

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
Nixon Peabody LLP PAC

ADDRESS (number and street) 1300 Clinton Square  
Check if different than previously reported. (ACC) Rochester NY 14604

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00404178 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:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 01 / 01 / 2018 through [MM] / [DD] / [YYYY] 03 / 31 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
MULLEN, STEPHEN, B, ,  
Type or Print Name of Treasurer

Signature of Treasurer MULLEN, STEPHEN, B, , [Electronically Filed] Date [MM] / [DD] / [YYYY] 04 / 04 / 2018

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

**Nixon Peabody LLP 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="2018"/>	<input type="text" value="17111.43"/>	<input type="text" value="17111.43"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="17111.43"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="12564.00"/>	<input type="text" value="12564.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="29675.43"/>	<input type="text" value="29675.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15657.69"/>	<input type="text" value="15657.69"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14017.74"/>	<input type="text" value="14017.74"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

Nixon Peabody LLP PAC

Report Covering the Period: From: 01 / 01 / 2018 To: 03 / 31 / 2018

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).....	8202.00	8202.00
(ii) Unitemized .....	4362.00	4362.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12564.00	12564.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	12564.00	12564.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	12564.00	12564.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	12564.00	12564.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1157.69	1157.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1157.69	1157.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14500.00	14500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15657.69	15657.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15657.69	15657.69

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	12564.00	12564.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12564.00	12564.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1157.69	1157.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1157.69	1157.69

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Nixon Peabody LLP PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. CHARAMBA, AMELIA, M., ,</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2018 <b>Transaction ID : SA11AI.13167</b>
Mailing Address 19 CENTRE STREET APT. #4		Amount of Each Receipt this Period 202.00
City CAMBRIDGE	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. COHEN, ALLAN, H, ,</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2018 <b>Transaction ID : SA11AI.13169</b>
Mailing Address 56 KATHLEEN DR		Amount of Each Receipt this Period 205.00
City SYOSSET	State NY	Zip Code 11791
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. COLUMBO, ELIZABETH, M, ,</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2018 <b>Transaction ID : SA11AI.13173</b>
Mailing Address 13 STAYMAN COURT		Amount of Each Receipt this Period 218.00
City MANALAPAN	State NJ	Zip Code 07726
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 218.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	625.00
<b>TOTAL</b> 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 7 OF 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. EGAN, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 173 BROMPTON ROAD  
 City GARDEN CITY State NY Zip Code 11530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2018  
**Transaction ID : SA11AI.13175**  
 Amount of Each Receipt this Period  
 266.00  
 Memo Item

**B. GOLDMAN, MICHAEL, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12628 GREENBRIAR ROAD  
 City POTOMAC State MD Zip Code 20854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2018  
**Transaction ID : SA11AI.13180**  
 Amount of Each Receipt this Period  
 252.00  
 Memo Item

**C. KRAVITZ, JASON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 155 WILLARD ROAD  
 City BROOKLINE State MA Zip Code 02445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2018  
**Transaction ID : SA11AI.13188**  
 Amount of Each Receipt this Period  
 475.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	993.00
<b>TOTAL</b> 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 14
<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)  
**Nixon Peabody LLP PAC**

**A. LEVY, SETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 207 LARIAT COURT  
 City SAGLE State ID Zip Code 83860  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt 01 / 31 / 2018  
**Transaction ID : SA11AI.13191**  
 Amount of Each Receipt this Period 321.00  
 Memo Item

**B. NIXON PEABODY LLP**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1300 CLINTON SQUARE  
 City ROCHESTER State NY Zip Code 14604  
 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 ▼ 5000.00

Date of Receipt 01 / 25 / 2018  
**Transaction ID : SA11AI.13139**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. PURSLEY, DENISE, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 237 RIVIERA DRIVE WEST  
 City MASSAPEQUA State NY Zip Code 11758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 01 / 31 / 2018  
**Transaction ID : SA11AI.13202**  
 Amount of Each Receipt this Period 231.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5552.00
<b>TOTAL</b> 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 9 OF 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. SUSSMAN, MONICA, H, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2018
Mailing Address 7924 LAKENHEATH WAY			<b>Transaction ID : SA11AI.13217</b>
City POTOMAC	State MD	Zip Code 20854	Amount of Each Receipt this Period 524.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) NIXON PEABODY LLP		Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 524.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. TAUBIN, MICHAEL, J, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2018
Mailing Address 180 EAST END AVENUE			<b>Transaction ID : SA11AI.13218</b>
City NEW YORK	State NY	Zip Code 10128	Amount of Each Receipt this Period 508.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) NIXON PEABODY LLP		Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 508.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1032.00
<b>TOTAL</b> This Period (last page this line number only).....	8202.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Nixon Peabody LLP PAC**

Full Name (Last, First, Middle Initial)

**A. JP MORGAN CHASE BANK**

Mailing Address CHASE SQUARE

City ROCHESTER State NY Zip Code 14692

Purpose of Disbursement  
BANK FEE

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
03 / 15 / 2018

FEC Identification Number  
  
**Transaction ID : SB21B.13156**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. NIXON PEABODY LLP**

Mailing Address 1300 CLINTON SQUARE

City ROCHESTER State NY Zip Code 14604

Purpose of Disbursement  
PROFESSIONAL FEES

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
03 / 07 / 2018

FEC Identification Number  
  
**Transaction ID : SB21B.13148**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY

FEC Identification Number  
  
Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text" value="1017.84"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="1017.84"/>

**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)  
**Nixon Peabody LLP PAC**

**A. BARBARA L'ITALIEN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1936

M M M	/	D D D	/	Y Y Y Y Y
03		22		2018

City  
ANDOVER

State  
MA

Zip Code  
01810

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

**C** [Redacted]

**Transaction ID : SB23.13153**

Amount of Each Disbursement this Period

2500.00
---------

Candidate Name

**L'ITALIEN, BARBARA, , ,**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: MA

District: 03

Memo Item

**B. BILL CASSIDY FOR US SENATE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 80505

M M M	/	D D D	/	Y Y Y Y Y
01		16		2018

City  
BATON ROUGE

State  
LA

Zip Code  
70898

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

**C** C00543983

**Transaction ID : SB23.13137**

Amount of Each Disbursement this Period

1000.00
---------

Candidate Name

**CASSIDY, WILLIAM M, , ,**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: LA

District: 00

Memo Item

**C. COMMITTEE TO ELECT DAN KOH**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 723

M M M	/	D D D	/	Y Y Y Y Y
03		19		2018

City  
ANDOVER

State  
MA

Zip Code  
01810

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

**C** C00654509

**Transaction ID : SB23.13152**

Amount of Each Disbursement this Period

500.00
--------

Candidate Name

**KOH, DANIEL ARRIGG, , ,**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: MA

District: 03

Memo Item

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

4000.00
---------

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

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**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)  
**Nixon Peabody LLP PAC**

**A. CRAPO FOR US SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1948

City  
BOISE

State ID

Zip Code  
83701

Purpose of Disbursement  
CONTRIBUTION

011

Category/  
Type

Candidate Name  
**CRAPO, MICHAEL D, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: ID District: 00

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2018

FEC Identification Number

C C00330886

Transaction ID : SB23.13135

Amount of Each Disbursement this Period

1000.00

Memo Item

**B. CROWLEY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 84-56 Grand Avenue

City  
Elmhurst

State NY

Zip Code  
11373

Purpose of Disbursement  
CONTRIBUTION

011

Category/  
Type

Candidate Name  
**CROWLEY, JOSEPH, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: NY District: 07

Date of Disbursement

MM / DD / YYYY  
01 / 25 / 2018

FEC Identification Number

C C00338954

Transaction ID : SB23.13140

Amount of Each Disbursement this Period

1000.00

Memo Item

**C. KAINE FOR VIRGINIA**

Full Name (Last, First, Middle Initial)

Mailing Address 1751 POTOMAC GREENS DRIVE

City  
ALEXANDRIA

State VA

Zip Code  
22314

Purpose of Disbursement  
CONTRIBUTION

011

Category/  
Type

Candidate Name  
**KAINE, TIMOTHY MICHAEL, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: VA District: 00

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2018

FEC Identification Number

C C00495358

Transaction ID : SB23.13150

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

**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 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)  
**Nixon Peabody LLP PAC**

**A. KATHERINE CLARK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 361

City MALDEN State MA Zip Code 02148

Purpose of Disbursement CONTRIBUTION

011  
Category/Type

Candidate Name  
**CLARK, KATHERINE, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: MA District: 05

Date of Disbursement  
MM / DD / YYYY  
01 / 02 / 2018

FEC Identification Number  
**C** C00541888  
**Transaction ID : SB23.13133**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

**B. MASSACHUSETTS REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

Mailing Address 85 MERRIMAC ST.  
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement CONTRIBUTION

011  
Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
03 / 28 / 2018

FEC Identification Number  
**C** C00042622  
**Transaction ID : SB23.13155**  
Amount of Each Disbursement this Period  
2000.00

Memo Item

**C. MONTANANS FOR TESTER**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1135

City HELENA State MT Zip Code 59624

Purpose of Disbursement CONTRIBUTION

011  
Category/Type

Candidate Name  
**TESTER, JON, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: MT District: 00

Date of Disbursement  
MM / DD / YYYY  
02 / 12 / 2018

FEC Identification Number  
**C** C00412304  
**Transaction ID : SB23.13143**  
Amount of Each Disbursement this Period  
1000.00

Memo Item

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

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

5500.00

**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)  
**Nixon Peabody LLP PAC**

**A. STABENOW FOR US SENATE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 4945

M M M	/	D D D	/	Y Y Y Y Y
02		27		2018

City EAST LANSING State MI Zip Code 48826

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

C	C00344473
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Candidate Name STABENOW, DEBBIE, , ,

011
Category/Type

Transaction ID : SB23.13146

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: MI District: 00

1000.00
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Memo Item

**B. TOM REED FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 10847

M M M	/	D D D	/	Y Y Y Y Y
03		14		2018

City ROCHESTER State NY Zip Code 14610

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

C	C00464032
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Candidate Name REED, THOMAS W, , ,

011
Category/Type

Transaction ID : SB23.13149

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: NY District: 23

1000.00
---------

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/Type

Amount of Each Disbursement this Period

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

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Memo Item

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

2000.00
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**TOTAL** This Period (last page this line number only)..... ▶

14500.00
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