

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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"/>	<input type="text" value="9498.11"/>	<input type="text" value="9498.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4283.58"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="194724.00"/>	<input type="text" value="441219.66"/>
(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="199007.58"/>	<input type="text" value="450717.77"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="130734.01"/>	<input type="text" value="382444.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="68273.57"/>	<input type="text" value="68273.57"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

L PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2020 To: M M / D D / Y Y Y Y 09 / 30 / 2020

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	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

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	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.

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"/> 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. 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

A. 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 **07 / 23 / 2020**
Transaction ID : VNW3HHS6Y13
 Amount of Each Receipt this Period 100.00
 Memo Item

B. 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 ▼ 800.00

Date of Receipt **08 / 13 / 2020**
Transaction ID : VNW3HHVPXX2
 Amount of Each Receipt this Period 50.00
 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 ▼ 825.00

Date of Receipt **09 / 22 / 2020**
Transaction ID : VNW3HJ4HV07
 Amount of Each Receipt this Period 25.00
 Memo Item

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 # 1194		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) Owner	<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 # 1194		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) Owner	<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"/> 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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Bennetts, Geni, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Lupine Hill Rd
 City Napa State CA Zip Code 94558-3819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Resolve Healthcare Consulting LLC (Ph
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 17 / 2020
Transaction ID : VNW3HJ31VY8
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Biskupski, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1519 S 1900 E
 City Salt Lake City State UT Zip Code 84108-2653
 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 ▼ 400.00

Date of Receipt 09 / 15 / 2020
Transaction ID : VNW3HJ2YBV5
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Boyman, Kym, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1391 Robinson Rd
 City Ferrisburgh State VT Zip Code 05456-9663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vermont Gynecology Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 25 / 2020
Transaction ID : VNW3HJ4PH89
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
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 13 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. Buckwalter-Poza, Rebecca, , ,			Date of Receipt MM / DD / YYYY 09 / 20 / 2020 Transaction ID : VNW3HJ3N0X9		
Mailing Address 1447 Chapin St NW Apt 301			Amount of Each Receipt this Period 500.00		
City Washington	State DC	Zip Code 20009-4100	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Justice Collaborative		Occupation (for Individual) Senior Strategist			
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. Byrne, Jane, , ,			Date of Receipt MM / DD / YYYY 07 / 08 / 2020 Transaction ID : VNW3HHNHQA8		
Mailing Address 155 W 18Th St Apt 304			Amount of Each Receipt this Period 1000.00		
City New York	State NY	Zip Code 10011-4170	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) McDermott Will & Emory		Occupation (for Individual) Attorney			
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. Cherry, Elyse, , ,			Date of Receipt MM / DD / YYYY 07 / 08 / 2020 Transaction ID : VNW3HHNHQP7		
Mailing Address 46 Cotswold Rd			Amount of Each Receipt this Period 1000.00		
City Brookline	State MA	Zip Code 02445-5837	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) BlueHub Capital		Occupation (for Individual) CEO			
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).....	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 M M M / D D D / Y Y Y Y Y Y 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 M M M / D D D / Y Y Y Y Y Y 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 M M M / D D D / Y Y Y Y Y Y 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
MM / DD / YYYY
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
MM / DD / YYYY
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
MM / DD / YYYY
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 16 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. Douglas, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 345 E 84Th St
 Apt 1
 City New York State NY Zip Code 10028-4434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Carolyn J Douglas, MD Occupation (for Individual) Psychiatrist
 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 / 21 / 2020
Transaction ID : VNW3HJ3RSQ1
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Dowd, Paula, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Creek Dr
 Apt 407
 City Beacon State NY Zip Code 12508-3479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Design/Developer Occupation (for Individual) Self Employed ABODEhome
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2020
Transaction ID : VNW3HHSNMP6
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Edwards, William, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 E Putnam Ave
 3270
 City Greenwich State CT Zip Code 06830-5424
 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
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2020
Transaction ID : VNW3HJ31XM3
 Amount of Each Receipt this Period
 5000.00
 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: PAGE 17 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. 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
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
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
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: PAGE 19 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Franchot, Penelope, , ,

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

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2020

Transaction ID : VNW3HJ4N5T8

Amount of Each Receipt this Period
500.00

Memo Item

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

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

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2020

Transaction ID : VNW3HJ31V43

Amount of Each Receipt this Period
500.00

Memo Item

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

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

M M M	/	D D D	/	Y Y Y Y Y Y
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"/> 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. 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
-----------------	-------------	------------------------

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) Black Entertainment Television	Occupation (for Individual) SVP Content Strategy
---	---

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"/> 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. 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"/> 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. Herz, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4603 Drexel Rd
 City College Park State MD Zip Code 20740-3603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Social Research Centre (Australia) Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **525.00**

Date of Receipt **09 / 20 / 2020**
Transaction ID : VNW3HJ3N0P6
 Amount of Each Receipt this Period **525.00**
 Memo Item

B. Hey, Jean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 Calvin Rd
 City Jamaica Plain State MA Zip Code 02130-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Writer
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **08 / 02 / 2020**
Transaction ID : VNW3HHSV8P6
 Amount of Each Receipt this Period **500.00**
 Memo Item

C. Heyen, Shari, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5111 Longmont Dr
 City Houston State TX Zip Code 77056-2417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Greenberg Traurig LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **09 / 16 / 2020**
Transaction ID : VNW3HJ2ZT12
 Amount of Each Receipt this Period **500.00**
 Memo Item

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: (check only one)	PAGE 23 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

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
 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 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 2912
 City Miami State FL Zip Code 33131-3833
 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 07 / 28 / 2020
Transaction ID : VNW3HHSNB1
 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 2912
 City Miami State FL Zip Code 33131-3833
 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 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"/> 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. Hoover, Kimberly, , ,		Date of Receipt
Mailing Address 1000 Brickell Plz 2912		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2020"/>
City Miami	State FL	Zip Code 33131-3833
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HJ62AN3
Name of Employer (for Individual) Red Multifamily		Amount of Each Receipt this Period <input type="text" value="100.00"/>
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 ▼ <input type="text" value="900.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Huth, Elaine, , ,		Date of Receipt
Mailing Address 8730 Marianna Dr		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2020"/>
City Forestville	State CA	Zip Code 95436-9658
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HJ2XFG0
Name of Employer (for Individual) Self		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) Retired 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 ▼ <input type="text" value="225.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Jones, Kathleen, , ,		Date of Receipt
Mailing Address 11220 72Nd Dr Apt D16		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2020"/>
City Forest Hills	State NY	Zip Code 11375-5655
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HHY19V5
Name of Employer (for Individual) Unemployed		Amount of Each Receipt this Period <input type="text" value="300.00"/>
Occupation (for Individual) Unemployed		<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="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="425.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. 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

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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"/> 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. 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

A. Linsky, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Evergreen Way
 City Sleepy Hollow State NY Zip Code 10591-1119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) McDermott Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 15 / 2020
Transaction ID : VNW3HJ2XFP6
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Lorber, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 SW 25Th Ter
 City Fort Lauderdale State FL Zip Code 33312-4576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S FL Symphony Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2020
Transaction ID : VNW3HJ77P79
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Marks, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Riverside Drive #11 NW Apt 11NW
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Educator Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 17 / 2020
Transaction ID : VNW3HJ2ZZN9
 Amount of Each Receipt this Period 500.00
 Memo Item

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 6
 City New York State NY Zip Code 10025-2998
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) All The Things Consulting LLC Occupation (for Individual) Self Employed
 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"/> 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. Mondini, Elena J, , ,		Date of Receipt MM / DD / YYYY 08 / 04 / 2020
Mailing Address 1326 Laurel Ave		Transaction ID : VNW3HHT4F33
City Ocean	State NJ	Zip Code 07712-4607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Spectrotel Inc	Occupation (for Individual) VP	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mondini, Elena J, , ,		Date of Receipt MM / DD / YYYY 09 / 04 / 2020
Mailing Address 1326 Laurel Ave		Transaction ID : VNW3HJ23082
City Ocean	State NJ	Zip Code 07712-4607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Spectrotel Inc	Occupation (for Individual) VP	<input type="checkbox"/> Memo Item
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. Moran, Kara, , ,		Date of Receipt MM / DD / YYYY 09 / 18 / 2020
Mailing Address 648 9Th St		Transaction ID : VNW3HJ34TK2
City Virginia Beach	State VA	Zip Code 23451-4546
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Suffolk Sales And Service	Occupation (for Individual) Sales	<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	

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"/> 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. 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

A. Newstat, Joyce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 California St
 27C
 City San Francisco State CA Zip Code 94109-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Policy Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 18 / 2020**
Transaction ID : VNW3HHX93M9
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Novak Milliken, Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1256 Hudson Ave
 City Saint Helena State CA Zip Code 94574-1920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spottswode Winery, Inc. Occupation (for Individual) President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 23 / 2020**
Transaction ID : VNW3HJ4NBA4
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Pellett, Clark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 W North Ave
 Horedr
 City Chicago State IL Zip Code 60610-1000
 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 ▼ 2500.00

Date of Receipt **09 / 28 / 2020**
Transaction ID : VNW3HJ50XY8
 Amount of Each Receipt this Period 2500.00
 Memo Item

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"/> 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. 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"/> 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. Reamer, Sue, , ,		Date of Receipt MM / DD / YYYY 09 / 18 / 2020
Mailing Address 20 Webster St Apt 213		Transaction ID : VNW3HJ34HY1
City Brookline	State MA	Zip Code 02446-4963
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00
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 ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Reinstein, Shad, , ,		Date of Receipt MM / DD / YYYY 08 / 13 / 2020
Mailing Address 1075 Sholem Ln		Transaction ID : VNW3HHVPWP6
City Sebastopol	State CA	Zip Code 95472-4033
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
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 ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Rojas, Fermin, , ,		Date of Receipt MM / DD / YYYY 08 / 19 / 2020
Mailing Address 35 Bayberry Ave		Transaction ID : VNW3HHXAF88
City Provincetown	State MA	Zip Code 02657-1214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3500.00
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 ▼ 3500.00	

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"/> 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. 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	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Self Employed		Occupation (for Individual) Filmmaker			
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	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Lumeri		Occupation (for Individual) Consultant			
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	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) Lumeri		Occupation (for Individual) Consultant			
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"/> 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. 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"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
L PAC

A. 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 ▼ 255.00

Date of Receipt 09 / 15 / 2020
Transaction ID : VNW3HJ2XEC6
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Signer, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 Galt Ocean Dr
 1106-S
 City Fort Lauderdale State FL Zip Code 33308-7043
 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 ▼ 600.00

Date of Receipt 09 / 15 / 2020
Transaction ID : VNW3HJ2XGH9
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Singer, Forbes, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 W 79Th St
 Apt 17B
 City New York State NY Zip Code 10024-6416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2020
Transaction ID : VNW3HJ4HTP8
 Amount of Each Receipt this Period 250.00
 Memo Item

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"/> 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. Sipowicz, Kathryn, , ,		Date of Receipt MM / DD / YYYY 09 / 15 / 2020
Mailing Address 1710 W Alameda St Unit 7		Transaction ID : VNW3HJ2ZEX5
City Santa Fe	State NM	Zip Code 87501-1766
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Self	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 ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Slavin, Jeffrey, Z., ,		Date of Receipt MM / DD / YYYY 08 / 24 / 2020
Mailing Address 5706 Warwick PI		Transaction ID : VNW3HJB1SF1
City Chevy Chase	State MD	Zip Code 20815-5502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Town Of Somerset, MD	Occupation (for Individual) Mayor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Slavin, Jeffrey, Z., ,		Date of Receipt MM / DD / YYYY 09 / 16 / 2020
Mailing Address 5706 Warwick PI		Transaction ID : VNW3HJ2ZSB8
City Chevy Chase	State MD	Zip Code 20815-5502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Town Of Somerset, MD	Occupation (for Individual) Mayor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1625.00	

SUBTOTAL of Receipts This Page (optional).....▶	625.00
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 41 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. 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
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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 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 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 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
Mailing Address 300 Babe Thompson Rd		<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2020"/>
City La Selva Beach	State CA	Zip Code 95076-8527
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HHTYNT4
Name of Employer (for Individual) Netflix		Occupation (for Individual) Engineering Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		<input type="checkbox"/> Memo Item
		Non-Contribution Account; non-contribution account

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

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

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="6500.00"/>
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 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) Retired 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) Retired 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) Retired 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Weiner, Shari, L, ,		Date of Receipt MM / DD / YYYY 07 / 26 / 2020
Mailing Address 900 Park Ave Apt 17D		Transaction ID : VNW3HHSJV95
City New York	State NY	Zip Code 10075-0280
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 6000.00
Name of Employer (for Individual) Murphy McKeon	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 ▼ 6000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Weiner, Shari, L, ,		Date of Receipt MM / DD / YYYY 09 / 18 / 2020
Mailing Address 900 Park Ave Apt 17D		Transaction ID : VNW3HJ34HE4
City New York	State NY	Zip Code 10075-0280
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Murphy McKeon	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 ▼ 7000.00	Non-Contribution Account

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

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					
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					
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					
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

A. 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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 24 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E5

Amount of Each Disbursement this Period: 10.00

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QD

Amount of Each Disbursement this Period: 25.25

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QI

Amount of Each Disbursement this Period: 10.00

Memo Item

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

A. 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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19N7

Amount of Each Disbursement this Period: 10.88

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19N9

Amount of Each Disbursement this Period: 10.00

Memo Item

C. Paragon Payment Solutions

Full Name (Last, First, Middle Initial)

Mailing Address 2141 E Broadway Rd

City Tempe State AZ Zip Code 85282-1892

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15Q

Amount of Each Disbursement this Period: 2188.30

Memo Item

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)

Mailing Address 2141 E Broadway Rd

City Tempe State AZ Zip Code 85282-1892

Purpose of Disbursement Merchant Fee

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 : VNV49A19NH

Amount of Each Disbursement this Period 1264.53

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial) A. ANGIE CRAIG FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y Y Y 07 / 27 / 2020		
Mailing Address PO Box 22116			FEC Identification Number C C00575209 Transaction ID : VNV49A13E6 Amount of Each Disbursement this Period 2500.00		
City Eagan	State MN	Zip Code 55122-0116	Category/Type <input type="checkbox"/>		
Purpose of Disbursement Contribution			Memo Item <input type="checkbox"/>		
Candidate Name CRAIG, ANGELA DAWN, , ,			Amount of Each Disbursement this Period 2500.00		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period 2500.00		
State: MN District: 02			Memo Item <input type="checkbox"/>		

Full Name (Last, First, Middle Initial) B. BETH DOGLIO FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y Y Y 07 / 17 / 2020		
Mailing Address PO Box 301			FEC Identification Number C C00735308 Transaction ID : VNV49A13E7 Amount of Each Disbursement this Period 2500.00		
City Olympia	State WA	Zip Code 98507-0301	Category/Type <input type="checkbox"/>		
Purpose of Disbursement Contribution			Memo Item <input type="checkbox"/>		
Candidate Name Doglio, Beth, , ,			Amount of Each Disbursement this Period 2500.00		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period 2500.00		
State: WA District: 10			Memo Item <input type="checkbox"/>		

Full Name (Last, First, Middle Initial) C. BETH DOGLIO FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y Y Y 08 / 27 / 2020		
Mailing Address PO Box 301			FEC Identification Number C C00735308 Transaction ID : VNV49A15Q Amount of Each Disbursement this Period 5000.00		
City Olympia	State WA	Zip Code 98507-0301	Category/Type <input type="checkbox"/>		
Purpose of Disbursement Contribution			Memo Item <input type="checkbox"/>		
Candidate Name Doglio, Beth, , ,			Amount of Each Disbursement this Period 5000.00		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Disbursement this Period 5000.00		
State: WA District: 10			Memo Item <input type="checkbox"/>		

SUBTOTAL of Disbursements This Page (optional)..... ▶	10000.00
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: MM / DD / YYYY
09 / 11 / 2020

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: C

Transaction ID: VNV49A1B8Y

Amount of Each Disbursement this Period: 250.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

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: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

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: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	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

A. 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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19N8

Amount of Each Disbursement this Period: 40.75

Memo Item

B. Blue Wave Political Partners LLC

Full Name (Last, First, Middle Initial)

Mailing Address 514 Daniels St
286

City Raleigh State NC Zip Code 27605-1317

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 31 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EE

Amount of Each Disbursement this Period: 1500.00

Memo Item

C. Blue Wave Political Partners LLC

Full Name (Last, First, Middle Initial)

Mailing Address 514 Daniels St
286

City Raleigh State NC Zip Code 27605-1317

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 27 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QI

Amount of Each Disbursement this Period: 1500.00

Memo Item

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

A. Blue Wave Political Partners LLC

Full Name (Last, First, Middle Initial)

Mailing Address 514 Daniels St # 286

City Raleigh State NC Zip Code 27605-1317

Purpose of Disbursement Compliance Services

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 : VNV49A19NA

Amount of Each Disbursement this Period: 1500.00

Memo Item

B. 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: 07 / 14 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E0:

Amount of Each Disbursement this Period: 212.04

Memo Item

C. 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: 07 / 30 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E1

Amount of Each Disbursement this Period: 159.03

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1871.07

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. 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

Full Name (Last, First, Middle Initial) A. Connolly For House		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 1321 E Garfield St		FEC Identification Number C Transaction ID : VNV49A13E8 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item
City Laramie	State WY	
Purpose of Disbursement Non-Federal Contribution		
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. DC Health Link		Date of Disbursement MM / DD / YYYY 07 / 28 / 2020
Mailing Address PO Box 97022		FEC Identification Number C Transaction ID : VNV49A13EG Amount of Each Disbursement this Period 3799.74 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Insurance		
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. DC Health Link		Date of Disbursement MM / DD / YYYY 08 / 25 / 2020
Mailing Address PO Box 97022		FEC Identification Number C Transaction ID : VNV49A15QI Amount of Each Disbursement this Period 3376.96 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Insurance		
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).....▶	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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : VNV49A19VZ
Amount of Each Disbursement this Period

[REDACTED] 641.23

* non-contribution account

Memo Item

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : VNV49A13DW
Amount of Each Disbursement this Period

[REDACTED] 897.28

non-contribution account

Memo Item

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : VNV49A13D
Amount of Each Disbursement this Period

[REDACTED] 151.34

non-contribution account

Memo Item

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

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

[REDACTED] 1048.62

[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. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 07 / 30 / 2020	
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C	
City Washington	State DC	Zip Code 20009-5200	Transaction ID : VNV49A13DY
Purpose of Disbursement Reimbursement - See Memo		Category/ Type	Amount of Each Disbursement this Period 54.73
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. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 07 / 30 / 2020	
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C	
City Washington	State DC	Zip Code 20009-5200	Transaction ID : VNV49A13DZ
Purpose of Disbursement Reimbursement - See Memo		Category/ Type	Amount of Each Disbursement this Period 118.86
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. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 08 / 14 / 2020	
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C	
City Washington	State DC	Zip Code 20009-5200	Transaction ID : VNV49A15QI
Purpose of Disbursement Salary		Category/ Type	Amount of Each Disbursement this Period 897.28
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).....▶	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	
City Washington	State DC	Zip Code 20009-5200	Transaction ID : VNV49A15Q9	
Purpose of Disbursement Salary		Candidate Name	Amount of Each Disbursement this Period 897.28	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			non-contribution account	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	

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	
City Washington	State DC	Zip Code 20009-5200	Transaction ID : VNV49A19N2	
Purpose of Disbursement Salary		Candidate Name	Amount of Each Disbursement this Period 897.28	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			non-contribution account	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	

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	
City Washington	State DC	Zip Code 20009-5200	Transaction ID : VNV49A19N3	
Purpose of Disbursement Salary		Candidate Name	Amount of Each Disbursement this Period 897.27	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			non-contribution account	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	

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

Full Name (Last, First, Middle Initial) A. Glovin, Anna, , ,		Date of Disbursement MM / DD / YYYY 09 / 18 / 2020
Mailing Address 37 Jackman Ave		FEC Identification Number C
City Fairfield	State CT	
Zip Code 06825-1723		Transaction ID : VNV49A19N1
Purpose of Disbursement Graphic Design		Amount of Each Disbursement this Period 225.00
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. Goldenberg, Kira, , ,		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020
Mailing Address 345 W 145Th St Apt 3A6		FEC Identification Number C
City New York	State NY	
Zip Code 10031-5336		Transaction ID : VNV49A13DS
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 5000.00
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. Goldenberg, Kira, , ,		Date of Disbursement MM / DD / YYYY 08 / 11 / 2020
Mailing Address 345 W 145Th St Apt 3A6		FEC Identification Number C
City New York	State NY	
Zip Code 10031-5336		Transaction ID : VNV49A15Q;
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 5000.00
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).....▶	10225.00
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. 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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 10 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19N4

Amount of Each Disbursement this Period: 5000.00

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EJ

Amount of Each Disbursement this Period: 81.20

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QI

Amount of Each Disbursement this Period: 82.68

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 Transaction ID : VNV49A19NV Amount of Each Disbursement this Period 82.68 non-contribution account <input type="checkbox"/> Memo Item
City Mountain View	State CA	
Zip Code 94043-1351	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) B. Grasshopper.Com		Date of Disbursement MM / DD / YYYY 07 / 06 / 2020
Mailing Address 197 1St Ave Ste 200		FEC Identification Number C Transaction ID : VNV49A13EK Amount of Each Disbursement this Period 34.00 non-contribution account <input type="checkbox"/> Memo Item
City Needham	State MA	
Zip Code 02494-2873	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. Grasshopper.Com		Date of Disbursement MM / DD / YYYY 08 / 04 / 2020
Mailing Address 197 1St Ave Ste 200		FEC Identification Number C Transaction ID : VNV49A15QI Amount of Each Disbursement this Period 34.00 non-contribution account <input type="checkbox"/> Memo Item
City Needham	State MA	
Zip Code 02494-2873	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).....▶	150.68
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. 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	Transaction ID : VNV49A19NV
Purpose of Disbursement Software		Category/ Type	Amount of Each Disbursement this Period 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. 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	Transaction ID : VNV49A13EM
Purpose of Disbursement Legal Services		Category/ Type	Amount of Each Disbursement this Period 664.00
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. 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	Transaction ID : VNV49A15QI
Purpose of Disbursement Legal Services		Category/ Type	Amount of Each Disbursement this Period 1068.00
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).....▶	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

Full Name (Last, First, Middle Initial) A. Harmon Curran Spielberg + Eisenberg LLP		Date of Disbursement MM / DD / YYYY 09 / 21 / 2020
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NC Amount of Each Disbursement this Period [REDACTED] 193.00 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20036-4523
Purpose of Disbursement Legal Services		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. IPFS Corporation		Date of Disbursement MM / DD / YYYY 07 / 02 / 2020
Mailing Address 30 Montgomery St		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13EN Amount of Each Disbursement this Period [REDACTED] 1275.44 non-contribution account <input type="checkbox"/> Memo Item
City Jersey City	State NJ	Zip Code 07302-3829
Purpose of Disbursement Insurance		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. Jennifer Webb Campaign		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address PO Box 12142		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13E9 Amount of Each Disbursement this Period [REDACTED] 1000.00 Memo Item <input type="checkbox"/>
City Saint Petersburg	State FL	Zip Code 33733-2142
Purpose of Disbursement Non-Federal Contribution		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)..... ▶

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

A. Olive Street Design

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EP

Amount of Each Disbursement this Period: 34.00

Memo Item

B. Olive Street Design

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website Services

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 : VNV49A15QS

Amount of Each Disbursement this Period: 34.00

Memo Item

C. Olive Street Design

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19Pc

Amount of Each Disbursement this Period: 34.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 102.00

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. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EC

Amount of Each Disbursement this Period: 136.55

Memo Item

B. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13ES

Amount of Each Disbursement this Period: 1974.49

Memo Item

C. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 30 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E1

Amount of Each Disbursement this Period: 1961.09

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		<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. 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		<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. 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		<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] 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

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

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 : VNV49A15QZ

Amount of Each Disbursement this Period: 1930.95

Memo Item

B. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Fee

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 : VNV49A15QX

Amount of Each Disbursement this Period: 125.95

Memo Item

C. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19N.

Amount of Each Disbursement this Period: 133.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2190.16

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 09 / 15 / 2020	
Mailing Address 911 Panorama Trl S				
City Rochester		State NY	Zip Code 14625-2396	
Purpose of Disbursement Payroll Taxes			Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) ▼		

FEC Identification Number
C [REDACTED]
Transaction ID : VNV49A19NK
Amount of Each Disbursement this Period
[REDACTED] 1920.92
non-contribution account
 Memo Item

Full Name (Last, First, Middle Initial) B. Paychex			Date of Disbursement MM / DD / YYYY 09 / 30 / 2020	
Mailing Address 911 Panorama Trl S				
City Rochester		State NY	Zip Code 14625-2396	
Purpose of Disbursement Payroll Taxes			Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) ▼		

FEC Identification Number
C [REDACTED]
Transaction ID : VNV49A19NM
Amount of Each Disbursement this Period
[REDACTED] 133.26
non-contribution account
 Memo Item

Full Name (Last, First, Middle Initial) C. Paychex			Date of Disbursement MM / DD / YYYY 09 / 30 / 2020	
Mailing Address 911 Panorama Trl S				
City Rochester		State NY	Zip Code 14625-2396	
Purpose of Disbursement Payroll Taxes			Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) ▼		

FEC Identification Number
C [REDACTED]
Transaction ID : VNV49A19NI
Amount of Each Disbursement this Period
[REDACTED] 1920.92
non-contribution account
 Memo Item

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

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

[REDACTED] 3975.10
[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. Preferred Insurance Services Inc.		Date of Disbursement MM / DD / YYYY 09 / 01 / 2020	
Mailing Address 26 Fairfax St SE Ste G		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NF Amount of Each Disbursement this Period [REDACTED] 1507.90 non-contribution account <input type="checkbox"/> Memo Item	
City Leesburg State VA Zip Code 20175-3638	Purpose of Disbursement Insurance 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
Full Name (Last, First, Middle Initial) B. Sandberg, Stephanie, , ,		Date of Disbursement MM / DD / YYYY 07 / 14 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13E2 Amount of Each Disbursement this Period [REDACTED] 2910.41 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton State NJ Zip Code 08540-6760	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
Full Name (Last, First, Middle Initial) C. Sandberg, Stephanie, , ,		Date of Disbursement MM / DD / YYYY 07 / 30 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13E3 Amount of Each Disbursement this Period [REDACTED] 2910.42 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton State NJ Zip Code 08540-6760	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
SUBTOTAL of Disbursements This Page (optional)..... ▶		[REDACTED] 7328.73	
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. Sandberg, Stephanie, , ,		Date of Disbursement MM / DD / YYYY 08 / 14 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QE	
City Princeton	State NJ	Zip Code 08540-6760	Amount of Each Disbursement this Period [REDACTED] 2910.41
Purpose of Disbursement Salary		Category/ Type [REDACTED]	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) ▼		non-contribution account <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Sandberg, Stephanie, , ,		Date of Disbursement MM / DD / YYYY 08 / 31 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QC	
City Princeton	State NJ	Zip Code 08540-6760	Amount of Each Disbursement this Period [REDACTED] 2910.42
Purpose of Disbursement Salary		Category/ Type [REDACTED]	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) ▼		non-contribution account <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Sandberg, Stephanie, , ,		Date of Disbursement MM / DD / YYYY 09 / 14 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19N5	
City Princeton	State NJ	Zip Code 08540-6760	Amount of Each Disbursement this Period [REDACTED] 2910.41
Purpose of Disbursement Salary		Category/ Type [REDACTED]	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) ▼		non-contribution account <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 8731.24
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. Sandberg, Stephanie, , ,			Date of Disbursement MM / DD / YYYY 09 / 29 / 2020	
Mailing Address 32 Vreeland Ct			FEC Identification Number C [REDACTED] Transaction ID : VNV49A19N6 Amount of Each Disbursement this Period [REDACTED] 2910.42 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton	State NJ	Zip Code 08540-6760	Category/Type [REDACTED]	
Purpose of Disbursement Salary			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. Stamps.Com			Date of Disbursement MM / DD / YYYY 07 / 13 / 2020	
Mailing Address 1990 E Grand Ave			FEC Identification Number C [REDACTED] Transaction ID : VNV49A13EV Amount of Each Disbursement this Period [REDACTED] 17.99 non-contribution account <input type="checkbox"/> Memo Item	
City El Segundo	State CA	Zip Code 90245-5013	Category/Type [REDACTED]	
Purpose of Disbursement Postage			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. Stamps.Com			Date of Disbursement MM / DD / YYYY 08 / 13 / 2020	
Mailing Address 1990 E Grand Ave			FEC Identification Number C [REDACTED] Transaction ID : VNV49A15R1 Amount of Each Disbursement this Period [REDACTED] 17.99 non-contribution account <input type="checkbox"/> Memo Item	
City El Segundo	State CA	Zip Code 90245-5013	Category/Type [REDACTED]	
Purpose of Disbursement Postage			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] 2946.40
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. Stamps.Com

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

/ /

FEC Identification Number

Transaction ID : VNV49A19NR
 Amount of Each Disbursement this Period

non-contribution account
 Memo Item

Full Name (Last, First, Middle Initial)

B. The Turner Group

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

/ /

FEC Identification Number

Transaction ID : VNV49A13EW
 Amount of Each Disbursement this Period

non-contribution account
 Memo Item

Full Name (Last, First, Middle Initial)

C. The Turner Group

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

/ /

FEC Identification Number

Transaction ID : VNV49A15R1
 Amount of Each Disbursement this Period

non-contribution account
 Memo Item

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

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. The Turner Group		Date of Disbursement MM / DD / YYYY 09 / 23 / 2020
Mailing Address PO Box 5373		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NT Amount of Each Disbursement this Period [REDACTED] 8125.00 non-contribution account <input type="checkbox"/> Memo Item
City Virginia Beach	State VA	Zip Code 23471-0373
Purpose of Disbursement Political Strategy Consulting		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. USPS		Date of Disbursement MM / DD / YYYY 09 / 09 / 2020
Mailing Address 1800 M St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NQ Amount of Each Disbursement this Period [REDACTED] 100.00 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20036-5802
Purpose of Disbursement Postage		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. Witeck Communications		Date of Disbursement MM / DD / YYYY 07 / 28 / 2020
Mailing Address 2120 L St NW Ste 850		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13E) Amount of Each Disbursement this Period [REDACTED] 1300.00 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20037-1550
Purpose of Disbursement Rent		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] 9525.00
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. 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	Category/ Type
Purpose of Disbursement Rent			
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	Category/ Type
Purpose of Disbursement Software			
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	Category/ Type
Purpose of Disbursement Software			
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
Purpose of Disbursement Software		Amount of Each Disbursement this Period [REDACTED] 58.29
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"/> non-contribution account <input type="checkbox"/> Memo Item
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
Purpose of Disbursement Software		Amount of Each Disbursement this Period [REDACTED] 22.23
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"/> non-contribution account <input type="checkbox"/> Memo Item
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
Purpose of Disbursement Software		Amount of Each Disbursement this Period [REDACTED] 111.29
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"/> non-contribution account <input type="checkbox"/> Memo Item
State: District:		

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

191.81

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

108678.96