PAGE 1 / 13

Image# 201507159000129297

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

									Office	Use Only	
1.	NAME OF COMMITTEE (in f		YPE OR P	PRINT ▼		mple: If typi r the lines.	ng, type	12FE4	4M5		
R	Represent PAC	,									1
AD	DRESS (number and	street)	PO Box 5	8432							
ř	Check if diffe										
ŀ	than previous reported. (AC	ly C)	Philadelp	hia 				PA	191	02	-
2.	FEC IDENTIFICA	ATION NUM	MBER ▼		CITY 🛦		5	STATE 🛦		ZIP CO	DE 🛦
	C C00571729			3.	IS THIS REPORT	\ \ \	NEW (N) OR		AMENDE (A)	D	
4.	TYPE OF REP (Choose One)	ORT	(b) Mon	ort	eb 20 (M2)		May 20 (M5)		Aug 20 (M8	3)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Rep	orts:	Due	On:	Mar 20 (M3)		Jun 20 (M6)		Sep 20 (M9))	Dec 20 (M12) (Non-Election Year Only)
	April 15			А	pr 20 (M4)		Jul 20 (M7)		Oct 20 (M1	0)	Jan 31 (YE)
	Quarterly	Report (Q1) (c)	12-Day	П	Primary (12F	P)	Ger	neral (12G)	П	Runoff (12R)
	X July 15 Quarterly	Report (Q2	2)	PRE-Election Report for the:		Convention	(120)	Sno	cial (12S)		
	October Ouarterly	15 Report (Q3	3)	rieport for the.	ш	Convention	(120)	Оре	Ciai (120)		
	January 3			Elec	ction on	M = M /	D D /	Y I Y I Y	Y	in the State o	ıf
	July 31 N	/lid-Year lon-election	(d)	30-Day POST-Election		General (30	G)	Run	off (30R)		Special (30S)
		on Report		Report for the:		M = M /	D D /	V V V		in the	
	(TER)			Elec	ction on					State o	f
5.	Covering Period	04	01	2018	5	through	M M M	30		2015	
Loe	ertify that I have ex	amined this	Report a	nd to the best	of my kno	wledge and	helief it is tru	e correc	et and comp	lete	
	oe or Print Name of		Christine								
Sig	nature of Treasurer	Christi	ne Jacobs			[Electronicall	y Filed] D	ate		15/	2015
NO	TE: Submission of fa	alse, erronec	ous, or inco	mplete informa	tion may su	bject the per	son signing th	is Report	to the pena	alties of 2 l	J.S.C. §437g.
l	Office Use								FE	C FOR Rev. 12/2	
ı	_ Only		- 1	1			1	I	ı		

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Represent PAC 2015 06 30 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2015 (b) Cash on Hand at 11911.43 Beginning of Reporting Period..... 18000.00 32500.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 29911.43 32500.00 6(a) and 6(c) for Column B)..... 5148.26 7736.83 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 24763.17 24763.17 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Represent PA	C
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I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees	40000.00	22500 00		
(i) Itemized (use Schedule A)	18000.00	32500.00		
(ii) Unitemized	0.00	0.00		
(iii) TOTAL (add				
Lines 11(a)(i) and (ii)▶	18000.00	32500.00		
(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)▶	18000.00	32500.00		
. Transfers From Affiliated/Other				
Party Committees	0.00	0.00		
. All Loans Received	0.00	0.00		
. All Loans Received		3.00		
. Loan Repayments Received	0.00	0.00		
. Offsets To Operating Expenditures	7			
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	0.00		
Refunds of Contributions Made	7 7			
to Federal Candidates and Other				
Political Committees	0.00	0.00		
. Other Federal Receipts	0.00	7		
(Dividends, Interest, etc.)	0.00	0.00		
Transfers from Non-Federal and Levin Funds	0.00	0.00		
(a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
(IIOIII Golloddio 110)	0.00	0.00		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
(b) Levill Fallas (from Concado Fro)				
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
. Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))	18000.00	32500.00		
, ., ., ., ., ., ., ., ., .,,	10000.00	2200.00		
. Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	18000.00	32500.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		Total This Period		
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date	
	(i) Federal Share	0.00	0.00	
	(ii) Non-Federal Share	0.00	0.00	
	(b) Other Federal Operating			
	Expenditures	2148.26	4736.83	
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2148.26	4736.83	
2.	Transfers to Affiliated/Other Party			
3	CommitteesContributions to	0.00	0.00	
	Federal Candidates/Committees and Other Political Committees	2000.00	2000.00	
4.	Independent Expenditures	0.00	0.00	
5.	(use Schedule E)			
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
6.	Loan Repayments Made	0.00	0.00	
7	Leave Made	0.00	0.00	
7. 8.	Loans MadeRefunds of Contributions To:	0.00	0.00	
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
	(I) P	0.00	0.00	
	(b) Political Party Committees	0.00	0.00	
	(such as PACs)	0.00	0.00	
	(d) Total Contribution Refunds			
	(add Lines 28(a), (b), and (c))▶	0.00	0.00	
9.	Other Disbursements	1000.00	1000.00	
^	Fadaval Flastica Astricta (0.11.0.0. \$404(00))			
U.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity			
	(from Schedule H6)			
	(i) Federal Share	0.00	0.00	
	(ii) "Levin" Share	0.00	0.00	
	(b) Federal Election Activity Paid Entirely			
	With Federal Funds	0.00	0.00	
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
1.	Total Disbursements (add Lines 21(c), 22,			
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5148.26	7736.83	
2.	Total Federal Disbursements			
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	5149.26	7736.83	
	from Line 31)▶	5148.26	1130.63	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures			
33. Total Contributions (other than loans) (from Line 11(d), page 3)	18000.00	32500.00	
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18000.00	32500.00	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2148.26	4736.83	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	2148.26	4736.83	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 6 OF 13 Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) Represent PAC		
Wyndmoor FEC ID number of contributing federal political committee. Name of Employer Montgomery County Receipt For: Primary Other (specify) ▼ Ag	State Zip Code PA 19038-8413 Cupation mmissioner gregate Year-to-Date 2000.00	Date of Receipt 04 25 2015 Transaction ID: VPFCSDBT1B7 Amount of Each Receipt this Period 1000.00
Wyndmoor FEC ID number of contributing federal political committee. Name of Employer Montgomery County Contributing federal political committee.	State Zip Code PA 19038-8413 Cupation mmissioner gregate Year-to-Date 3000.00	Date of Receipt M M
Wyndmoor FEC ID number of contributing federal political committee. Name of Employer Montgomery County Co	State Zip Code PA 19038-8413 Cupation mmissioner Igregate Year-to-Date ▼ 4000.00	Date of Receipt 06 12 2015 Transaction ID: VPFCSDV21T2 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)	<u> </u>	3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

11	FOR LINE NUMBER:				PAGE	7 OI	=	13	
Use separate schedule(s) for each category of the	`	ck only	or	ne)		ı	1		
Detailed Summary Page	×	11a		11b		11c	12	_	,
		13		14		15	16		17

		1.0
	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) Represent PAC		
Full Name (Last, First, Middle Initial) Valerie Arkoosh Mailing Address 530 Spring Ln		Date of Receipt
City Wyndmoor FEC ID number of contributing	State Zip Code PA 19038-8413	06 25 2015 Transaction ID : VPFCSDZ8C14 Amount of Each Receipt this Period
federal political committee. Name of Employer Montgomery County	Occupation Commissioner	1000.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Peter Buttenwieser Mailing Address 8325 Saint Martins Ln		Date of Receipt 04 282015
City Philadelphia FEC ID number of contributing	State Zip Code PA 19118-4122	Transaction ID : VPFCSDBWMP0 Amount of Each Receipt this Period
federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Consultant Aggregate Year-to-Date ▼	2500.00
Full Name (Last, First, Middle Initial) Leslie Ann Miller Mailing Address 1111 Barberry Rd		Date of Receipt
City Bryn Mawr FEC ID number of contributing federal political committee.	State Zip Code PA 19010-1907	05 05 2015 Transaction ID : VPFCSDEK5G8 Amount of Each Receipt this Period 2500.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Attorney Aggregate Year-to-Date ▼ 2500.00	
SUBTOTAL of Receipts This Page (optional).		6000.00
TOTAL This Period (last page this line numb		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 8 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

13

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Represent PAC Full Name (Last, First, Middle Initial) Kimberly Oxholm Date of Receipt Mailing Address 3411 Chestnut St 2015 Apt 740 22 City State Zip Code Transaction ID: VPFCSDMHN84 PΑ Philadelphia 19104-5527 Amount of Each Receipt this Period FEC ID number of contributing C 4000.00 federal political committee. Name of Employer Occupation self fundraiser Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Bayard Storey Date of Receipt Mailing Address 1919 Brandywine St 04 28 2015 City State Zip Code Transaction ID: VPFCSDBWMM4 Philadelphia PA 19130-3202 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer Occupation University of Pennsylvania Professor Emeritus Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 9000.00 SUBTOTAL of Receipts This Page (optional)..... 18000.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)	Llee concrete	schedulc(s)	FOR LINE NUMBER:				GE 9	OF
ITEMIZED DISBURSEMENTS	SEMENTS Use separate schedule(story each category of the Detailed Summary Page						24 25 29 29	
Any information copied from such Reports and Statem								
or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) Represent PAC	e and address c	n any politica	a committee to	SOIICIT CON	LIDUTIONS	irom suci	ı comm	ittee.
Full Name (Last, First, Middle Initial)				D-4: 1	Diale			
NGP VAN, Inc	Date of	Disburse		YYY	V			
Mailing Address 1101 15th St NW Ste 500				05	1		2015	
•		Code 05-5006		Transa	action ID	: VPEDH9	XQ6E5	
Purpose of Disbursement	200	000-0000						
Database Management				Amount	of Each	Disbursen	ent this	Perio
Candidate Name			Category/ Type		-,	- 7	4	47.00
President	nent For: Primary Other (specify)	General ▼						
State: District:								
Full Name (Last, First, Middle Initial) 3. Pipeline Philly				Date of	Disburse			
Mailing Address 30 S 15th St FI 15					2	8 / Y	2015	Y
Philadelphia		Code 102-4826		Trans	action ID	: VPEDH	YZ6W1	
Purpose of Disbursement Office Space			001	Amount of Each Disbursement		nent this	Period	
Candidate Name			Category/ Type				4	00.00
	nent For: Primary Other (specify)	General ▼						
Full Name (Last, First, Middle Initial) Pipeline Philly	Full Name (Last, First, Middle Initial)					ement		
Mailing Address 30 S 15th St FI 15				05	2		2015	Y
City S Philadelphia		Code 02-4826		Transa	action ID	: VPEDHS	YZ7M9	
Purpose of Disbursement Office Space			Am		Amount of Each Disbursement this Period			
Candidate Name			Category/ Type			1 4	40	00.00
	nent For: Primary Other (specify)	General ▼			7	- 7		
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				i.	7	7	124	17.00

SCHEDULE B (FEC Form 3X)		FOR LINE I					
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	Detailed Summary Page	X 21b 27	22 23 28b	24 25 26 28c 29 30b			
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NAME OF COMMITTEE (In Full)							
Represent PAC							
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Full Name (Last, First, Middle Initial)							
A. Pipeline Philly			Date of Disbursem	_			
Mailing Address 30 S 15th St			06 26	2015			
FI 15			30 20	20.0			
City	State Zip Code		Transaction ID :	VPEDH0V7702			
Philadelphia	PA 19102-4826		Transaction ib .	VFEDH912/Q2			
Purpose of Disbursement Office Space		001	Amount of Each D	isbursement this Period			
Candidate Name			Amount of Each D	isbursement this renou			
		Category/ Type		400.00			
Office Sought: House Disburse	ement For:			,			
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial) 3. SAGE Payment Solutions			Date of Disbursem	ent			
SAGE Fayment Solutions			M M / D D				
Mailing Address 1750 Old Meadow Rd			04 02	2015			
Ste 300							
City McLean	State Zip Code VA 22102-4304		Transaction ID:	VPEDH9V3H30			
Purpose of Disbursement	VA 22102-4304						
Credit Card Prossessing		001	Amount of Each D	isbursement this Period			
Candidate Name		Category/		54.00			
		Type		51.82			
	ement For:						
Senate President	Primary General Other (specify) ▼						
State: District:	Other (specify)						
Full Name (Last, First, Middle Initial)							
SAGE Payment Solutions			Date of Disbursem	ent			
			M M / D D	/			
Mailing Address 1750 Old Meadow Rd			05 02	2015			
Ste 300 City	State Zip Code						
McLean	VA 22102-4304		Transaction ID:	VPEDH9XQ3V1			
Purpose of Disbursement							
Credit Card Processing			Amount of Each D	isbursement this Period			
Candidate Name		Category/		160.67			
Office Sought: House Disburse	ement For:	Туре					
Senate	Primary General						
President	Other (specify) ▼						
State: District:	-						
				612.40			
SUBTOTAL of Disbursements This Page (optional).		·····•		612.49			
TOTAL This Period (last page this line number only	/)						

SCHEDULE B (FEC Form 3X)		FOR LINE I	NE NUMBER: PAGE 11 OF				
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only					
	Detailed Summary Page	X 21b	22 23 28a 28b	24 25 26 28c 29 30b			
		27					
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NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·						
Represent PAC							
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Full Name (Last, First, Middle Initial)			5				
A. SAGE Payment Solutions			Date of Disburser				
Mailing Address 1750 Old Meadow Rd			06 01				
Ste 300			00 01	2010			
,	tate Zip Code		Transaction ID :	: VPEDH9YZ7N7			
	VA 22102-4304		Transaction ib .	VI LDIISTETIVI			
Purpose of Disbursement Credit Card Processing		001	Amount of Each [Disbursement this Period			
Candidate Name	I		Amount of Each E	Disbursement this 1 chou			
		Category/ Type		188.77			
Office Sought: House Disbursem	ent For:						
	Primary General						
	Other (specify) ▼						
Full Name (Last, First, Middle Initial) 3.			Date of Disburser	ment			
			M M / D	D / Y Y Y Y			
Mailing Address							
City	tate Zip Code						
Purpose of Disbursement							
			Amount of Each [Disbursement this Period			
Candidate Name	,	Category/					
		Туре		7			
Office Sought: House Disbursem							
	Primary General Other (specify) ▼						
State: District:	outer (opcony)						
Full Name (Last, First, Middle Initial)							
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Mailing Address							
City	tate Zip Code						
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Purpose of Disbursement	pose of Disbursement						
Candidate Name	Candidata Nama						
Candidate Manie		Category/ Type					
Office Sought: House Disbursem	nent For:	Турс					
Senate	Primary General						
	Other (specify) ▼						
State: District:							
CURTOTAL of Diskurs and This 2				188.77			
SUBTOTAL of Disbursements This Page (optional)		······		100.11			
TOTAL This Period (last page this line number only).				2048.26			

SCHEDULE B (FEC Form 3X)	11	FOR LINE	INE NUMBER: PAGE 12 OF				
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(oricon oriny	,				
	Detailed Summary Page	21b	22 X 23 28b	24 25 26 30b			
Any information copied from such Reports and Staten	nents may not be sold or us						
or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
Represent PAC							
/							
Full Name (Last, First, Middle Initial)			Date of Disbursem	aant			
A. People for Patty Murray			M M / D D				
Mailing Address PO Box 3662			06 30	2015			
,	State Zip Code		Transaction ID :	VPEDH9YYAQ2			
Seattle Purpose of Disbursement	WA 98124-3662						
Contribution		012	Amount of Each D	isbursement this Period			
Candidate Name		Category/					
Sen. Patty Murray		Type		2000.00			
_	nent For: 2016						
Senate President	Primary General						
State: WA District: 00	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
B.			Date of Disbursem	ent			
			M = M / D = D	/			
Mailing Address							
City	State Zip Code						
o.i.y							
Purpose of Disbursement							
Candidate Name			Amount of Each D	isbursement this Period			
Candidate Name		Category/ Type					
Office Sought: House Disburser	nent For:	Туре					
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial)			Date of Disbursem	ont.			
C.			M M / D D				
Mailing Address			M = M / D = D				
City	State Zip Code						
Purpose of Disbursement							
Candidate Name		Category/					
Office Course		Type		-			
Office Sought: House Disburser Senate	nent For: Primary General						
President	Other (specify)						
State: District:	(1) = 3 / ∀						
'							
SUBTOTAL of Disbursements This Page (optional)		·····		2000.00			
TOTAL THE DIRECT OF THE STATE O				2000.00			
TOTAL This Period (last page this line number only)				2000.00			

17

ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	-
TI LIVIIZED DIGDONGLIVIEN IG	for each category of the Detailed Summary Page	21b 27	22 23 24 25 25 28a 28b 28c X 29 3
Any information copied from such Reports and Stater or for commercial purposes, other than using the name	ments may not be sold or use ne and address of any politica	d by any perso I committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Represent PAC			
Full Name (Last, First, Middle Initial) A. Represent PAC			Date of Disbursement
Mailing Address 3447 Vaux St			06 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City S Philadelphia	State Zip Code PA 19129-1436		Transaction ID : VPEDH9YZ7X0
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name Represent PAC		Category/ Type	1000.00
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial) B.			Date of Disbursement
Mailing Address			M = M / D = D / Y = Y = Y
City	State Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial) C.			Date of Disbursement
Mailing Address			M M / D D / Y Y Y Y
City	State Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name Category/ Type			
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify)		
			1000.00
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			1000.00