

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

L PAC

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

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

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on / / in the State of

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

Election on / / in the State of

5. Covering Period / / through / /

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

Rosen, Hilary, , ,

Type or Print Name of Treasurer

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

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="9498.11"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="128912.66"/>	<input type="text" value="128912.66"/>
(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="138410.77"/>	<input type="text" value="138410.77"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="123775.27"/>	<input type="text" value="123775.27"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14635.50"/>	<input type="text" value="14635.50"/>
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: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	39000.00	39000.00
(ii) Unitemized	2745.00	2745.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	41745.00	41745.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	41745.00	41745.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	87167.66	87167.66
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)).....▶	128912.66	128912.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	128912.66	128912.66

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	109275.27	109275.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	109275.27	109275.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	3500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	11000.00	11000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	123775.27	123775.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	123775.27	123775.27

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	41745.00	41745.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	41745.00	41745.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	109275.27	109275.27
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	109275.27	109275.27

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 68
	<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. Aberly, Naomi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 Derne St
 Apt 5A
 City Boston State MA Zip Code 02114-4212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: 2020
 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
 02 / 06 / 2020
Transaction ID : VNW3HH953J7
 Amount of Each Receipt this Period
 250.00
 Memo Item
 * Earmarked Contribution: See Below

B. 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: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 9375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2020
Transaction ID : VNW3HH953J7E
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Bernstein, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 Ellery St
 City Cambridge State MA Zip Code 02138-4355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Artist
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2020
Transaction ID : VNW3HHA98E9
 Amount of Each Receipt this Period
 350.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 7 OF 68
	<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. 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 ▼
9375.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 16 / 2020

Transaction ID : VNW3HHA98E9E

Amount of Each Receipt this Period
350.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Boudreau-Steevs, Lauren, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4 Sanderson Ct

City Gloucester	State MA	Zip Code 01930-1145
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Iron Mountain Program Manager

Receipt For: 2020
 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
02 / 17 / 2020

Transaction ID : VNW3HHAD8H5

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

C. 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: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9375.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 23 / 2020

Transaction ID : VNW3HHAD8H5E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	250.00
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 68
<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. Bria, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 Calypso Dr
 City Aptos State CA Zip Code 95003-5802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 07 / 2020
Transaction ID : VNW3HHBNX93
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below non-contribution account

B. 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 ▼ 9375.00

Date of Receipt 03 / 08 / 2020
Transaction ID : VNW3HHBNX93E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Casella, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Babe Thompson Rd
 City La Selva Beach State CA Zip Code 95076-8527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Netflix Occupation (for Individual) Engineering Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 06 / 2020
Transaction ID : VNW3HHDTY99
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5500.00
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 68
	<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. Conley, Clare, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Rocky Nook Ter
 City Boston State MA Zip Code 02130-2902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Assest Performance Occupation (for Individual) President
 Receipt For: 2020
 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
 02 / 17 / 2020
Transaction ID : VNW3HHAD8D4
 Amount of Each Receipt this Period
 500.00
 Memo Item
 * Earmarked Contribution: See Below

B. 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: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 9375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2020
Transaction ID : VNW3HHAD8D4E
 Amount of Each Receipt this Period
 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Cruz, Ana, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1726 E 7Th Ave
 City Tampa State FL Zip Code 33605-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ballard Partners Occupation (for Individual) Govt Affairs
 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
 01 / 22 / 2020
Transaction ID : VNW3HH8C694
 Amount of Each Receipt this Period
 1000.00
 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 10 OF 68
	<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. Damato, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 E 4Th St
 City Boston State MA Zip Code 02127-3325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Greater Boston Food Bank Occupation (for Individual) CEO
 Receipt For: 2020
 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
 02 / 20 / 2020
Transaction ID : VNW3HHAD8E2
 Amount of Each Receipt this Period
 500.00
 Memo Item
 * Earmarked Contribution: See Below

B. 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: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 9375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2020
Transaction ID : VNW3HHAD8E2E
 Amount of Each Receipt this Period
 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Duff, Eileen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Barberry Heights Rd
 City Gloucester State MA Zip Code 01930-1201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Of Massachusetts Occupation (for Individual) Govonor's Councillor
 Receipt For: 2020
 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
 02 / 04 / 2020
Transaction ID : VNW3HH953H9
 Amount of Each Receipt this Period
 250.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
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 68
	<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. 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: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9375.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2020
Transaction ID : VNW3HH953H9E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Elkins, Caroline, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 87 Church St

City Watertown	State MA	Zip Code 02472-3839
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Harvard University Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2020
Transaction ID : VNW3HHBNXC7

Amount of Each Receipt this Period
500.00

Memo Item

* Earmarked Contribution: See Below non-contribution account

C. 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
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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 ▼
9375.00

Date of Receipt
MM / DD / YYYY
03 / 08 / 2020
Transaction ID : VNW3HHBNXC7E

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	500.00
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 68
	<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. Fein-Zachary, Valerie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 Marlborough St
 City Boston State MA Zip Code 02116-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HMFP Occupation (for Individual) Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 02 / 2020
Transaction ID : VNW3HHBNXE2
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below non-contribution account

B. 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 ▼ 9375.00

Date of Receipt 03 / 08 / 2020
Transaction ID : VNW3HHBNXE2E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Felicio, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 Westchester Rd Westchester Road
 City Jamaica Plain State MA Zip Code 02130-3451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Community Catalyst Occupation (for Individual) Chief Operating Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 27 / 2020
Transaction ID : VNW3HHAKG88
 Amount of Each Receipt this Period 1000.00
 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 13 OF 68
	<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. Foy, Lynne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 Church St
 City Newton State MA Zip Code 02458-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Artist
 Receipt For: 2020
 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
 02 / 20 / 2020
Transaction ID : VNW3HHAD8N7
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below

B. 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: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 9375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2020
Transaction ID : VNW3HHAD8N7E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Gaines, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 W 13Th St Apt 6C
 City New York State NY Zip Code 10011-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2020
Transaction ID : VNW3HHAPK20
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
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 68
	<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. Gibson, Gayle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Bayberry Close
 City Newark State DE Zip Code 19711-6201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 26 / 2020**
Transaction ID : VNW3HHCVKX0
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Grant, Polly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 Walden St Apt 3G
 City Cambridge State MA Zip Code 02140-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mass General Hospital Occupation (for Individual) Social Worker
 Receipt For: 2020 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 18 / 2020**
Transaction ID : VNW3HHAD8M9
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below

C. 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: 2020 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9375.00

Date of Receipt **02 / 23 / 2020**
Transaction ID : VNW3HHAD8M9E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	5250.00
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 68
	<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. 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) Occupation (for Individual)
 BET Networks Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2020
Transaction ID : VNW3HHCREN1
 Amount of Each Receipt this Period
 1000.00
 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) Occupation (for Individual)
 Self Employed Writer
 Receipt For: 2020 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
 02 / 21 / 2020
Transaction ID : VNW3HHAD8K1
 Amount of Each Receipt this Period
 500.00
 Memo Item
 * Earmarked Contribution: See Below

C. 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: 2020 Primary General Other (specify)
 Aggregate Year-to-Date ▼
 9375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2020
Transaction ID : VNW3HHAD8K1E
 Amount of Each Receipt this Period
 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

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 16 OF 68
	<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. Hood, Victoria, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 Marion St
 City Somerville State MA Zip Code 02143-3913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Marketing Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 01 / 2020
Transaction ID : VNW3HHAQG48
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below non-contribution account

B. 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 ▼ 9375.00

Date of Receipt 03 / 01 / 2020
Transaction ID : VNW3HHAQG48E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Hoover, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 SW 1St Ave 2919
 City Miami State FL Zip Code 33130-5401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 28 / 2020
Transaction ID : VNW3HHCVPS4
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 68
	<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. 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 02 / 28 / 2020
Transaction ID : VNW3HHAQG97
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below non-contribution account

B. 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 ▼ 9375.00

Date of Receipt 02 / 29 / 2020
Transaction ID : VNW3HHAQG97E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

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 ▼ 300.00

Date of Receipt 03 / 09 / 2020
Transaction ID : VNW3HHBMSW5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 18 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Ketner, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3554 Bohicket Rd
 City Johns Island State SC Zip Code 29455-7223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KSI Occupation (for Individual) Consultant
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 31 / 2020
Transaction ID : VNW3HH8QX59
 Amount of Each Receipt this Period 5000.00
 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) Self Employed Occupation (for Individual) Consultant
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 11 / 2020
Transaction ID : VNW3HH7K1J9
 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) Self Employed Occupation (for Individual) Consultant
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 11 / 2020
Transaction ID : VNW3HH9JC07
 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 19 OF 68
<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. 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) Self Employed Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 11 / 2020
Transaction ID : VNW3HHBWDMO
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Lazares, Katie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 Northern Ave Unit 518
 City Boston State MA Zip Code 02210-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Berkshire Group Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2020
Transaction ID : VNW3HHBNXA1
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below non-contribution account

C. 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 ▼ 9375.00

Date of Receipt 03 / 08 / 2020
Transaction ID : VNW3HHBNXA1E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	750.00
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 68
	<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. Leszczynski, Jeanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 Wellesley Ave
 City Needham State MA Zip Code 02494-1821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 01 / 2020
Transaction ID : VNW3HH8SFH0
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below

B. 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 ▼ 9375.00

Date of Receipt 02 / 02 / 2020
Transaction ID : VNW3HH8SFH0E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Lynch, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 Grove St
 City Winchester State MA Zip Code 01890-3844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Restaurateur
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 06 / 2020
Transaction ID : VNW3HHDT4C6
 Amount of Each Receipt this Period 250.00
 Memo Item
 non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
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 68
<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 ▼
9375.00

Date of Receipt

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

Transaction ID : VNW3HH8SFJ8E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Rosen, Hilary, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4835 Hutchins PI NW

City Washington	State DC	Zip Code 20007-1529
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SKDKnickerbocker	Occupation (for Individual) Public Relations
---	---

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
03	/	18	/	2020

Transaction ID : VNW3HHCPP14

Amount of Each Receipt this Period
5000.00

Memo Item

C. Ruthchild, Rochelle, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 137 Coolidge St

City Brookline	State MA	Zip Code 02446-5807
-------------------	-------------	------------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2020

Transaction ID : VNW3HHAQG64

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below non-contribution account

SUBTOTAL of Receipts This Page (optional).....	5250.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 23 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 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 ▼ 9375.00

Date of Receipt **02 / 29 / 2020**
Transaction ID : VNW3HHAQG64E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

B. Saul, Jean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 S Quebec Way 115
 City Denver State CO Zip Code 80231-5696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Not Employed Retired
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 11 / 2020**
Transaction ID : VNW3HHBWG40
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Sexton, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 NW 12Th Ave Unit 802
 City Portland State OR Zip Code 97209-2995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Not Employed Retired
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 03 / 2020**
Transaction ID : VNW3HHAX1T6
 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 24 OF 68
<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. Slavin, Jeffrey, Z., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5706 Warwick PI
 City Chevy Chase State MD Zip Code 20815-5502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Town Of Somerset, MD Occupation (for Individual) Mayor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **01 / 22 / 2020**
Transaction ID : VNW3HH8C6A2
 Amount of Each Receipt this Period 1500.00
 Memo Item

B. Splaine, Erin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 Rice Rd
 City Wayland State MA Zip Code 01778-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The First Unitarian Universalist Socie Occupation (for Individual) Minister
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **03 / 06 / 2020**
Transaction ID : VNW3HHDT1Y3
 Amount of Each Receipt this Period 500.00
 Memo Item
 non-contribution account

C. Splaine, Erin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 Rice Rd
 City Wayland State MA Zip Code 01778-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The First Unitarian Universalist Socie Occupation (for Individual) Minister
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 02 / 2020**
Transaction ID : VNW3HHBNXH6
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below non-contribution account

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 68
<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 ▼
9375.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2020

Transaction ID : VNW3HHBNXH6E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Steinwand, Christine, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 111 Perkins St Apt 223

City Jamaica Plain	State MA	Zip Code 02130-4323
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Not Employed Retired

Receipt For: 2020
 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
02 / 17 / 2020

Transaction ID : VNW3HHAD8J3

Amount of Each Receipt this Period
500.00

Memo Item

* Earmarked Contribution: See Below

C. 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: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9375.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 23 / 2020

Transaction ID : VNW3HHAD8J3E

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	500.00
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 26 OF 68
(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. Stubbs, Rennae, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33A Ellwood St

City Glen Cove	State NY	Zip Code 11542-2430
-------------------	-------------	------------------------

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

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

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
03	/	23	/	2020

Transaction ID : VNW3HHCSC00

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 900 Park Ave
Apt 17D

City New York	State NY	Zip Code 10075-0280
------------------	-------------	------------------------

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

Name of Employer (for Individual) Murphy MckeonPC	Occupation (for Individual) Attorney
--	---

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
01	/	14	/	2020

Transaction ID : VNW3HH7Q455

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 900 Park Ave
Apt 17D

City New York	State NY	Zip Code 10075-0280
------------------	-------------	------------------------

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

Name of Employer (for Individual) Murphy MckeonPC	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
02	/	26	/	2020

Transaction ID : VNW3HHAKCX5

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: PAGE 27 OF 68
(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
Witeck, Robert, , ,

Mailing Address 1914 N Johnson St

City Arlington	State VA	Zip Code 22207-3741
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Witeck Communications, Inc.	Occupation (for Individual) Public Relations
--	---

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
03	/	02	/	2020

Transaction ID : VNW3HHAQ596

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

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

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).....	39000.00

**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 28 OF 68
<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. Bernstein, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 Ellery St
 City Cambridge State MA Zip Code 02138-4355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt **03 / 06 / 2020**
Transaction ID : VNW3HHDT1V9
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Non-Contribution Account; non-contribution account

B. Casella, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Babe Thompson Rd
 City La Selva Beach State CA Zip Code 95076-8527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Netflix Occupation (for Individual) Engineering Director
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt **02 / 06 / 2020**
Transaction ID : VNW3HH8V611
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Non-Contribution Account; non-contribution account

C. Ketner, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3554 Bohicket Rd
 City Johns Island State SC Zip Code 29455-7223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KSI Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 20000.00

Date of Receipt **01 / 31 / 2020**
Transaction ID : VNW3HHA2W56
 Amount of Each Receipt this Period 20000.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	26000.00
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 68
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

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

Date of Receipt **03 / 06 / 2020**
Transaction ID : VNW3HHDT1T1
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Non-Contribution Account; non-contribution account

B. 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 ▼ 50167.66

Date of Receipt **01 / 27 / 2020**
Transaction ID : VNW3HHA2W48
 Amount of Each Receipt this Period 50167.66
 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 ▼ 6000.00

Date of Receipt **03 / 10 / 2020**
Transaction ID : VNW3HHDTM30
 Amount of Each Receipt this Period 6000.00
 Memo Item
 Non-Contribution Account; non-contribution account

SUBTOTAL of Receipts This Page (optional).....	61167.66
TOTAL This Period (last page this line number only).....	87167.66

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 02 / 02 / 2020
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A0AKF Amount of Each Disbursement this Period 59.25
City Somerville	State MA	
Zip Code 02144-3132		Memo Item <input type="checkbox"/>
Purpose of Disbursement Merchant Fee		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 02 / 09 / 2020
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A0B2X Amount of Each Disbursement this Period 19.76
City Somerville	State MA	
Zip Code 02144-3132		Memo Item <input type="checkbox"/>
Purpose of Disbursement Merchant Fee		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 02 / 16 / 2020
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A0CW Amount of Each Disbursement this Period 25.69
City Somerville	State MA	
Zip Code 02144-3132		Memo Item <input type="checkbox"/>
Purpose of Disbursement Merchant Fee		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	104.70
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 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 02 / 23 / 2020
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	
Purpose of Disbursement Merchant Fee		Transaction ID : VNV49A0DE6 Amount of Each Disbursement this Period 114.57
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) ▼	Memo Item <input type="checkbox"/>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 02 / 29 / 2020
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	
Purpose of Disbursement Merchant Fee		Transaction ID : VNV49A0EGF Amount of Each Disbursement this Period 33.59
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) ▼	Memo Item <input type="checkbox"/>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 03 / 01 / 2020
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	
Purpose of Disbursement Merchant Fee		Transaction ID : VNV49A0EGI Amount of Each Disbursement this Period 9.88
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) ▼	Memo Item <input type="checkbox"/>
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	158.04
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. 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: 03 / 08 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0FCE

Amount of Each Disbursement this Period: 107.88

Memo Item

B. American Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 4333 Amon Carter Blvd # MD5675

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MX0

Amount of Each Disbursement this Period: 210.80

non-contribution account

Memo Item

C. American Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 4333 Amon Carter Blvd # MD5675

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 13 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MX

Amount of Each Disbursement this Period: 146.40

non-contribution account

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 464.88

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 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. American Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 4333 Amon Carter Blvd
MD5675

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 09 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MXE

Amount of Each Disbursement this Period: 75.00

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: 03 / 05 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MXE

Amount of Each Disbursement this Period: 2500.00

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 27 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MXE

Amount of Each Disbursement this Period: 2715.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5290.00

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 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. 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: 03 / 05 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MXI

Amount of Each Disbursement this Period: 1702.50

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: 01 / 02 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MXJ

Amount of Each Disbursement this Period: 269.63

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: 02 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MX

Amount of Each Disbursement this Period: 269.63

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2241.76

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. CNA		Date of Disbursement MM / DD / YYYY 03 / 03 / 2020	
Mailing Address 1 Meridian Blvd Ste 3A01		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MXI Amount of Each Disbursement this Period [REDACTED] 269.47 non-contribution account <input type="checkbox"/> Memo Item	
City Wyomissing State PA Zip Code 19610-3235	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. DC Health Link		Date of Disbursement MM / DD / YYYY 01 / 28 / 2020	
Mailing Address PO Box 97022		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MXC Amount of Each Disbursement this Period [REDACTED] 6768.76 non-contribution account <input type="checkbox"/> Memo Item	
City Washington State DC Zip Code 20090-7022	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) C. DC Health Link		Date of Disbursement MM / DD / YYYY 02 / 19 / 2020	
Mailing Address PO Box 97022		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MX Amount of Each Disbursement this Period [REDACTED] 3384.38 non-contribution account <input type="checkbox"/> Memo Item	
City Washington State DC Zip Code 20090-7022	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
SUBTOTAL of Disbursements This Page (optional)..... ▶		[REDACTED] 10422.61	
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 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. DC Health Link			Date of Disbursement MM / DD / YYYY 03 / 19 / 2020	
Mailing Address PO Box 97022				
City Washington	State DC	Zip Code 20090-7022	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Insurance		Category/ Type [REDACTED]	Transaction ID : VNV49A0MXI Amount of Each Disbursement this Period [REDACTED] 240.00	
Candidate Name			non-contribution account <input type="checkbox"/> Memo Item	
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 03 / 27 / 2020	
Mailing Address PO Box 97022				
City Washington	State DC	Zip Code 20090-7022	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Insurance		Category/ Type [REDACTED]	Transaction ID : VNV49A0MXI Amount of Each Disbursement this Period [REDACTED] 3384.38	
Candidate Name			non-contribution account <input type="checkbox"/> Memo Item	
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. EveryAction			Date of Disbursement MM / DD / YYYY 02 / 27 / 2020	
Mailing Address PO Box 392264				
City Pittsburgh	State PA	Zip Code 15251-9264	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Subscription		Category/ Type [REDACTED]	Transaction ID : VNV49A0MY Amount of Each Disbursement this Period [REDACTED] 1425.00	
Candidate Name			non-contribution account <input type="checkbox"/> Memo Item	
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] 5049.38	
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 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. Fouracre, Matthew, , ,			Date of Disbursement MM / DD / YYYY 01 / 15 / 2020	
Mailing Address 2523 13Th St NW Apt 207			FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MV Amount of Each Disbursement this Period [REDACTED] 1119.82 non-contribution account <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20009-5200	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. Fouracre, Matthew, , ,			Date of Disbursement MM / DD / YYYY 01 / 31 / 2020	
Mailing Address 2523 13Th St NW Apt 207			FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MV Amount of Each Disbursement this Period [REDACTED] 1119.84 non-contribution account <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20009-5200	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) C. Fouracre, Matthew, , ,			Date of Disbursement MM / DD / YYYY 02 / 14 / 2020	
Mailing Address 2523 13Th St NW Apt 207			FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MV Amount of Each Disbursement this Period [REDACTED] 1119.82 non-contribution account <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20009-5200	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:	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 3359.48
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 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. Fouracre, Matthew, , ,			Date of Disbursement MM / DD / YYYY 02 / 27 / 2020	
Mailing Address 2523 13Th St NW Apt 207			FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MVz Amount of Each Disbursement this Period [REDACTED] 1119.84 non-contribution account <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20009-5200	Purpose of Disbursement Salary	
Candidate Name		Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Fouracre, Matthew, , ,			Date of Disbursement MM / DD / YYYY 03 / 12 / 2020	
Mailing Address 2523 13Th St NW Apt 207			FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MWI Amount of Each Disbursement this Period [REDACTED] 1119.82 non-contribution account <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20009-5200	Purpose of Disbursement Salary	
Candidate Name		Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Fouracre, Matthew, , ,			Date of Disbursement MM / DD / YYYY 03 / 30 / 2020	
Mailing Address 2523 13Th St NW Apt 207			FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MWI Amount of Each Disbursement this Period [REDACTED] 1119.84 non-contribution account <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20009-5200	Purpose of Disbursement Salary	
Candidate Name		Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 3359.50
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 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. Goldenberg, Kira, , ,			Date of Disbursement MM / DD / YYYY 01 / 28 / 2020	
Mailing Address 345 W 145Th St Apt 3A6			FEC Identification Number C [] Transaction ID : VNV49A0MV1 Amount of Each Disbursement this Period [] 3000.00 non-contribution account <input type="checkbox"/> Memo Item	
City New York	State NY	Zip Code 10031-5336	Category/ Type []	
Purpose of Disbursement Communications Consulting			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. Goldenberg, Kira, , ,			Date of Disbursement MM / DD / YYYY 01 / 30 / 2020	
Mailing Address 345 W 145Th St Apt 3A6			FEC Identification Number C [] Transaction ID : VNV49A0MV1 Amount of Each Disbursement this Period [] 2000.00 non-contribution account <input type="checkbox"/> Memo Item	
City New York	State NY	Zip Code 10031-5336	Category/ Type []	
Purpose of Disbursement Communications Consulting			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. Goldenberg, Kira, , ,			Date of Disbursement MM / DD / YYYY 02 / 10 / 2020	
Mailing Address 345 W 145Th St Apt 3A6			FEC Identification Number C [] Transaction ID : VNV49A0P51 Amount of Each Disbursement this Period [] 8125.00 * <input checked="" type="checkbox"/> Memo Item	
City New York	State NY	Zip Code 10031-5336	Category/ Type []	
Purpose of Disbursement Communications Consulting			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).....▶	[] 5000.00
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 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. Goldenberg, Kira, , ,		Date of Disbursement MM / DD / YYYY 02 / 10 / 2020
Mailing Address 345 W 145Th St Apt 3A6		FEC Identification Number C Transaction ID : VNV49A0P5E Amount of Each Disbursement this Period 2595.88
City New York	State NY	
Zip Code 10031-5336	Purpose of Disbursement Communications Consulting	Amount of Each Disbursement this Period 2595.88 * <input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Goldenberg, Kira, , ,		Date of Disbursement MM / DD / YYYY 02 / 20 / 2020
Mailing Address 345 W 145Th St Apt 3A6		FEC Identification Number C Transaction ID : VNV49A0P5F Amount of Each Disbursement this Period 5000.00
City New York	State NY	
Zip Code 10031-5336	Purpose of Disbursement Communications Consulting	Amount of Each Disbursement this Period 5000.00 * <input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Goldenberg, Kira, , ,		Date of Disbursement MM / DD / YYYY 03 / 13 / 2020
Mailing Address 345 W 145Th St Apt 3A6		FEC Identification Number C Transaction ID : VNV49A0MV Amount of Each Disbursement this Period 2500.00
City New York	State NY	
Zip Code 10031-5336	Purpose of Disbursement Communications Consulting	Amount of Each Disbursement this Period 2500.00 non-contribution account <input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

2500.00

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 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. Goody Goody Liquor			Date of Disbursement MM / DD / YYYY 03 / 10 / 2020		
Mailing Address 3316 Oak Lawn Ave			FEC Identification Number C [REDACTED]		
City Dallas	State TX	Zip Code 75219-4212	Transaction ID : VNV49A0MY/		
Purpose of Disbursement Beverages		Category/ Type	Amount of Each Disbursement this Period 404.64		
Candidate Name			non-contribution account		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) B. Google			Date of Disbursement MM / DD / YYYY 01 / 02 / 2020		
Mailing Address 1600 Amphitheatre Pkwy			FEC Identification Number C [REDACTED]		
City Mountain View	State CA	Zip Code 94043-1351	Transaction ID : VNV49A0MYE		
Purpose of Disbursement Software		Category/ Type	Amount of Each Disbursement this Period 69.96		
Candidate Name			non-contribution account		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) C. Google			Date of Disbursement MM / DD / YYYY 02 / 03 / 2020		
Mailing Address 1600 Amphitheatre Pkwy			FEC Identification Number C [REDACTED]		
City Mountain View	State CA	Zip Code 94043-1351	Transaction ID : VNV49A0MY		
Purpose of Disbursement Software		Category/ Type	Amount of Each Disbursement this Period 72.82		
Candidate Name			non-contribution account		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	547.42
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement MM / DD / YYYY 03 / 02 / 2020
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MYI Amount of Each Disbursement this Period [REDACTED] 76.32 non-contribution account <input type="checkbox"/> Memo Item
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Software		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. Harmon Curran Spielberg + Eisenberg LLP		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MYJ Amount of Each Disbursement this Period [REDACTED] 648.00 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) C. Harmon Curran Spielberg + Eisenberg LLP		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MY Amount of Each Disbursement this Period [REDACTED] 120.50 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:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 844.82
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 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. Harmon Curran Spielberg + Eisenberg LLP			Date of Disbursement MM / DD / YYYY 02 / 27 / 2020	
Mailing Address 1726 M St NW Ste 600				
City Washington	State DC	Zip Code 20036-4523		
Purpose of Disbursement Legal Services		Category/ Type	FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MYI Amount of Each Disbursement this Period [REDACTED] 2078.00 non-contribution account <input type="checkbox"/> Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Hotel Tonight			Date of Disbursement MM / DD / YYYY 02 / 12 / 2020	
Mailing Address 901 Market St Ste 310				
City San Francisco	State CA	Zip Code 94103-1752		
Purpose of Disbursement Lodging		Category/ Type	FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MYI Amount of Each Disbursement this Period [REDACTED] 338.00 non-contribution account <input type="checkbox"/> Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. IPFS Corporation			Date of Disbursement MM / DD / YYYY 01 / 09 / 2020	
Mailing Address 30 Montgomery St				
City Jersey City	State NJ	Zip Code 07302-3829		
Purpose of Disbursement Insurance		Category/ Type	FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MYI Amount of Each Disbursement this Period [REDACTED] 45.00 non-contribution account <input type="checkbox"/> Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional)..... ▶	[REDACTED] 2461.00
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 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. IPFS Corporation		Date of Disbursement MM / DD / YYYY 01 / 09 / 2020
Mailing Address 30 Montgomery St		FEC Identification Number C Transaction ID : VNV49A0MY1 Amount of Each Disbursement this Period 1384.21 non-contribution account <input type="checkbox"/> Memo Item
City Jersey City	State NJ	
Zip Code 07302-3829	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. IPFS Corporation		Date of Disbursement MM / DD / YYYY 02 / 10 / 2020
Mailing Address 30 Montgomery St		FEC Identification Number C Transaction ID : VNV49A0MY1 Amount of Each Disbursement this Period 1344.21 non-contribution account <input type="checkbox"/> Memo Item
City Jersey City	State NJ	
Zip Code 07302-3829	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) C. IPFS Corporation		Date of Disbursement MM / DD / YYYY 03 / 03 / 2020
Mailing Address 30 Montgomery St		FEC Identification Number C Transaction ID : VNV49A0MY1 Amount of Each Disbursement this Period 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
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)..... ▶

4003.86

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Turner, Lisa, , ,		Date of Disbursement MM / DD / YYYY 02 / 10 / 2020
Mailing Address PO Box 5373		FEC Identification Number C Transaction ID : VNV49A0P5C Amount of Each Disbursement this Period 8125.00
City Virginia Beach	State VA	
Zip Code 23471-0373	Purpose of Disbursement Political Strategy Consulting	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:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. LPAC Equality Initiative		Date of Disbursement MM / DD / YYYY 02 / 20 / 2020
Mailing Address 2120 L St NW Ste 850		FEC Identification Number C Transaction ID : VNV49A0M20 Amount of Each Disbursement this Period 5000.00 non-contribution account
City Washington	State DC	
Zip Code 20037-1550	Purpose of Disbursement Staff Time Reimbursement - See Below if Itemized	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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Turner, Lisa, , ,		Date of Disbursement MM / DD / YYYY 02 / 20 / 2020
Mailing Address PO Box 5373		FEC Identification Number C Transaction ID : VNV49A0P5J Amount of Each Disbursement this Period 5000.00
City Virginia Beach	State VA	
Zip Code 23471-0373	Purpose of Disbursement Political Strategy Consulting	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:	<input checked="" type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
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 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. Marcum, LLP		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020	
Mailing Address 1899 L St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZ3 Amount of Each Disbursement this Period [REDACTED] 1431.82 non-contribution account <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20036-3804	Category/ Type
Purpose of Disbursement Accounting Services			
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. NGP VAN, Inc.		Date of Disbursement MM / DD / YYYY 03 / 03 / 2020	
Mailing Address 1101 15Th St NW Ste 500		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZ8 Amount of Each Disbursement this Period [REDACTED] 1425.00 non-contribution account <input type="checkbox"/> Memo Item	
City Washington	State DC	Zip Code 20005-5006	Category/ Type
Purpose of Disbursement Subscription			
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. Olive Street Design		Date of Disbursement MM / DD / YYYY 01 / 03 / 2020	
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZI Amount of Each Disbursement this Period [REDACTED] 34.00 non-contribution account <input type="checkbox"/> Memo Item	
City Villa Park	State IL	Zip Code 60181-5502	Category/ Type
Purpose of Disbursement Website Services			
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] 2890.82
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 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. Olive Street Design		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [] Transaction ID : VNV49A0MZI Amount of Each Disbursement this Period [] 34.00 non-contribution account <input type="checkbox"/> Memo Item
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website Services		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. Olive Street Design		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [] Transaction ID : VNV49A0MZI Amount of Each Disbursement this Period [] 130.00 non-contribution account <input type="checkbox"/> Memo Item
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website Services		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. Olive Street Design		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [] Transaction ID : VNV49A0MZI Amount of Each Disbursement this Period [] 140.00 non-contribution account <input type="checkbox"/> Memo Item
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website Services		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).....▶	[] 304.00
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 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. 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: 02 / 27 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MZI

Amount of Each Disbursement this Period: 65.00

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: 03 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MZJ

Amount of Each Disbursement this Period: 34.00

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MZI

Amount of Each Disbursement this Period: 122.81

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	221.81
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paragon Payment Solutions		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020
Mailing Address 2141 E Broadway Rd		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZI Amount of Each Disbursement this Period [REDACTED] 224.47
City Tempe	State AZ	Zip Code 85282-1892
Purpose of Disbursement Merchant Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Paragon Payment Solutions		Date of Disbursement MM / DD / YYYY 03 / 02 / 2020
Mailing Address 2141 E Broadway Rd		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZI Amount of Each Disbursement this Period [REDACTED] 631.65
City Tempe	State AZ	Zip Code 85282-1892
Purpose of Disbursement Merchant Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 01 / 15 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZI Amount of Each Disbursement this Period [REDACTED] 258.72 non-contribution account
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

1114.84

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paychex			Date of Disbursement MM / DD / YYYY 01 / 27 / 2020	
Mailing Address 911 Panorama Trl S				
City Rochester	State NY	Zip Code 14625-2396	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Payroll Taxes			Transaction ID : VNV49A0MZf	
Candidate Name			Amount of Each Disbursement this Period 1782.77	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				

Full Name (Last, First, Middle Initial) B. Paychex			Date of Disbursement MM / DD / YYYY 01 / 31 / 2020	
Mailing Address 911 Panorama Trl S				
City Rochester	State NY	Zip Code 14625-2396	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Payroll Fee			Transaction ID : VNV49A0MZS	
Candidate Name			Amount of Each Disbursement this Period 224.96	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				

Full Name (Last, First, Middle Initial) C. Paychex			Date of Disbursement MM / DD / YYYY 01 / 31 / 2020	
Mailing Address 911 Panorama Trl S				
City Rochester	State NY	Zip Code 14625-2396	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Payroll Taxes			Transaction ID : VNV49A0MZ	
Candidate Name			Amount of Each Disbursement this Period 1779.74	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	3787.47
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paychex			Date of Disbursement MM / DD / YYYY 02 / 14 / 2020	
Mailing Address 911 Panorama Trl S			FEC Identification Number C [REDACTED]	
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : VNV49A0MZ1	
Purpose of Disbursement Payroll Fee		Candidate Name	Amount of Each Disbursement this Period [REDACTED] 125.96	
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. Paychex			Date of Disbursement MM / DD / YYYY 02 / 14 / 2020	
Mailing Address 911 Panorama Trl S			FEC Identification Number C [REDACTED]	
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : VNV49A0MZ1	
Purpose of Disbursement Payroll Taxes		Candidate Name	Amount of Each Disbursement this Period [REDACTED] 1760.27	
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	

Full Name (Last, First, Middle Initial) C. Paychex			Date of Disbursement MM / DD / YYYY 02 / 28 / 2020	
Mailing Address 911 Panorama Trl S			FEC Identification Number C [REDACTED]	
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : VNV49A0MZ1	
Purpose of Disbursement Payroll Fee		Candidate Name	Amount of Each Disbursement this Period [REDACTED] 125.96	
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)..... ▶

2012.19

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paychex			Date of Disbursement MM / DD / YYYY 02 / 28 / 2020		
Mailing Address 911 Panorama Trl S			FEC Identification Number C [REDACTED]		
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : VNV49A0MZ\		
Purpose of Disbursement Payroll Taxes		Candidate Name	Amount of Each Disbursement this Period [REDACTED] 1760.25		
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) ▼		Memo Item <input type="checkbox"/>		

Full Name (Last, First, Middle Initial) B. Paychex			Date of Disbursement MM / DD / YYYY 03 / 13 / 2020		
Mailing Address 911 Panorama Trl S			FEC Identification Number C [REDACTED]		
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : VNV49A0MZZ		
Purpose of Disbursement Payroll Fee		Candidate Name	Amount of Each Disbursement this Period [REDACTED] 125.96		
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) ▼		Memo Item <input type="checkbox"/>		

Full Name (Last, First, Middle Initial) C. Paychex			Date of Disbursement MM / DD / YYYY 03 / 13 / 2020		
Mailing Address 911 Panorama Trl S			FEC Identification Number C [REDACTED]		
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : VNV49A0N0c		
Purpose of Disbursement Payroll Taxes		Candidate Name	Amount of Each Disbursement this Period [REDACTED] 1758.51		
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) ▼		Memo Item <input type="checkbox"/>		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 3644.72
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 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. Paychex		Date of Disbursement MM / DD / YYYY 03 / 31 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0N01
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"/> Memo Item
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
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 03 / 31 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0N02
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll Taxes		Amount of Each Disbursement this Period [REDACTED] 1751.50
Candidate Name		<input type="checkbox"/> Memo Item
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
State: District:		

Full Name (Last, First, Middle Initial) C. Quickbooks		Date of Disbursement MM / DD / YYYY 03 / 12 / 2020
Mailing Address 2700 Coast Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MY
City Mountain View	State CA	Zip Code 94043-1140
Purpose of Disbursement Software		Amount of Each Disbursement this Period [REDACTED] 455.80
Candidate Name		<input type="checkbox"/> Memo Item
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
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2333.26
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 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. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 15 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MW

Amount of Each Disbursement this Period: 2894.48

Memo Item

B. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MW

Amount of Each Disbursement this Period: 2894.49

Memo Item

C. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 14 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MW

Amount of Each Disbursement this Period: 2894.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8683.45

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Sandberg, Stephanie, , ,		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MW Amount of Each Disbursement this Period [REDACTED] 2894.48 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type
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. Sandberg, Stephanie, , ,		Date of Disbursement MM / DD / YYYY 03 / 12 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MW Amount of Each Disbursement this Period [REDACTED] 2894.49 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type
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) C. Sandberg, Stephanie, , ,		Date of Disbursement MM / DD / YYYY 03 / 30 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MW Amount of Each Disbursement this Period [REDACTED] 2894.48 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 8683.45
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 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. Sheraton		Date of Disbursement MM / DD / YYYY 02 / 06 / 2020
Mailing Address 2101 N Stemmons Fwy		FEC Identification Number C Transaction ID : VNV49A0N06 Amount of Each Disbursement this Period 386.74 non-contribution account <input type="checkbox"/> Memo Item
City Dallas	State TX	
Zip Code 75207-3004	Purpose of Disbursement Lodging	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. Sheraton		Date of Disbursement MM / DD / YYYY 03 / 11 / 2020
Mailing Address 2101 N Stemmons Fwy		FEC Identification Number C Transaction ID : VNV49A0N07 Amount of Each Disbursement this Period 76.32 non-contribution account <input type="checkbox"/> Memo Item
City Dallas	State TX	
Zip Code 75207-3004	Purpose of Disbursement Lodging	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. Squarespace		Date of Disbursement MM / DD / YYYY 03 / 20 / 2020
Mailing Address 8 Clarkson St		FEC Identification Number C Transaction ID : VNV49A0N08 Amount of Each Disbursement this Period 228.96 non-contribution account <input type="checkbox"/> Memo Item
City New York	State NY	
Zip Code 10014-4301	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).....▶	692.02
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. The Turner Group

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Political Strategy Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0J

Amount of Each Disbursement this Period: 8125.00

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0P

Amount of Each Disbursement this Period: 9.32

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 06 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0c

Amount of Each Disbursement this Period: 67.14

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8201.46

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. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0R

Amount of Each Disbursement this Period: 32.31

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0S

Amount of Each Disbursement this Period: 10.30

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N01

Amount of Each Disbursement this Period: 28.86

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 71.47

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. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0V

Amount of Each Disbursement this Period: 57.20

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0V

Amount of Each Disbursement this Period: 23.96

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0V

Amount of Each Disbursement this Period: 58.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 139.22

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement MM / DD / YYYY 03 / 11 / 2020
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0N0Y Amount of Each Disbursement this Period [REDACTED] 35.31 non-contribution account <input type="checkbox"/> Memo Item
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Taxi		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. United Airlines		Date of Disbursement MM / DD / YYYY 01 / 30 / 2020
Mailing Address 233 S Wacker Dr Ste 430		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0N0Z Amount of Each Disbursement this Period [REDACTED] 206.80 non-contribution account <input type="checkbox"/> Memo Item
City Chicago	State IL	Zip Code 60606-6435
Purpose of Disbursement Airfare		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. United Airlines		Date of Disbursement MM / DD / YYYY 03 / 05 / 2020
Mailing Address 233 S Wacker Dr Ste 430		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0N1C Amount of Each Disbursement this Period [REDACTED] 734.00 non-contribution account <input type="checkbox"/> Memo Item
City Chicago	State IL	Zip Code 60606-6435
Purpose of Disbursement Airfare		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] 976.11
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 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. Witeck Communications

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW
Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 27 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N17

Amount of Each Disbursement this Period: 650.00

Memo Item

B. Witeck Communications

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW
Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 05 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N18

Amount of Each Disbursement this Period: 650.00

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	106584.62

**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. SHARICE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 13851 W 63Rd St
NUM 303

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2020

City Shawnee State KS Zip Code 66216-3800

FEC Identification Number

Purpose of Disbursement
Contribution

C C00670034

Candidate Name
DAVIDS, SHARICE, , ,

Category/
Type

Transaction ID : VNV49A0N05

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: KS District: 03

500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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

Memo Item

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

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

500.00

3500.00

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. Ann Johnson For State Rep District 134

Full Name (Last, First, Middle Initial)

Mailing Address 325 W 18Th St

City Houston State TX Zip Code 77008-3903

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 25 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MXI

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Cervantes For Assembly 2020

Full Name (Last, First, Middle Initial)

Mailing Address 1185 Magnolia Ave Ste E

City Corona State CA Zip Code 92879-3218

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 25 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MXI

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Erin Zwiener For Texas House

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 184

City Driftwood State TX Zip Code 78619-0184

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 25 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MYI

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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. Friends Of Chelsey Branham 2020

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2020 Sheffield Rd

M M M	/	D D D	/	Y Y Y Y Y
03		13		2020

City Oklahoma City State OK Zip Code 73120-4926

FEC Identification Number

Purpose of Disbursement
Non Federal Contribution

C

Candidate Name

Transaction ID : VNV49A0MY7

Amount of Each Disbursement this Period

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

1000.00

State: District:

Memo Item

B. Friends Of Kim Jackson

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 1411

M M M	/	D D D	/	Y Y Y Y Y
03		13		2020

City Pine Lake State GA Zip Code 30072-1411

FEC Identification Number

Purpose of Disbursement
Non Federal Contribution

C

Candidate Name

Transaction ID : VNV49A0MY8

Amount of Each Disbursement this Period

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

1000.00

State: District:

Memo Item

C. Julie Johnson For Texas

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 110937

M M M	/	D D D	/	Y Y Y Y Y
02		25		2020

City Carrollton State TX Zip Code 75011-0937

FEC Identification Number

Purpose of Disbursement
Non Federal Contribution

C

Candidate Name

Transaction ID : VNV49A0MY.

Amount of Each Disbursement this Period

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

1000.00

State: District:

Memo Item

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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. Maria Cadenas For Senate 2020

Full Name (Last, First, Middle Initial)

Mailing Address 325 Soquel Ave

City Santa Cruz State CA Zip Code 95062-2305

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement 02 / 25 / 2020

FEC Identification Number C

Transaction ID : VNV49A0MZ4

Amount of Each Disbursement this Period 1000.00

Memo Item

B. Medina For State Senate 2020

Full Name (Last, First, Middle Initial)

Mailing Address 7231 Boulder Ave # 211

City Highland State CA Zip Code 92346-3313

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement 02 / 25 / 2020

FEC Identification Number C

Transaction ID : VNV49A0MZ5

Amount of Each Disbursement this Period 1000.00

Memo Item

C. People Uniting To Elect Mary Washington

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2261

City Baltimore State MD Zip Code 21203-2261

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 13 / 2020

FEC Identification Number C

Transaction ID : VNV49A0N03

Amount of Each Disbursement this Period 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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. Silver4Senate 2020

Full Name (Last, First, Middle Initial)

Mailing Address 1775 E Palm Canyon Dr
Ste 372

City Palm Springs State CA Zip Code 92264-1613

Purpose of Disbursement Non Federal Contribution

Candidate Name

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

State: District:

Date of Disbursement: 02 / 25 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N08

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Susan Eggman For Senate 2020

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4587

City Riverside State CA Zip Code 92514-4587

Purpose of Disbursement Non Federal Contribution

Candidate Name

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

State: District:

Date of Disbursement: 02 / 25 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N08

Amount of Each Disbursement this Period: 1000.00

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).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	11000.00