Beginning of Reporting Period.....	4283.58	
(c) Total Receipts (from Line 19)	194724.00	441219.66
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	199007.58	450717.77
7. Total Disbursements (from Line 31).....	130734.01	382444.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	68273.57	68273.57
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 multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

L PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	85180.00	146688.00
(ii) Unitemized	9400.50	13370.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	94580.50	160058.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	7000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	99580.50	167058.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	95143.50	274161.16
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)).....▶	194724.00	441219.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	194724.00	441219.66

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	3885.81	6682.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3885.81	6682.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	34500.00
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	250.00	600.00
(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)).....	250.00	600.00
29. Other Disbursements (Including Non-Federal Donations).....	109098.20	340661.55
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)) ..	130734.01	382444.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	130734.01	382444.20

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	99580.50	167058.50
34. Total Contribution Refunds (from Line 28(d))	250.00	600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	99330.50	166458.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3885.81	6682.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3885.81	6682.65

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

Correction to properly report 2 receipts on Line 17 that were mistakenly reported on Line 11(a)(i) on the original filing.
Correction of a data entry error regarding Schedule B contribution periods.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
L PAC

A. Achtenberg, Roberta, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 456 Hill St
 City San Francisco State CA Zip Code 94114-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bank Of San Francisco Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 24 / 2020
Transaction ID : VNW3HJ4PC72
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Allman, Kimberly, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5622 Ogden Rd
 City Bethesda State MD Zip Code 20816-3324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NortonLifeLock Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 17 / 2020
Transaction ID : VNW3HHX68B4
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Allman, Kimberly, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5622 Ogden Rd
 City Bethesda State MD Zip Code 20816-3324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NortonLifeLock Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 22 / 2020
Transaction ID : VNW3HJ4JQS4
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Anderson, Kelli, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1884
 City Sonoma State CA Zip Code 95476-1884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Various Occupation (for Individual) Journalist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2020
Transaction ID : VNW3HJ80PP6
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. Anderson, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1615 King St
 City Santa Cruz State CA Zip Code 95060-5203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Palantir Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2020
Transaction ID : VNW3HJ2XGB2
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Aptekar, Denise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Beale St Apt 406
 City San Francisco State CA Zip Code 94105-5004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2020
Transaction ID : VNW3HHS6XW4
 Amount of Each Receipt this Period
 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Aptekar, Denise, , ,		Date of Receipt MM / DD / YYYY 07 / 23 / 2020 Transaction ID : VNW3HHS6Y13
Mailing Address 300 Beale St Apt 406		Amount of Each Receipt this Period 100.00
City San Francisco	State CA	Zip Code 94105-5004
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Aptekar, Denise, , ,		Date of Receipt MM / DD / YYYY 08 / 13 / 2020 Transaction ID : VNW3HHVPXX2
Mailing Address 300 Beale St Apt 406		Amount of Each Receipt this Period 50.00
City San Francisco	State CA	Zip Code 94105-5004
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Aptekar, Denise, , ,		Date of Receipt MM / DD / YYYY 09 / 22 / 2020 Transaction ID : VNW3HJ4HV07
Mailing Address 300 Beale St Apt 406		Amount of Each Receipt this Period 25.00
City San Francisco	State CA	Zip Code 94105-5004
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 825.00	

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Baccash, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 N Mountain Ave
 City Montclair State NJ Zip Code 07042-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Goldman Sachs Occupation (for Individual) Banker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 29 / 2020
Transaction ID : VNW3HJ6MZQ6
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Barnes, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6911 S Euclid Ave
 City Chicago State IL Zip Code 60649-1511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) City Tech Collaborative Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 19 / 2020
Transaction ID : VNW3HHRPG68
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Barnes, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6911 S Euclid Ave
 City Chicago State IL Zip Code 60649-1511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) City Tech Collaborative Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2020
Transaction ID : VNW3HJ4HT06
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Barua, Nandini, , ,		Date of Receipt MM / DD / YYYY 07 / 22 / 2020
Mailing Address 4250 Paddock Ln		Transaction ID : VNW3HHS6RR0
City Prosper	State TX	Zip Code 75078-1801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Beyond Barriers LLC	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Barua, Nandini, , ,		Date of Receipt MM / DD / YYYY 09 / 18 / 2020
Mailing Address 4250 Paddock Ln		Transaction ID : VNW3HJ34HJ6
City Prosper	State TX	Zip Code 75078-1801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Beyond Barriers LLC	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Bennett, Jim, , ,		Date of Receipt MM / DD / YYYY 09 / 22 / 2020
Mailing Address 5353 N Magnolia Ave		Transaction ID : VNW3HJ4JNK3
City Chicago	State IL	Zip Code 60640-2204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) IDHR	Occupation (for Individual) Director	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bennetts, Geni, , ,		Date of Receipt
Mailing Address 10 Lupine Hill Rd		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2020"/>
City Napa	State CA	Zip Code 94558-3819
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HJ31VY8
Name of Employer (for Individual) Self Employed		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Occupation (for Individual) Resolve Healthcare Consulting LLC (Ph		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Biskupski, Jackie, , ,		Date of Receipt
Mailing Address 1519 S 1900 E		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2020"/>
City Salt Lake City	State UT	Zip Code 84108-2653
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HJ2YBV5
Name of Employer (for Individual) Not Employed		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) Retired		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Boyman, Kym, , ,		Date of Receipt
Mailing Address 1391 Robinson Rd		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2020"/>
City Ferrisburgh	State VT	Zip Code 05456-9663
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HJ4PH89
Name of Employer (for Individual) Vermont Gynecology		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) Physician		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 85
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Buckwalter-Poza, Rebecca, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1447 Chapin St NW
 Apt 301
 City Washington State DC Zip Code 20009-4100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Justice Collaborative Occupation (for Individual) Senior Strategist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **09 / 20 / 2020**
Transaction ID : VNW3HJ3N0X9
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Byrne, Jane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 W 18Th St
 Apt 304
 City New York State NY Zip Code 10011-4170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) McDermott Will & Emory Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 08 / 2020**
Transaction ID : VNW3HHNHQA8
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Cherry, Elyse, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 Cotswold Rd
 City Brookline State MA Zip Code 02445-5837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BlueHub Capital Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 08 / 2020**
Transaction ID : VNW3HHNHQP7
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Cherry, Elyse, , ,		Date of Receipt MM / DD / YYYY 09 / 24 / 2020
Mailing Address 46 Cotswold Rd		Transaction ID : VNW3HJ4PA29
City Brookline	State MA	Zip Code 02445-5837
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) BlueHub Capital	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1025.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cofrin, Edith, , ,		Date of Receipt MM / DD / YYYY 08 / 20 / 2020
Mailing Address 1074 Berkshire Rd NE		Transaction ID : VNW3HHXES21
City Atlanta	State GA	Zip Code 30306-3002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Davis, Natalie, , ,		Date of Receipt MM / DD / YYYY 09 / 24 / 2020
Mailing Address PO Box 19164		Transaction ID : VNW3HJC3EH0
City Fort Worth	State TX	Zip Code 76119-1164
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) UHC	Occupation (for Individual) SCE	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶	1025.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
502.50

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2020
Transaction ID : VNW3HJC3EH0E

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Dee, Sally, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1803 W Hills Ave

City Tampa	State FL	Zip Code 33606-3224
---------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Playbook Public Relations Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2020
Transaction ID : VNW3HJ4PBT9

Amount of Each Receipt this Period
250.00

Memo Item

C. DiCarlo, Diane, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 65 Wellesley Ave

City Needham Heights	State MA	Zip Code 02494-1821
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Retired Retired

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
09 / 18 / 2020
Transaction ID : VNW3HJ31YA6

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Engsborg, Hope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1680 Quebec St
 City Denver State CO Zip Code 80220-1962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AgeWellMD Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2020
Transaction ID : VNW3HJ4N428
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Engsborg, Hope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1680 Quebec St
 City Denver State CO Zip Code 80220-1962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AgeWellMD Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 24 / 2020
Transaction ID : VNW3HJ4PC56
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Esty, Brittany, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Naples Rd
 City Brookline State MA Zip Code 02446-5851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Boston Childrens Hospital Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 18 / 2020
Transaction ID : VNW3HJ34J14
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Fato, Lucy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 275 Central Park W
 Apt 16C
 City New York State NY Zip Code 10024-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIG Lawyer
 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
 09 / 16 / 2020
Transaction ID : VNW3HJ2ZPM3
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Felicio, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 Westchester Rd
 City Jamaica Plain State MA Zip Code 02130-3451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 The Health Initiative COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2020
Transaction ID : VNW3HHS6W91
 Amount of Each Receipt this Period
 3000.00
 Memo Item

C. Field, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 177 9Th Ave
 Apt PHC
 City New York State NY Zip Code 10011-4969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Field Real Estate Holdings Real Estate Consultant
 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 / 06 / 2020
Transaction ID : VNW3HHNE3A3
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Franchot, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1819 Humboldt Ave S
 City Minneapolis State MN Zip Code 55403-2814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2020
Transaction ID : VNW3HJ4N5T8
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Garrity, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11920 Latigo Ln
 City Oakton State VA Zip Code 22124-2313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 17 / 2020
Transaction ID : VNW3HJ31V43
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Glick, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 Bank St Apt 3Q
 City New York State NY Zip Code 10014-5909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS Assembly Occupation (for Individual) State Legislator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2020
Transaction ID : VNW3HJ4C9C5
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Goldberg, Phillip, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2323 N Janssen Ave

City Chicago	State IL	Zip Code 60614-3019
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Foley & Lardner LLP	Occupation (for Individual) Attorney
--	---

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
09	/	21	/	2020

Transaction ID : VNW3HJ441Z6

Amount of Each Receipt this Period
1000.00

Memo Item

B. Greer, Lynn, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4865 Lakeridge Ter W

City Reno	State NV	Zip Code 89509-5850
--------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Realtor
--	--

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
08	/	07	/	2020

Transaction ID : VNW3HHTXW97

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 395 Riverside Dr
Apt 11F

City New York	State NY	Zip Code 10025-1892
------------------	-------------	------------------------

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

Name of Employer (for Individual) BET Networks	Occupation (for Individual) Television Executive
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2020

Transaction ID : VNW3HHS GP56

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Hallahan, Kate, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 629 Constitution Ave NE
 Apt 304
 City Washington State DC Zip Code 20002-6086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Team Hallahan LLC Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 31 / 2020
Transaction ID : VNW3HHST1H4
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Hatch, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 475 Park Ave S
 Rm 2100
 City New York State NY Zip Code 10016-6904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Christopher Street Financial Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 09 / 2020
Transaction ID : VNW3HHNKBF7
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Haycox, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 John St
 Fl 23
 City New York State NY Zip Code 10038-3109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Habitat For Humanity NYC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 15 / 2020
Transaction ID : VNW3HJ2XFH8
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Herz, Diane, , ,			Date of Receipt MM / DD / YYYY 09 / 20 / 2020
Mailing Address 4603 Drexel Rd			Transaction ID : VNW3HJ3N0P6
City College Park	State MD	Zip Code 20740-3603	Amount of Each Receipt this Period 525.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Social Research Centre (Australia)		Occupation (for Individual) CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 525.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hey, Jean, , ,			Date of Receipt MM / DD / YYYY 08 / 02 / 2020
Mailing Address 4 Calvin Rd			Transaction ID : VNW3HHSV8P6
City Jamaica Plain	State MA	Zip Code 02130-3415	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self Employed		Occupation (for Individual) Writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Heyen, Shari, , ,			Date of Receipt MM / DD / YYYY 09 / 16 / 2020
Mailing Address 5111 Longmont Dr			Transaction ID : VNW3HJ2ZT12
City Houston	State TX	Zip Code 77056-2417	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Greenberg Traurig LLP		Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1525.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 23 OF 85
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Holloway, Jane, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2202 Decatur PI NW

City Washington	State DC	Zip Code 20008-4008
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2020

Transaction ID : VNW3HHX6865

Amount of Each Receipt this Period
1000.00

Memo Item

B. Hoover, Kimberly, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 Brickell Plz
Unit 2912

City Miami	State FL	Zip Code 33131-3853
---------------	-------------	------------------------

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

Name of Employer (for Individual) Red Multifamily	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2020

Transaction ID : VNW3HHSNBM1

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1000 Brickell Plz
Unit 2912

City Miami	State FL	Zip Code 33131-3853
---------------	-------------	------------------------

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

Name of Employer (for Individual) Red Multifamily	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2020

Transaction ID : VNW3HHY8849

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Hoover, Kimberly, , ,		Date of Receipt MM / DD / YYYY 09 / 28 / 2020 Transaction ID : VNW3HJ62AN3
Mailing Address 1000 Brickell Plz Unit 2912		Amount of Each Receipt this Period 100.00
City Miami	State FL	Zip Code 33131-3853
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Red Multifamily	Occupation (for Individual) CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Huth, Elaine, , ,		Date of Receipt MM / DD / YYYY 09 / 15 / 2020 Transaction ID : VNW3HJ2XFG0
Mailing Address 8730 Marianna Dr		Amount of Each Receipt this Period 25.00
City Forestville	State CA	Zip Code 95436-9658
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self	Occupation (for Individual) Retired Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Jones, Kathleen, , ,		Date of Receipt MM / DD / YYYY 08 / 28 / 2020 Transaction ID : VNW3HHY19V5
Mailing Address 11220 72Nd Dr Apt D16		Amount of Each Receipt this Period 300.00
City Forest Hills	State NY	Zip Code 11375-5655
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Unemployed	Occupation (for Individual) Unemployed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
L PAC

A. Jones, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11220 72Nd Dr
 Apt D16
 City Forest Hills State NY Zip Code 11375-5655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Unemployed Occupation (for Individual) Unemployed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 22 / 2020
Transaction ID : VNW3HJ4HTJ8
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Karp, Erika, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 E 77Th St
 Apt 1919
 City New York State NY Zip Code 10162-0007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cornerstone Capital Inc. Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 27 / 2020
Transaction ID : VNW3HHSM9Q3
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Kauffman, Joyce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 Clarendon Park
 City Roslindale State MA Zip Code 02131-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2020
Transaction ID : VNW3HJ6N9N1
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
L PAC

A. Kaufmann-Paulman, Sunnie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 Everett St
 City Arlington State MA Zip Code 02474-6904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Greater Boston PFLAG Occupation (for Individual) Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 09 / 2020
Transaction ID : VNW3HHNJQD8
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Kaufmann-Paulman, Sunnie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 Everett St
 City Arlington State MA Zip Code 02474-6904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Greater Boston PFLAG Occupation (for Individual) Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 09 / 2020
Transaction ID : VNW3HHTY2Y5
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Kaufmann-Paulman, Sunnie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 Everett St
 City Arlington State MA Zip Code 02474-6904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Greater Boston PFLAG Occupation (for Individual) Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 09 / 2020
Transaction ID : VNW3HJ25RW5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Koenig, Ray, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4154 N Leavitt St
 Ste 3900
 City Chicago State IL Zip Code 60618-2960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Clark Hill PLC Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2020
Transaction ID : VNW3HJ4N222
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Koffman, Betsy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Plaza Dr
 City Vestal State NY Zip Code 13850-3647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Deerfield Place Occupation (for Individual) Start-Up Business Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 24 / 2020
Transaction ID : VNW3HJ4NV17
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Kristel, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 W 115Th St
 5G
 City New York State NY Zip Code 10026-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) McCormack+Kristel Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 05 / 2020
Transaction ID : VNW3HHTBN98
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Laguens, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2006 Ashby Ave
 City Austin State TX Zip Code 78704-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Planned Parenthood Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt **07 / 11 / 2020**
Transaction ID : VNW3HHR9DM8
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Laguens, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2006 Ashby Ave
 City Austin State TX Zip Code 78704-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Planned Parenthood Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt **08 / 11 / 2020**
Transaction ID : VNW3HHV1NA0
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Laguens, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2006 Ashby Ave
 City Austin State TX Zip Code 78704-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Planned Parenthood Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt **09 / 11 / 2020**
Transaction ID : VNW3HJ2TEZ2
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Linsky, Lisa, , ,			Date of Receipt MM / DD / YYYY 09 / 15 / 2020
Mailing Address 26 Evergreen Way			Transaction ID : VNW3HJ2XFP6
City Sleepy Hollow	State NY	Zip Code 10591-1119	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) McDermott		Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 525.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lorber, Jacqueline, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2020
Mailing Address 2015 SW 25Th Ter			Transaction ID : VNW3HJ77P79
City Fort Lauderdale	State FL	Zip Code 33312-4576	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) S FL Symphony		Occupation (for Individual) CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Marks, Wendy, , ,			Date of Receipt MM / DD / YYYY 09 / 17 / 2020
Mailing Address 11 Riverside Drive #11 NW Apt 11NW			Transaction ID : VNW3HJ2ZZN9
City New York	State NY	Zip Code 10023	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Educator		Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Miller-Stevens, Taryn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 238 W 108Th St
 Apt 3
 City New York State NY Zip Code 10025-2997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) All The Things Consulting LLC Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 12 / 2020
Transaction ID : VNW3HHVPSY2
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Milligan, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3019 3Rd St
 Unit 301
 City Santa Monica State CA Zip Code 90405-5489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Silverman & Milligan Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2020
Transaction ID : VNW3HJ44202
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Mondini, Elena J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1326 Laurel Ave
 City Ocean State NJ Zip Code 07712-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 04 / 2020
Transaction ID : VNW3HHN9TT8
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Mondini, Elena J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1326 Laurel Ave
 City Ocean State NJ Zip Code 07712-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 04 / 2020
Transaction ID : VNW3HHT4F33
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Mondini, Elena J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1326 Laurel Ave
 City Ocean State NJ Zip Code 07712-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 04 / 2020
Transaction ID : VNW3HJ23082
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Moran, Kara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 9Th St
 City Virginia Beach State VA Zip Code 23451-4546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Suffolk Sales And Service Occupation (for Individual) Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 18 / 2020
Transaction ID : VNW3HJ34TK2
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Morse, Gail, , ,		Date of Receipt MM / DD / YYYY 09 / 21 / 2020
Mailing Address 3739 N Wilton Ave 2		Transaction ID : VNW3HJ3RSR9
City Chicago	State IL	Zip Code 60613-0342
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Jenner & Block	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nelson, Karen, , ,		Date of Receipt MM / DD / YYYY 08 / 18 / 2020
Mailing Address 10115 Colonial Country Club Blvd Apt 2103		Transaction ID : VNW3HHX94X1
City Fort Myers	State FL	Zip Code 33913-6656
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Artist	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Nelson, Karen, , ,		Date of Receipt MM / DD / YYYY 09 / 24 / 2020
Mailing Address 10115 Colonial Country Club Blvd Apt 2103		Transaction ID : VNW3HJ4NWX1
City Fort Myers	State FL	Zip Code 33913-6656
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Artist	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	675.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Newstat, Joyce, , ,		Date of Receipt MM / DD / YYYY 08 / 18 / 2020 Transaction ID : VNW3HHX93M9
Mailing Address 1200 California St 27C		Amount of Each Receipt this Period 500.00
City San Francisco	State CA	Zip Code 94109-0001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Policy Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Novak Milliken, Beth, , ,		Date of Receipt MM / DD / YYYY 09 / 23 / 2020 Transaction ID : VNW3HJ4NBA4
Mailing Address 1256 Hudson Ave		Amount of Each Receipt this Period 500.00
City Saint Helena	State CA	Zip Code 94574-1920
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Spottswoode Winery, Inc.	Occupation (for Individual) President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pellett, Clark, , ,		Date of Receipt MM / DD / YYYY 09 / 28 / 2020 Transaction ID : VNW3HJ50XY8
Mailing Address 680 W North Ave Horedr		Amount of Each Receipt this Period 2500.00
City Chicago	State IL	Zip Code 60610-1000
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Pizer, Jonathan, , ,		Date of Receipt MM / DD / YYYY 09 / 22 / 2020
Mailing Address 551 W Stratford Pl		Transaction ID : VNW3HJ4JQE7
City Chicago	State IL	Zip Code 60657-2629
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Illinois General Assembly	Occupation (for Individual) State Legislator	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pritzker, Jennifer, N, ,		Date of Receipt MM / DD / YYYY 08 / 24 / 2020
Mailing Address 104 S Michigan Ave Ste 500		Transaction ID : VNW3HJB1SJ5
City Chicago	State IL	Zip Code 60603-5958
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Tawani Enterprises Inc.	Occupation (for Individual) President & CEO/Retired Army Officer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pritzker, Jennifer, N, ,		Date of Receipt MM / DD / YYYY 09 / 19 / 2020
Mailing Address 104 S Michigan Ave Ste 500		Transaction ID : VNW3HJ34W08
City Chicago	State IL	Zip Code 60603-5958
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Tawani Enterprises Inc.	Occupation (for Individual) President & CEO/Retired Army Officer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
L PAC

A. Reamer, Sue, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Webster St
 Apt 213
 City Brookline State MA Zip Code 02446-4963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 18 / 2020
Transaction ID : VNW3HJ34HY1
 Amount of Each Receipt this Period 4000.00
 Memo Item

B. Reinstein, Shad, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1075 Sholem Ln
 City Sebastopol State CA Zip Code 95472-4033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 13 / 2020
Transaction ID : VNW3HHVPWP6
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Rojas, Fermin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 Bayberry Ave
 City Provincetown State MA Zip Code 02657-1214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Filmmaker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 08 / 19 / 2020
Transaction ID : VNW3HHXAF88
 Amount of Each Receipt this Period 3500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rojas, Fermin, , ,		Date of Receipt MM / DD / YYYY 09 / 21 / 2020
Mailing Address 35 Bayberry Ave		Transaction ID : VNW3HJ4GSF3
City Provincetown	State MA	Zip Code 02657-1214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Filmmaker	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sadoff, Carla, , ,		Date of Receipt MM / DD / YYYY 07 / 23 / 2020
Mailing Address 68 N 5Th St NY		Transaction ID : VNW3HHS6XZ7
City Hudson	State NY	Zip Code 12534-1722
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Lumeri	Occupation (for Individual) Consultant	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2008.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sadoff, Carla, , ,		Date of Receipt MM / DD / YYYY 09 / 15 / 2020
Mailing Address 68 N 5Th St NY		Transaction ID : VNW3HJ2XEE2
City Hudson	State NY	Zip Code 12534-1722
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Lumeri	Occupation (for Individual) Consultant	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2033.00	

SUBTOTAL of Receipts This Page (optional).....▶	2025.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Sandberg, Leslie, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Thistlemore Rd
 City Provincetown State MA Zip Code 02657-1750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rose,Sandberg & Associates - Strategic Occupation (for Individual) Self Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2020
Transaction ID : VNW3HHX9Y81
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Sarnoff, Rosita, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 W 58Th St 8A
 City New York State NY Zip Code 10019-2145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 09 / 2020
Transaction ID : VNW3HHNKBW9
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Scanlan, Jenna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 Hillcrest Dr Address Line 2
 City Santa Fe State NM Zip Code 87501-1180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Verve Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2020
Transaction ID : VNW3HJ28F68
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
L PAC

A. Schmidt, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 Michigan Ave
 City Wilmette State IL Zip Code 60091-1931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2020
Transaction ID : VNW3HJ4PH06
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Schreter, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1898 Crestline Dr NE
 City Atlanta State GA Zip Code 30345-3804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Littler Mendelson Occupation (for Individual) Attorney
 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
 08 / 05 / 2020
Transaction ID : VNW3HHTBNH2
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Sheridan, Dixie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 W 24Th St Apt 4D
 City New York State NY Zip Code 10011-1907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2020
Transaction ID : VNW3HJB1SG9
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Sheridan, Dixie, , ,		Date of Receipt MM / DD / YYYY 09 / 15 / 2020
Mailing Address 124 W 24Th St Apt 4D		Transaction ID : VNW3HJ2XEC6
City New York	State NY	Zip Code 10011-1907
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Administrator	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Signer, Barbara, , ,		Date of Receipt MM / DD / YYYY 09 / 15 / 2020
Mailing Address 3400 Galt Ocean Dr 1106-S		Transaction ID : VNW3HJ2XGH9
City Fort Lauderdale	State FL	Zip Code 33308-7043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Singer, Forbes, , ,		Date of Receipt MM / DD / YYYY 09 / 22 / 2020
Mailing Address 127 W 79Th St Apt 17B		Transaction ID : VNW3HJ4HTP8
City New York	State NY	Zip Code 10024-6416
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Psychologist	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	755.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Sipowicz, Kathryn, , ,		Date of Receipt
Mailing Address 1710 W Alameda St Unit 7		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2020"/>
City Santa Fe	State NM	Zip Code 87501-1766
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HJ2ZEX5
Name of Employer (for Individual) Self		Occupation (for Individual) Artist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="500.00"/>
		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Slavin, Jeffrey, Z., ,		Date of Receipt
Mailing Address 5706 Warwick PI		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2020"/>
City Chevy Chase	State MD	Zip Code 20815-5502
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HJB1SF1
Name of Employer (for Individual) Town Of Somerset, MD		Occupation (for Individual) Mayor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="100.00"/>
		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Slavin, Jeffrey, Z., ,		Date of Receipt
Mailing Address 5706 Warwick PI		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2020"/>
City Chevy Chase	State MD	Zip Code 20815-5502
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HJ2ZSB8
Name of Employer (for Individual) Town Of Somerset, MD		Occupation (for Individual) Mayor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="25.00"/>
		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="625.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Sparks, Allison, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 Collingwood St
 City San Francisco State CA Zip Code 94114-1907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Masto Foundation Occupation (for Individual) Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 10 / 2020
Transaction ID : VNW3HHTZDG5
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Sullivan, Colleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2081 Redcliff St
 City Los Angeles State CA Zip Code 90039-3026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt 09 / 18 / 2020
Transaction ID : VNW3HJ34TZ7
 Amount of Each Receipt this Period 1075.00
 Memo Item

C. VanderLinden, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 N Lakeview Ave
 City Chicago State IL Zip Code 60614-2877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Berkshire Hathaway Home Services Occupation (for Individual) Real Estate Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2020
Transaction ID : VNW3HJ4GT23
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1825.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 42 OF 85
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
L PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Weingast, Robin, , ,

Mailing Address **PO Box 1410**
Apt 17A

City **Amagansett** State **NY** Zip Code **11930-1410**

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

Name of Employer (for Individual) **Robin S. Weingast And Associates Inc** Occupation (for Individual) **CEO Benefits Consultant Company**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 16 / 2020

Transaction ID : VNW3HJ2ZG93

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	85180.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 43 OF 85	
<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)
L PAC

A. EQUALITY PAC

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

Mailing Address PO Box 15337

City Washington	State DC	Zip Code 20003-0337
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00550970

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2020

Transaction ID : VNW3HJB1SR3

Amount of Each Receipt this Period
5000.00

Memo Item

B.

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

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 85
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. AFT SOLIDARITY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 555 New Jersey Ave NW

City Washington	State DC	Zip Code 20001-2029
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C90015140

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2020
Transaction ID : VNW3HJB1SP7

Amount of Each Receipt this Period
5000.00

Memo Item

non-contribution account

B. AFT SOLIDARITY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 555 New Jersey Ave NW

City Washington	State DC	Zip Code 20001-2029
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C90015140

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2020
Transaction ID : VNW3HJB1SQ5

Amount of Each Receipt this Period
5000.00

Memo Item

non-contribution account

C. AMALGAMATED BANK PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 275 7Th Ave

City New York	State NY	Zip Code 10001-6708
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00379693

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2020
Transaction ID : VNW3HJC3C93

Amount of Each Receipt this Period
1000.00

Memo Item

non-contribution account

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 45 OF 85
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Casella, Karen, , ,		Date of Receipt MM / DD / YYYY 08 / 10 / 2020
Mailing Address 300 Babe Thompson Rd		Transaction ID : VNW3HHTYNT4
City La Selva Beach	State CA	Zip Code 95076-8527
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Netflix	Occupation (for Individual) Engineering Director	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	Non-Contribution Account; non-contribution account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Casella, Karen, , ,		Date of Receipt MM / DD / YYYY 09 / 21 / 2020
Mailing Address 300 Babe Thompson Rd		Transaction ID : VNW3HJ3RSM7
City La Selva Beach	State CA	Zip Code 95076-8527
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Netflix	Occupation (for Individual) Engineering Director	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10500.00	non-contribution account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Felicio, Diane, , ,		Date of Receipt MM / DD / YYYY 07 / 23 / 2020
Mailing Address 39 Westchester Rd		Transaction ID : VNW3HJC80M5
City Jamaica Plain	State MA	Zip Code 02130-3451
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) The Health Initiative	Occupation (for Individual) COO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	non-contribution account

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 85
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Felicio, Diane, , ,		Date of Receipt MM / DD / YYYY 09 / 18 / 2020
Mailing Address 39 Westchester Rd		Transaction ID : VNW3HJ34H95
City Jamaica Plain	State MA	Zip Code 02130-3451
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) The Health Initiative	Occupation (for Individual) COO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	non-contribution account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gay, Faith, , ,		Date of Receipt MM / DD / YYYY 07 / 27 / 2020
Mailing Address 40 5Th Ave Apt 3A		Transaction ID : VNW3HHST1B7
City New York	State NY	Zip Code 10011-8843
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Selendy & Gay	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	non-contribution account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Gay, Faith, , ,		Date of Receipt MM / DD / YYYY 07 / 27 / 2020
Mailing Address 40 5Th Ave Apt 3A		Transaction ID : VNW3HHST1C5
City New York	State NY	Zip Code 10011-8843
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Selendy & Gay	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 10000.00	Non-Contribution Account; non-contribution account

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 85
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Giske, Emily, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 440 W 24Th St
 Apt 3F
 City New York State NY Zip Code 10011-1350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bolton St. Johns Occupation (for Individual) New York State Lobbyist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 30 / 2020
Transaction ID : VNW3HJAC3B8
 Amount of Each Receipt this Period 10000.00
 Memo Item
 non-contribution account

B. Moran, Kara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 9Th St
 City Virginia Beach State VA Zip Code 23451-4546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Suffolk Sales And Service Occupation (for Individual) Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 09 / 23 / 2020
Transaction ID : VNW3HJACTF9
 Amount of Each Receipt this Period 12500.00
 Memo Item
 non-contribution account

C. Reamer, Sue, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Webster St
 Apt 213
 City Brookline State MA Zip Code 02446-4963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 07 / 21 / 2020
Transaction ID : VNW3HJACTD3
 Amount of Each Receipt this Period 25000.00
 Memo Item
 non-contribution account

SUBTOTAL of Receipts This Page (optional).....	47500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 85
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Reamer, Sue, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Webster St
 Apt 213
 City Brookline State MA Zip Code 02446-4963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 31000.00

Date of Receipt 09 / 18 / 2020
Transaction ID : VNW3HJC80N3
 Amount of Each Receipt this Period 1000.00
 Memo Item
 non-contribution account

B. Reamer, Sue, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Webster St
 Apt 213
 City Brookline State MA Zip Code 02446-4963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 33000.00

Date of Receipt 09 / 24 / 2020
Transaction ID : VNW3HJ4PC07
 Amount of Each Receipt this Period 2000.00
 Memo Item
 non-contribution account

C. Ricketts, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 Sheridan Rd
 City Wilmette State IL Zip Code 60091-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Cubs Occupation (for Individual) Co-Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 57811.12

Date of Receipt 09 / 04 / 2020
Transaction ID : VNW3HJC3EG2
 Amount of Each Receipt this Period 7643.46
 Memo Item
 non-contribution account

SUBTOTAL of Receipts This Page (optional).....	10643.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 85
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Sandberg, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 Vreeland Ct
 City Princeton State NJ Zip Code 08540-6760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LPAC Occupation (for Individual) Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 23 / 2020**
Transaction ID : VNW3HJC3C85
 Amount of Each Receipt this Period 250.00
 Memo Item
 non-contribution account

B. Silverman, Jay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 685 S La Posada Cir # GH604
 City Green Valley State AZ Zip Code 85614-5118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 09 / 2020**
Transaction ID : VNW3HJB1SM1
 Amount of Each Receipt this Period 250.00
 Memo Item
 non-contribution account

C. Social Good Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12651 San Pablo Ave Unit 5473
 City Richmond State CA Zip Code 94805-4021
 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 ▼ 14000.00

Date of Receipt **07 / 28 / 2020**
Transaction ID : VNW3HJC3ET1
 Amount of Each Receipt this Period 2000.00
 Memo Item
 Non-Contribution Account; non-contribution account

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 85
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Weiner, Shari, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 Park Ave
 Apt 17D
 City New York State NY Zip Code 10075-0280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Murphy Mckeon, PC Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 6000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2020
Transaction ID : VNW3HHSJV95
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 Non-Contribution Account

B. Weiner, Shari, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 Park Ave
 Apt 17D
 City New York State NY Zip Code 10075-0280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Murphy Mckeon, PC Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 7000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2020
Transaction ID : VNW3HJ34HE4
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 Non-Contribution Account

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	95143.46

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 08 / 23 / 2020
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A1AE3 Amount of Each Disbursement this Period 0.10
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Merchant Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 27 / 2020
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A1ADZ Amount of Each Disbursement this Period 19.75
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Merchant Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 07 / 02 / 2020
Mailing Address 1825 K St NW Frnt 1		FEC Identification Number C Transaction ID : VNV49A13E4 Amount of Each Disbursement this Period 347.00
City Washington	State DC	
Zip Code 20006-1245	Purpose of Disbursement Bank Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

366.85

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Amalgamated Bank			Date of Disbursement MM / DD / YYYY 07 / 24 / 2020		
Mailing Address 1825 K St NW Frnt 1			FEC Identification Number C [REDACTED] Transaction ID : VNV49A13E5 Amount of Each Disbursement this Period [REDACTED] 10.00		
City Washington	State DC	Zip Code 20006-1245	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Bank Fee		Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Amalgamated Bank			Date of Disbursement MM / DD / YYYY 08 / 28 / 2020		
Mailing Address 1825 K St NW Frnt 1			FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QD Amount of Each Disbursement this Period [REDACTED] 25.25		
City Washington	State DC	Zip Code 20006-1245	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Bank Fee		Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Amalgamated Bank			Date of Disbursement MM / DD / YYYY 08 / 28 / 2020		
Mailing Address 1825 K St NW Frnt 1			FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QI Amount of Each Disbursement this Period [REDACTED] 10.00		
City Washington	State DC	Zip Code 20006-1245	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Bank Fee		Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

45.25

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 09 / 28 / 2020
Mailing Address 1825 K St NW Frnt 1		FEC Identification Number C Transaction ID : VNV49A19N7 Amount of Each Disbursement this Period 10.88
City Washington	State DC	
Purpose of Disbursement Bank Fee		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 09 / 28 / 2020
Mailing Address 1825 K St NW Frnt 1		FEC Identification Number C Transaction ID : VNV49A19N9 Amount of Each Disbursement this Period 10.00
City Washington	State DC	
Purpose of Disbursement Bank Fee		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Paragon Payment Solutions		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 2141 E Broadway Rd		FEC Identification Number C Transaction ID : VNV49A15Q Amount of Each Disbursement this Period 2188.30
City Tempe	State AZ	
Purpose of Disbursement Merchant Fee		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2209.18
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Paragon Payment Solutions

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2141 E Broadway Rd

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2020

City
Tempe

State
AZ

Zip Code
85282-1892

FEC Identification Number

Purpose of Disbursement
Merchant Fee

C

Candidate Name

Transaction ID : VNV49A19NH
Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

1264.53

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City

State

Zip Code

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

--

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City

State

Zip Code

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

--

Memo Item

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

1264.53

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

3885.81

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

M M M	/	D D D	/	Y Y Y Y Y
07		27		2020

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement Contribution

C C00575209

Candidate Name

CRAIG, ANGELA DAWN, , ,

Category/Type

Transaction ID : VNV49A13E6

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

2500.00

State: MN District: 02

Memo Item

B. BETH DOGLIO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 301

M M M	/	D D D	/	Y Y Y Y Y
07		17		2020

City Olympia State WA Zip Code 98507-0301

FEC Identification Number

Purpose of Disbursement Contribution

C C00735308

Candidate Name

Doglio, Beth, , ,

Category/Type

Transaction ID : VNV49A13E7

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

2500.00

State: WA District: 10

Memo Item

C. BETH DOGLIO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 301

M M M	/	D D D	/	Y Y Y Y Y
08		27		2020

City Olympia State WA Zip Code 98507-0301

FEC Identification Number

Purpose of Disbursement Contribution

C C00735308

Candidate Name

Doglio, Beth, , ,

Category/Type

Transaction ID : VNV49A15Q1

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

5000.00

State: WA District: 10

Memo Item

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

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

10000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. GEORGETTE GOMEZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 777 S Figueroa St
Ste 4050

City Los Angeles State CA Zip Code 90017-5864

Purpose of Disbursement Contribution

Candidate Name **GOMEZ, GEORGETTE, , ,**

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: CA District: 53

Date of Disbursement: 08 / 27 / 2020

FEC Identification Number: **C00719112**
Transaction ID : **VNV49A15QN**
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. Gina Ortiz Jones For Congress

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 769186

City San Antonio State TX Zip Code 78245-9186

Purpose of Disbursement Contribution

Candidate Name **Ortiz Jones, Gina, , ,**

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: TX District: 23

Date of Disbursement: 09 / 01 / 2020

FEC Identification Number: **C00652297**
Transaction ID : **VNV49A19NB**
Amount of Each Disbursement this Period: 2500.00

Memo Item

C. SHARICE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 13851 W 63Rd St
NUM 303

City Shawnee State KS Zip Code 66216-3800

Purpose of Disbursement Contribution

Candidate Name **DAVIDS, SHARICE, , ,**

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: KS District: 03

Date of Disbursement: 07 / 27 / 2020

FEC Identification Number: **C00670034**
Transaction ID : **VNV49A13EC**
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	17500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Silverman, Jay, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: / /

Mailing Address: 685 S La Posada Cir # GH604

City: Green Valley State: AZ Zip Code: 85614-5118

Purpose of Disbursement: Contribution Refund

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: _____

Transaction ID : VNV49A1B8Y

Amount of Each Disbursement this Period:

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement: / /

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: _____

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement: / /

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: _____

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="250.00"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1AE1

Amount of Each Disbursement this Period: 395.00

Memo Item

B. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 24 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13ED

Amount of Each Disbursement this Period: 25.50

Memo Item

C. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QI

Amount of Each Disbursement this Period: 11.21

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 431.71

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Amalgamated Bank			Date of Disbursement MM / DD / YYYY 09 / 28 / 2020	
Mailing Address 1825 K St NW Frnt 1			FEC Identification Number C	
City Washington	State DC	Zip Code 20006-1245	Transaction ID : VNV49A19N8	
Purpose of Disbursement Bank Fee		Category/ Type	Amount of Each Disbursement this Period 40.75	
Candidate Name			non-contribution account	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) B. Blue Wave Political Partners LLC			Date of Disbursement MM / DD / YYYY 07 / 31 / 2020	
Mailing Address 514 Daniels St # 286			FEC Identification Number C	
City Raleigh	State NC	Zip Code 27605-1317	Transaction ID : VNV49A13EE	
Purpose of Disbursement Compliance Services		Category/ Type	Amount of Each Disbursement this Period 1500.00	
Candidate Name			non-contribution account	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) C. Blue Wave Political Partners LLC			Date of Disbursement MM / DD / YYYY 08 / 27 / 2020	
Mailing Address 514 Daniels St # 286			FEC Identification Number C	
City Raleigh	State NC	Zip Code 27605-1317	Transaction ID : VNV49A15QI	
Purpose of Disbursement Compliance Services		Category/ Type	Amount of Each Disbursement this Period 1500.00	
Candidate Name			non-contribution account	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	3040.75
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Blue Wave Political Partners LLC		Date of Disbursement MM / DD / YYYY 09 / 18 / 2020	
Mailing Address 514 Daniels St # 286		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NA Amount of Each Disbursement this Period [REDACTED] 1500.00 non-contribution account <input type="checkbox"/> Memo Item	
City Raleigh State NC Zip Code 27605-1317	Purpose of Disbursement Compliance Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type [REDACTED]
Full Name (Last, First, Middle Initial) B. Bowers, Meredith, , ,		Date of Disbursement MM / DD / YYYY 07 / 14 / 2020	
Mailing Address 3645 13Th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13E0: Amount of Each Disbursement this Period [REDACTED] 212.04 non-contribution account <input type="checkbox"/> Memo Item	
City Washington State DC Zip Code 20010-1408	Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type [REDACTED]
Full Name (Last, First, Middle Initial) C. Bowers, Meredith, , ,		Date of Disbursement MM / DD / YYYY 07 / 30 / 2020	
Mailing Address 3645 13Th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13E1 Amount of Each Disbursement this Period [REDACTED] 159.03 non-contribution account <input type="checkbox"/> Memo Item	
City Washington State DC Zip Code 20010-1408	Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type [REDACTED]
SUBTOTAL of Disbursements This Page (optional)..... ▶		[REDACTED] 1871.07	
TOTAL This Period (last page this line number only)..... ▶		[REDACTED]	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Bowers, Meredith, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3645 13Th St NW

City Washington State DC Zip Code 20010-1408

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15Q#

Amount of Each Disbursement this Period: 39.76

Memo Item

B. Care Creative

Full Name (Last, First, Middle Initial)

Mailing Address 172 Pacific Avenue,

City Toronto ON M6P 2P5 Canada State ZZ Zip Code 00000

Purpose of Disbursement Website Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QJ

Amount of Each Disbursement this Period: 2082.50

Memo Item

C. Care Creative

Full Name (Last, First, Middle Initial)

Mailing Address 172 Pacific Avenue,

City Toronto ON M6P 2P5 Canada State ZZ Zip Code 00000

Purpose of Disbursement Graphic Design

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 18 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19NC

Amount of Each Disbursement this Period: 1275.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3397.26

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. CNA

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EF

Amount of Each Disbursement this Period: 243.77

Memo Item

B. CNA

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QK

Amount of Each Disbursement this Period: 243.77

Memo Item

C. CNA

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 02 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19NE

Amount of Each Disbursement this Period: 243.77

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 731.31

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Connolly For House

Full Name (Last, First, Middle Initial)

Mailing Address 1321 E Garfield St

City Laramie State WY Zip Code 82070-4133

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E8

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. DC Health Link

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EG

Amount of Each Disbursement this Period: 3799.74

non-contribution account

Memo Item

C. DC Health Link

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 25 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QI

Amount of Each Disbursement this Period: 3376.96

non-contribution account

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8176.70

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. DC Health Link		Date of Disbursement MM / DD / YYYY 09 / 23 / 2020
Mailing Address PO Box 97022		FEC Identification Number C Transaction ID : VNV49A19NC Amount of Each Disbursement this Period 3799.74 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20090-7022	Purpose of Disbursement Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 07 / 14 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A13DV Amount of Each Disbursement this Period 897.28 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20009-5200	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 07 / 30 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A13D1 Amount of Each Disbursement this Period 641.23 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20009-5200	Purpose of Disbursement Reimbursement - See Memo	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	5338.25
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)
A. Verizon

Mailing Address PO Box 489

City Newark State NJ Zip Code 07101-0489

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 30 / 2020

FEC Identification Number:

Transaction ID : VNV49A19VZ

Amount of Each Disbursement this Period: 641.23

Memo Item * non-contribution account

Full Name (Last, First, Middle Initial)
B. Fouracre, Matthew, , ,

Mailing Address 2523 13Th St NW Apt 207

City Washington State DC Zip Code 20009-5200

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 30 / 2020

FEC Identification Number:

Transaction ID : VNV49A13DW

Amount of Each Disbursement this Period: 897.28

Memo Item non-contribution account

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

Mailing Address 2523 13Th St NW Apt 207

City Washington State DC Zip Code 20009-5200

Purpose of Disbursement Reimbursement - See Memo

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 30 / 2020

FEC Identification Number:

Transaction ID : VNV49A13D

Amount of Each Disbursement this Period: 151.34

Memo Item non-contribution account

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1048.62

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 07 / 30 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A13DY Amount of Each Disbursement this Period 54.73 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20009-5200	Purpose of Disbursement Reimbursement - See Memo	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 07 / 30 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A13DZ Amount of Each Disbursement this Period 118.86 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20009-5200	Purpose of Disbursement Reimbursement - See Memo	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 08 / 14 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A15QI Amount of Each Disbursement this Period 897.28 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20009-5200	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	1070.87
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 08 / 31 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A15Q9 Amount of Each Disbursement this Period 897.28 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Salary	Zip Code 20009-5200	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 09 / 14 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A19N2 Amount of Each Disbursement this Period 897.28 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Salary	Zip Code 20009-5200	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 09 / 29 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A19N3 Amount of Each Disbursement this Period 897.27 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Salary	Zip Code 20009-5200	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	2691.83
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Goldenberg, Kira, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 345 W 145Th St
Apt 3A6

City New York State NY Zip Code 10031-5336

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 10 / 2020

FEC Identification Number: C
Transaction ID : VNV49A19N4
Amount of Each Disbursement this Period: 5000.00
non-contribution account
 Memo Item

B. Google

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 03 / 2020

FEC Identification Number: C
Transaction ID : VNV49A13EJ
Amount of Each Disbursement this Period: 81.20
non-contribution account
 Memo Item

C. Google

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C
Transaction ID : VNV49A15QI
Amount of Each Disbursement this Period: 82.68
non-contribution account
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5163.88

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement MM / DD / YYYY 09 / 03 / 2020
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NV
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Software		Amount of Each Disbursement this Period [REDACTED] 82.68
Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Grasshopper.Com		Date of Disbursement MM / DD / YYYY 07 / 06 / 2020
Mailing Address 197 1St Ave Ste 200		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13EK
City Needham	State MA	Zip Code 02494-2873
Purpose of Disbursement Software		Amount of Each Disbursement this Period [REDACTED] 34.00
Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Grasshopper.Com		Date of Disbursement MM / DD / YYYY 08 / 04 / 2020
Mailing Address 197 1St Ave Ste 200		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QI
City Needham	State MA	Zip Code 02494-2873
Purpose of Disbursement Software		Amount of Each Disbursement this Period [REDACTED] 34.00
Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 150.68
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Grasshopper.Com		Date of Disbursement MM / DD / YYYY 09 / 04 / 2020
Mailing Address 197 1St Ave Ste 200		FEC Identification Number C
City Needham	State MA	Zip Code 02494-2873
Purpose of Disbursement Software	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 34.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	non-contribution account	

Full Name (Last, First, Middle Initial) B. Harmon Curran Spielberg + Eisenberg LLP		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C
City Washington	State DC	Zip Code 20036-4523
Purpose of Disbursement Legal Services	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 664.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	non-contribution account	

Full Name (Last, First, Middle Initial) C. Harmon Curran Spielberg + Eisenberg LLP		Date of Disbursement MM / DD / YYYY 08 / 25 / 2020
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C
City Washington	State DC	Zip Code 20036-4523
Purpose of Disbursement Legal Services	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1068.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	non-contribution account	

SUBTOTAL of Disbursements This Page (optional).....▶	1766.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Harmon Curran Spielberg + Eisenberg LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1726 M St NW
Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement Legal Services

Candidate Name

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

State: District:

Date of Disbursement: 09 / 21 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19NC

Amount of Each Disbursement this Period: 193.00

Memo Item

B. IPFS Corporation

Full Name (Last, First, Middle Initial)

Mailing Address 30 Montgomery St

City Jersey City State NJ Zip Code 07302-3829

Purpose of Disbursement Insurance

Candidate Name

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

State: District:

Date of Disbursement: 07 / 02 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EN

Amount of Each Disbursement this Period: 1275.44

Memo Item

C. Jennifer Webb Campaign

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 12142

City Saint Petersburg State FL Zip Code 33733-2142

Purpose of Disbursement Non-Federal Contribution

Candidate Name

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

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E9

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2468.44

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. JoAnna For Wisconsin

Full Name (Last, First, Middle Initial)

Mailing Address 1314 S 1St St # 179

City Milwaukee State WI Zip Code 53204-2405

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EA

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Michele Rayner For Florida

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 35218

City Saint Petersburg State FL Zip Code 33705-0504

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EB

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. NGP VAN, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1101 15Th St NW Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 01 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19N2

Amount of Each Disbursement this Period: 1425.00

non-contribution account

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2925.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Olive Street Design		Date of Disbursement MM / DD / YYYY 07 / 03 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13EP
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website Services		Amount of Each Disbursement this Period [REDACTED] 34.00
Candidate Name		<input type="checkbox"/> non-contribution account
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Olive Street Design		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QS
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website Services		Amount of Each Disbursement this Period [REDACTED] 34.00
Candidate Name		<input type="checkbox"/> non-contribution account
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Olive Street Design		Date of Disbursement MM / DD / YYYY 09 / 03 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19Pc
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website Services		Amount of Each Disbursement this Period [REDACTED] 34.00
Candidate Name		<input type="checkbox"/> non-contribution account
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 102.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020	
Mailing Address 911 Panorama Trl S			
City Rochester	State NY	Zip Code 14625-2396	
Purpose of Disbursement Payroll Fee		Category/ Type	FEC Identification Number C
Candidate Name			Transaction ID : VNV49A13EC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period 136.55
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020	
Mailing Address 911 Panorama Trl S			
City Rochester	State NY	Zip Code 14625-2396	
Purpose of Disbursement Payroll Taxes		Category/ Type	FEC Identification Number C
Candidate Name			Transaction ID : VNV49A13ES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period 1974.49
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 07 / 30 / 2020	
Mailing Address 911 Panorama Trl S			
City Rochester	State NY	Zip Code 14625-2396	
Purpose of Disbursement Payroll Taxes		Category/ Type	FEC Identification Number C
Candidate Name			Transaction ID : VNV49A13E1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period 1961.09
State: District:			<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	4072.13
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement MM / DD / YYYY 07 / 31 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13ER
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll Fee		Amount of Each Disbursement this Period [REDACTED] 125.95
Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 08 / 14 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QW
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll Fee		Amount of Each Disbursement this Period [REDACTED] 125.96
Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 08 / 14 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15Q'
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll Taxes		Amount of Each Disbursement this Period [REDACTED] 1920.92
Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2172.83
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement MM / DD / YYYY 08 / 30 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QZ Amount of Each Disbursement this Period [REDACTED] 1930.95 non-contribution account <input type="checkbox"/> Memo Item
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll Taxes		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 08 / 31 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QX Amount of Each Disbursement this Period [REDACTED] 125.95 non-contribution account <input type="checkbox"/> Memo Item
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 09 / 15 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19N. Amount of Each Disbursement this Period [REDACTED] 133.26 non-contribution account <input type="checkbox"/> Memo Item
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2190.16
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement MM / DD / YYYY 09 / 15 / 2020	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NK	
City Rochester	State NY	Zip Code 14625-2396	Amount of Each Disbursement this Period [REDACTED] 1920.92
Purpose of Disbursement Payroll Taxes		Category/ Type [REDACTED]	non-contribution account <input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 09 / 30 / 2020	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NM	
City Rochester	State NY	Zip Code 14625-2396	Amount of Each Disbursement this Period [REDACTED] 133.26
Purpose of Disbursement Payroll Taxes		Category/ Type [REDACTED]	non-contribution account <input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 09 / 30 / 2020	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NI	
City Rochester	State NY	Zip Code 14625-2396	Amount of Each Disbursement this Period [REDACTED] 1920.92
Purpose of Disbursement Payroll Taxes		Category/ Type [REDACTED]	non-contribution account <input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 3975.10
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Preferred Insurance Services Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 26 Fairfax St SE
Ste G

City Leesburg State VA Zip Code 20175-3638

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 01 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19NF

Amount of Each Disbursement this Period: 1507.90

Memo Item

B. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 14 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E2

Amount of Each Disbursement this Period: 2910.41

Memo Item

C. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 30 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E3

Amount of Each Disbursement this Period: 2910.42

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7328.73

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 14 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QE

Amount of Each Disbursement this Period: 2910.41

Memo Item

B. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QC

Amount of Each Disbursement this Period: 2910.42

Memo Item

C. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 14 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19N5

Amount of Each Disbursement this Period: 2910.41

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8731.24

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Sandberg, Stephanie, , ,			Date of Disbursement MM / DD / YYYY 09 / 29 / 2020	
Mailing Address 32 Vreeland Ct				
City Princeton	State NJ	Zip Code 08540-6760	FEC Identification Number C	
Purpose of Disbursement Salary			Transaction ID : VNV49A19N6	
Candidate Name			Amount of Each Disbursement this Period 2910.42	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				

Full Name (Last, First, Middle Initial) B. Stamps.Com			Date of Disbursement MM / DD / YYYY 07 / 13 / 2020	
Mailing Address 1990 E Grand Ave				
City El Segundo	State CA	Zip Code 90245-5013	FEC Identification Number C	
Purpose of Disbursement Postage			Transaction ID : VNV49A13EV	
Candidate Name			Amount of Each Disbursement this Period 17.99	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				

Full Name (Last, First, Middle Initial) C. Stamps.Com			Date of Disbursement MM / DD / YYYY 08 / 13 / 2020	
Mailing Address 1990 E Grand Ave				
City El Segundo	State CA	Zip Code 90245-5013	FEC Identification Number C	
Purpose of Disbursement Postage			Transaction ID : VNV49A15Rt	
Candidate Name			Amount of Each Disbursement this Period 17.99	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2946.40
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Stamps.Com

Full Name (Last, First, Middle Initial)

Mailing Address 1990 E Grand Ave

City El Segundo State CA Zip Code 90245-5013

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 14 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19NR

Amount of Each Disbursement this Period: 17.99

Memo Item

B. The Turner Group

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Political Strategy Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 27 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EW

Amount of Each Disbursement this Period: 8125.00

Memo Item

C. The Turner Group

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Political Strategy Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 25 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15R1

Amount of Each Disbursement this Period: 8125.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 16267.99

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. The Turner Group

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Political Strategy Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 23 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19NT

Amount of Each Disbursement this Period: 8125.00

Memo Item

B. USPS

Full Name (Last, First, Middle Initial)

Mailing Address 1800 M St NW

City Washington State DC Zip Code 20036-5802

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 09 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19NQ

Amount of Each Disbursement this Period: 100.00

Memo Item

C. Witeck Communications

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E

Amount of Each Disbursement this Period: 1300.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9525.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Witeck Communications		Date of Disbursement MM / DD / YYYY 09 / 18 / 2020	
Mailing Address 2120 L St NW Ste 850		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NS Amount of Each Disbursement this Period [REDACTED] 650.00 non-contribution account <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20037-1550	
Purpose of Disbursement Rent		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Zoom.US		Date of Disbursement MM / DD / YYYY 07 / 01 / 2020	
Mailing Address 55 Almaden Blvd		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13EY Amount of Each Disbursement this Period [REDACTED] 15.89 non-contribution account <input type="checkbox"/> Memo Item	
City San Jose	State CA	Zip Code 95113-1608	
Purpose of Disbursement Software		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Zoom.US		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020	
Mailing Address 55 Almaden Blvd		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13E2 Amount of Each Disbursement this Period [REDACTED] 12.31 non-contribution account <input type="checkbox"/> Memo Item	
City San Jose	State CA	Zip Code 95113-1608	
Purpose of Disbursement Software		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 678.20
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Zoom.US		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020	
Mailing Address 55 Almaden Blvd		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15R2	
City San Jose	State CA	Zip Code 95113-1608	Amount of Each Disbursement this Period [REDACTED] 58.29
Purpose of Disbursement Software		Category/ Type [REDACTED]	non-contribution account <input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Zoom.US		Date of Disbursement MM / DD / YYYY 08 / 19 / 2020	
Mailing Address 55 Almaden Blvd		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15R3	
City San Jose	State CA	Zip Code 95113-1608	Amount of Each Disbursement this Period [REDACTED] 22.23
Purpose of Disbursement Software		Category/ Type [REDACTED]	non-contribution account <input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Zoom.US		Date of Disbursement MM / DD / YYYY 09 / 01 / 2020	
Mailing Address 55 Almaden Blvd		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19N	
City San Jose	State CA	Zip Code 95113-1608	Amount of Each Disbursement this Period [REDACTED] 111.29
Purpose of Disbursement Software		Category/ Type [REDACTED]	non-contribution account <input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 191.81
TOTAL This Period (last page this line number only).....▶	[REDACTED] 108678.96