

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

L PAC

ADDRESS (number and street) 2120 L Street NW
Suite 850
 Check if different than previously reported. (ACC) Washington DC 20037

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

C C00519413

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 M M / D D / Y Y Y Y Y Y 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 M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2020 through M M / D D / Y Y Y Y Y Y 09 / 30 / 2020

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 M M / D D / Y Y Y Y Y Y 10 / 15 / 2020

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

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

L PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	91155.00	152663.00
(ii) Unitemized	9425.50	13395.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	100580.50	166058.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	7000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	105580.50	173058.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	89143.50	268161.16
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	194724.00	441219.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	194724.00	441219.66

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	3885.81	6682.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3885.81	6682.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	34500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	250.00	600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	250.00	600.00
29. Other Disbursements (Including Non-Federal Donations).....	109098.20	340661.55
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	130734.01	382444.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	130734.01	382444.20

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	105580.50	173058.50
34. Total Contribution Refunds (from Line 28(d))	250.00	600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	105330.50	172458.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3885.81	6682.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3885.81	6682.65

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

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

FOR LINE NUMBER: PAGE 6 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

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

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

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

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

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

FOR LINE NUMBER: PAGE 7 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

C. APTEKAR, Denise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address NA Apt 406
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NA Occupation (for Individual) NA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

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

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

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

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

FOR LINE NUMBER: PAGE 8 OF 83
(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. APTEKAR, Denise, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address NA
Apt 406

City San Francisco State CA Zip Code 94105

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
07 / 23 / 2020
Transaction ID : VNW3HHS6Y13

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address NA
Apt 406

City San Francisco State CA Zip Code 94105

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
08 / 13 / 2020
Transaction ID : VNW3HHVPXX2

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address NA
Apt 406

City San Francisco State CA Zip Code 94105

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
825.00

Date of Receipt
09 / 22 / 2020
Transaction ID : VNW3HJ4HV07

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Baccash, Mary, , ,		Date of Receipt
Mailing Address 180 N Mountain Ave		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2020"/>
City Montclair	State NJ	Zip Code 07042-2307
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HJ6MZQ6
Name of Employer (for Individual) Goldman Sachs		Occupation (for Individual) Banker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Barnes, Angela, , ,		Date of Receipt
Mailing Address 6911 S Euclid Ave		<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2020"/>
City Chicago	State IL	Zip Code 60649-1511
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HHRPG68
Name of Employer (for Individual) City Tech Collaborative		Occupation (for Individual) Lawyer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="500.00"/>
		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Barnes, Angela, , ,		Date of Receipt
Mailing Address 6911 S Euclid Ave		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2020"/>
City Chicago	State IL	Zip Code 60649-1511
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HJ4HT06
Name of Employer (for Individual) City Tech Collaborative		Occupation (for Individual) Lawyer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="500.00"/>
		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 83
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Barua, Nandini, , ,		Date of Receipt MM / DD / YYYY 07 / 22 / 2020
Mailing Address 4250 Paddock Ln # 1194		Transaction ID : VNW3HHS6RR0
City Prosper	State TX	Zip Code 75078-1801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Beyond Barriers LLC	Occupation (for Individual) Owner	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Barua, Nikki, , ,		Date of Receipt MM / DD / YYYY 09 / 18 / 2020
Mailing Address 4250 Paddock Ln # 1194		Transaction ID : VNW3HJ34HJ6
City Prosper	State TX	Zip Code 75078-1801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Beyond Barriers LLC	Occupation (for Individual) Owner	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 83
	<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. Bennetts, Geni, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Lupine Hill Rd
 City Napa State CA Zip Code 94558-3819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Resolve Healthcare Consulting LLC (Ph
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

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

B. Biskupski, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1519 S 1900 E
 City Salt Lake City State UT Zip Code 84108-2653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

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

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

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

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 83
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Buckwalter-Poza, Rebecca, , ,		Date of Receipt MM / DD / YYYY 09 / 20 / 2020
Mailing Address 1447 Chapin St NW Apt 301		Transaction ID : VNW3HJ3N0X9
City Washington	State DC	Zip Code 20009-4100
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Justice Collaborative	Occupation (for Individual) Senior Strategist	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Byrne, Jane, , ,		Date of Receipt MM / DD / YYYY 07 / 08 / 2020
Mailing Address 155 W 18Th St Apt 304		Transaction ID : VNW3HHNHQA8
City New York	State NY	Zip Code 10011-4170
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) McDermott Will & Emory	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Cherry, Elyse, , ,		Date of Receipt MM / DD / YYYY 07 / 08 / 2020
Mailing Address 46 Cotswold Rd		Transaction ID : VNW3HHNHQP7
City Brookline	State MA	Zip Code 02445-5837
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) BlueHub Capital	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 83
	<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 ▼
502.50

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2020

Transaction ID : VNW3HJC3EH0E

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2020

Transaction ID : VNW3HJ4PBT9

Amount of Each Receipt this Period
250.00

Memo Item

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

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2020

Transaction ID : VNW3HJ31YA6

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Douglas, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 345 E 84Th St
 Apt 1
 City New York State NY Zip Code 10028-4434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Carolyn J Douglas, MD Occupation (for Individual) Psychiatrist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2020
Transaction ID : VNW3HJ3RSQ1
 Amount of Each Receipt this Period
 500.00
 Memo Item

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

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

C. Edwards, William B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 E Putnam Ave
 3270
 City Greenwich State CT Zip Code 06830-5424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2020
Transaction ID : VNW3HJ31XM3
 Amount of Each Receipt this Period
 5000.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 16 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Fato, Lucy, , ,		Date of Receipt MM / DD / YYYY 09 / 16 / 2020
Mailing Address 275 Central Park W Apt 16C		Transaction ID : VNW3HJ2ZPM3
City New York	State NY	Zip Code 10024-3058
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) AIG	Occupation (for Individual) Lawyer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Felicio, Diane, , ,		Date of Receipt MM / DD / YYYY 07 / 23 / 2020
Mailing Address 39 Westchester Rd Westchester Road		Transaction ID : VNW3HHS6W91
City Jamaica Plain	State MA	Zip Code 02130-3451
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3000.00
Name of Employer (for Individual) The Health Initiative	Occupation (for Individual) COO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Field, Michael, , ,		Date of Receipt MM / DD / YYYY 07 / 06 / 2020
Mailing Address 177 9Th Ave Apt PHC		Transaction ID : VNW3HHNE3A3
City New York	State NY	Zip Code 10011-4969
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Field Real Estate Holdings	Occupation (for Individual) Real Estate Consultant	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

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

Mailing Address 1819 Humboldt Ave S

City Minneapolis	State MN	Zip Code 55403-2814
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID : VNW3HJ4N5T8

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 11920 Latigo Ln

City Oakton	State VA	Zip Code 22124-2313
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID : VNW3HJ31V43

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 75 Bank St
Apt 3Q

City New York	State NY	Zip Code 10014-5909
------------------	-------------	------------------------

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

Name of Employer (for Individual) NYS Assembly	Occupation (for Individual) State Legislator
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2020

Transaction ID : VNW3HJ4C9C5

Amount of Each Receipt this Period
500.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Goldberg, Phillip, M, ,		Date of Receipt
Mailing Address 2323 N Janssen Ave		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2020"/>
City Chicago	State IL	Zip Code 60614-3019
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HJ441Z6
Name of Employer (for Individual) Foley & Lardner LLP		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Occupation (for Individual) Attorney		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Greer, Lynn, , ,		Date of Receipt
Mailing Address 4865 Lakeridge Ter W		<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2020"/>
City Reno	State NV	Zip Code 89509-5850
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HHTXW97
Name of Employer (for Individual) Retired		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Occupation (for Individual) Realtor		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Guthman, Maureen, , ,		Date of Receipt
Mailing Address 395 Riverside Dr 11F		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2020"/>
City New York	State NY	Zip Code 10025-1859
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HHS GP56
Name of Employer (for Individual) BET Networks		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual) Executive		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="3500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="4500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 20 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 83
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Holloway, Jane, , ,		Date of Receipt MM / DD / YYYY 08 / 17 / 2020
Mailing Address 2202 Decatur PI NW		Transaction ID : VNW3HHX6865
City Washington	State DC	Zip Code 20008-4008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Holloway Systems	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hoover, Kimberly, , ,		Date of Receipt MM / DD / YYYY 07 / 28 / 2020
Mailing Address 1111 SW 1St Ave 2919		Transaction ID : VNW3HHSNB1
City Miami	State FL	Zip Code 33130-5401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Red Multifamily	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hoover, Kimberly, , ,		Date of Receipt MM / DD / YYYY 08 / 28 / 2020
Mailing Address 1111 SW 1St Ave 2919		Transaction ID : VNW3HHY8849
City Miami	State FL	Zip Code 33130-5401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Red Multifamily	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 800.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. 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 ▼ 900.00

Date of Receipt 09 / 28 / 2020
Transaction ID : VNW3HJ62AN3
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Huth, Elaine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8730 Marianna Dr
 City Forestville State CA Zip Code 95436-9658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Retired Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2020
Transaction ID : VNW3HJ2XFG0
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Jones, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11220 72Nd Dr
 Apt D16
 City Forest Hills State NY Zip Code 11375-5655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Unemployed Occupation (for Individual) Unemployed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2020
Transaction ID : VNW3HHY19V5
 Amount of Each Receipt this Period 300.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 24 OF 83
(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. Jones, Kathleen, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11220 72Nd Dr
Apt D16

City Forest Hills State NY Zip Code 11375-5655

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 22 / 2020
Transaction ID : VNW3HJ4HTJ8

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 500 E 77Th St
Apt 1919

City New York State NY Zip Code 10162-0007

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

Name of Employer (for Individual) Cornerstone Capital Inc. Occupation (for Individual) Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 27 / 2020
Transaction ID : VNW3HHSM9Q3

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 67 Clarendon Park

City Roslindale State MA Zip Code 02131-4202

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 29 / 2020
Transaction ID : VNW3HJ6N9N1

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1125.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 83
	<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 07 / 09 / 2020
Transaction ID : VNW3HHNJQD8
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Laguens, Dawn, , ,		Date of Receipt MM / DD / YYYY 07 / 11 / 2020
Mailing Address 2006 Ashby Ave		Transaction ID : VNW3HHR9DM8
City Austin	State TX	Zip Code 78704-2038
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Strategic Advisor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Laguens, Dawn, , ,		Date of Receipt MM / DD / YYYY 08 / 11 / 2020
Mailing Address 2006 Ashby Ave		Transaction ID : VNW3HHV1NA0
City Austin	State TX	Zip Code 78704-2038
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Strategic Advisor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Laguens, Dawn, , ,		Date of Receipt MM / DD / YYYY 09 / 11 / 2020
Mailing Address 2006 Ashby Ave		Transaction ID : VNW3HJ2TEZ2
City Austin	State TX	Zip Code 78704-2038
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Strategic Advisor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 4500.00	

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 28 OF 83
	<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. Linsky, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Evergreen Way
 City Sleepy Hollow State NY Zip Code 10591-1119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) McDermott Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

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

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

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

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 83
	<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. Miller-Stevens, Taryn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 238 W 108Th St
 Apt 6
 City New York State NY Zip Code 10025-2998
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) All The Things Consulting LLC Occupation (for Individual) Self Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

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

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

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

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Morse, Gail, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3739 N Wilton Ave
 2
 City Chicago State IL Zip Code 60613-0342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jenner & Block 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
 09 / 21 / 2020
Transaction ID : VNW3HJ3RSR9
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Nelson, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10115 Colonial Country Club Blvd
 Apt 2103
 City Fort Myers State FL Zip Code 33913-6656
 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
 08 / 18 / 2020
Transaction ID : VNW3HHX94X1
 Amount of Each Receipt this Period
 150.00
 Memo Item

C. Nelson, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10115 Colonial Country Club Blvd
 Apt 2103
 City Fort Myers State FL Zip Code 33913-6656
 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 ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2020
Transaction ID : VNW3HJ4NWX1
 Amount of Each Receipt this Period
 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

C. Pellett, Clark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 W North Ave
 Horedr
 City Chicago State IL Zip Code 60610-1000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 83
<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. Pizer, Jonathan ?Yoni?, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 551 W Stratford Pl
 City Chicago State IL Zip Code 60657-2629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Illinois General Assembly Occupation (for Individual) State Legislator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2020
Transaction ID : VNW3HJ4JQE7
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Pritzker, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 S Michigan Ave Ste 500
 City Chicago State IL Zip Code 60603-5958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tawani Enterprises Inc. Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 24 / 2020
Transaction ID : VNW3HJB1SJ5
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Pritzker, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 S Michigan Ave Ste 500
 City Chicago State IL Zip Code 60603-5958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tawani Enterprises Inc. Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 19 / 2020
Transaction ID : VNW3HJ34W08
 Amount of Each Receipt this Period 1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Reamer, Sue, , ,		Date of Receipt MM / DD / YYYY 09 / 18 / 2020
Mailing Address 20 Webster St Apt 213		Transaction ID : VNW3HJ34HY1
City Brookline	State MA	Zip Code 02446-4963
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Reinstein, Shad, , ,		Date of Receipt MM / DD / YYYY 08 / 13 / 2020
Mailing Address 1075 Sholem Ln		Transaction ID : VNW3HHVPWP6
City Sebastopol	State CA	Zip Code 95472-4033
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Rojas, Fermin, , ,		Date of Receipt MM / DD / YYYY 08 / 19 / 2020
Mailing Address 35 Bayberry Ave		Transaction ID : VNW3HHXAF88
City Provincetown	State MA	Zip Code 02657-1214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3500.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Filmmaker	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 3500.00	

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

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

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

FOR LINE NUMBER: PAGE 35 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Rojas, Fermin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 Bayberry Ave
 City Provincetown State MA Zip Code 02657-1214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Filmmaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 09 / 21 / 2020
Transaction ID : VNW3HJ4GSF3
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Sadoff, Carla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68 N 5Th St NY
 City Hudson State NY Zip Code 12534-1722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lumeri Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2008.00

Date of Receipt 07 / 23 / 2020
Transaction ID : VNW3HHS6XZ7
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Sadoff, Carla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68 N 5Th St NY
 City Hudson State NY Zip Code 12534-1722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lumeri Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2033.00

Date of Receipt 09 / 15 / 2020
Transaction ID : VNW3HJ2XEE2
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Sandberg, Leslie, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 Thistlemore Rd

City Provincetown	State MA	Zip Code 02657-1750
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Rose,Sandberg & Associates - Strategic	Occupation (for Individual) Self Employed
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2020

Transaction ID : VNW3HHX9Y81

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 180 W 58Th St
8A

City New York	State NY	Zip Code 10019-2145
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	09	/	2020

Transaction ID : VNW3HHNKBW9

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 500 Hillcrest Dr
Address Line 2

City Santa Fe	State NM	Zip Code 87501-1180
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2020

Transaction ID : VNW3HJ28F68

Amount of Each Receipt this Period
500.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 37 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

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

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

B. Schreter, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1898 Crestline Dr NE
 City Atlanta State GA Zip Code 30345-3804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Littler Mendelson Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 05 / 2020
Transaction ID : VNW3HHTBNH2
 Amount of Each Receipt this Period 1000.00
 Memo Item

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 83
<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. Sheridan, Dixie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 W 24Th St
 Apt 4D
 City New York State NY Zip Code 10011-1907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Self Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

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

B. Signer, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 Galt Ocean Dr
 1106-S
 City Fort Lauderdale State FL Zip Code 33308-7043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

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

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sparks, Allison, J, ,		Date of Receipt
Mailing Address 60 Collingwood St		<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2020"/>
City San Francisco	State CA	Zip Code 94114-1907
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HHTZDG5
Name of Employer (for Individual) Masto Foundation		Occupation (for Individual) Executive Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="500.00"/>
		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1100.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 83
	<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. Sullivan, Colleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2081 Redcliff St
 City Los Angeles State CA Zip Code 90039-3026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

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

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

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

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 McKeon Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 07 / 26 / 2020
Transaction ID : VNW3HHSJV95
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6325.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 83
	<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. 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 McKeon Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11000.00

Date of Receipt 09 / 18 / 2020
Transaction ID : VNW3HJ34HE4
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Weingast, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1410
 Apt 17A
 City Amagansett State NY Zip Code 11930-1410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robin S. Weingast And Associates Inc Occupation (for Individual) CEO Benefits Consultant Company
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 16 / 2020
Transaction ID : VNW3HJ2ZG93
 Amount of Each Receipt this Period 500.00
 Memo Item

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	91155.00

**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 42 OF 83
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. EQUALITY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 15337

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : VNW3HJB1SR3

Amount of Each Receipt this Period
5000.00

Memo Item

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

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 83
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2020

Transaction ID : VNW3HJB1SP7

Amount of Each Receipt this Period
5000.00

Memo Item

non-contribution account

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2020

Transaction ID : VNW3HJB1SQ5

Amount of Each Receipt this Period
5000.00

Memo Item

non-contribution account

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

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2020

Transaction ID : VNW3HJC3C93

Amount of Each Receipt this Period
1000.00

Memo Item

non-contribution account

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 83
<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. 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) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **08 / 10 / 2020**
Transaction ID : VNW3HHTYNT4
 Amount of Each Receipt this Period 5000.00
 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) Occupation (for Individual)
 Netflix Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10500.00

Date of Receipt **09 / 21 / 2020**
Transaction ID : VNW3HJ3RSM7
 Amount of Each Receipt this Period 500.00
 Memo Item
 non-contribution account

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) Occupation (for Individual)
 The Health Initiative COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 23 / 2020**
Transaction ID : VNW3HJC80M5
 Amount of Each Receipt this Period 1000.00
 Memo Item
 non-contribution account

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 83
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

C. Reamer, Sue, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Webster St
 Apt 213
 City Brookline State MA Zip Code 02446-4963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 30000.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 83
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Reamer, Sue, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Webster St
 Apt 213
 City Brookline State MA Zip Code 02446-4963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 31000.00

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

B. Reamer, Sue, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Webster St
 Apt 213
 City Brookline State MA Zip Code 02446-4963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 33000.00

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

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 83
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

C. Social Good Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12651 San Pablo Ave Unit 5473
 City Richmond State CA Zip Code 94805-4021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 14000.00

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

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	89143.46

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 08 / 23 / 2020
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A1AE3 Amount of Each Disbursement this Period 0.10
City Somerville	State MA	
Zip Code 02144-3132		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 09 / 27 / 2020
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A1ADZ Amount of Each Disbursement this Period 19.75
City Somerville	State MA	
Zip Code 02144-3132		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. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 07 / 02 / 2020
Mailing Address 1825 K St NW Frnt 1		FEC Identification Number C Transaction ID : VNV49A13E4 Amount of Each Disbursement this Period 347.00
City Washington	State DC	
Zip Code 20006-1245		Memo Item <input type="checkbox"/>
Purpose of Disbursement Bank Fee		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	366.85
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	45.25
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 09 / 28 / 2020	
Mailing Address 1825 K St NW Frnt 1		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19N7 Amount of Each Disbursement this Period [REDACTED] 10.88	
City Washington	State DC	Zip Code 20006-1245	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		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. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 09 / 28 / 2020	
Mailing Address 1825 K St NW Frnt 1		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19N9 Amount of Each Disbursement this Period [REDACTED] 10.00	
City Washington	State DC	Zip Code 20006-1245	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		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. Paragon Payment Solutions		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020	
Mailing Address 2141 E Broadway Rd		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15Q Amount of Each Disbursement this Period [REDACTED] 2188.30	
City Tempe	State AZ	Zip Code 85282-1892	Category/ Type [REDACTED]
Purpose of Disbursement Merchant Fee		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)..... ▶

2209.18

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paragon Payment Solutions		Date of Disbursement MM / DD / YYYY 09 / 02 / 2020	
Mailing Address 2141 E Broadway Rd			
City Tempe	State AZ	Zip Code 85282-1892	
Purpose of Disbursement Merchant Fee		FEC Identification Number C	
Candidate Name		Transaction ID : VNV49A19NH Amount of Each Disbursement this Period 1264.53	
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.		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period	
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.		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period	
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).....▶	1264.53
TOTAL This Period (last page this line number only).....▶	3885.81

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

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

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement Contribution

C C00575209

Candidate Name

CRAIG, ANGELA DAWN, , ,

Category/Type

Transaction ID : VNV49A13E6

Amount of Each Disbursement this Period

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

2500.00

State: MN District: 02

Memo Item

B. BETH DOGLIO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 301

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

City Olympia State WA Zip Code 98507-0301

FEC Identification Number

Purpose of Disbursement Contribution

C C00735308

Candidate Name

Category/Type

Transaction ID : VNV49A13E7

Amount of Each Disbursement this Period

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

2500.00

State: WA District: 10

Memo Item

C. BETH DOGLIO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 301

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

City Olympia State WA Zip Code 98507-0301

FEC Identification Number

Purpose of Disbursement Contribution

C C00735308

Candidate Name

Category/Type

Transaction ID : VNV49A15Q1

Amount of Each Disbursement this Period

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

5000.00

State: WA District: 10

Memo Item

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. GEORGETTE GOMEZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 777 S Figueroa St
Ste 4050

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

City Los Angeles State CA Zip Code 90017-5864

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00719112
---	-----------

Candidate Name
GOMEZ, GEORGETTE, , ,

Category/
Type

Transaction ID : VNV49A15QN

Amount of Each Disbursement this Period

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

2500.00

State: CA District: 53

Memo Item

B. Gina Ortiz Jones For Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 769186

M M M	/	D D D	/	Y Y Y Y Y
09		01		2020

City San Antonio State TX Zip Code 78245-9186

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00652297
---	-----------

Candidate Name
Ortiz Jones, Gina, , ,

Category/
Type

Transaction ID : VNV49A19NB

Amount of Each Disbursement this Period

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

2500.00

State: TX District: 23

Memo Item

C. 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
07		27		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 : VNV49A13EC

Amount of Each Disbursement this Period

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

2500.00

State: KS District: 03

Memo Item

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

7500.00

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

17500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Silverman, Jay, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: 09 / 11 / 2020

Mailing Address: 685 S La Posada Cir # GH604

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

Purpose of Disbursement: Contribution Refund

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID: VNV49A1B8Y

Amount of Each Disbursement this Period: 250.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement:

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement:

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2020

FEC Identification Number: C

Transaction ID : VNV49A1AE1

Amount of Each Disbursement this Period: 395.00

Memo Item

B. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 24 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13ED

Amount of Each Disbursement this Period: 25.50

Memo Item

C. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QI

Amount of Each Disbursement this Period: 11.21

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW
Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19N8

Amount of Each Disbursement this Period: 40.75

Memo Item

B. Blue Wave Political Partners LLC

Full Name (Last, First, Middle Initial)

Mailing Address 514 Daniels St
286

City Raleigh State NC Zip Code 27605-1317

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 31 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EE

Amount of Each Disbursement this Period: 1500.00

Memo Item

C. Blue Wave Political Partners LLC

Full Name (Last, First, Middle Initial)

Mailing Address 514 Daniels St
286

City Raleigh State NC Zip Code 27605-1317

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 27 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QI

Amount of Each Disbursement this Period: 1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3040.75

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Blue Wave Political Partners LLC

Full Name (Last, First, Middle Initial)

Mailing Address 514 Daniels St # 286

City Raleigh State NC Zip Code 27605-1317

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 18 / 2020

FEC Identification Number C

Transaction ID : VNV49A19NA

Amount of Each Disbursement this Period 1500.00

Memo Item

B. Bowers, Meredith, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3645 13Th St NW

City Washington State DC Zip Code 20010-1408

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 07 / 14 / 2020

FEC Identification Number C

Transaction ID : VNV49A13E0

Amount of Each Disbursement this Period 212.04

Memo Item

C. Bowers, Meredith, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3645 13Th St NW

City Washington State DC Zip Code 20010-1408

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 07 / 30 / 2020

FEC Identification Number C

Transaction ID : VNV49A13E1

Amount of Each Disbursement this Period 159.03

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Bowers, Meredith, , ,		Date of Disbursement MM / DD / YYYY 08 / 31 / 2020
Mailing Address 3645 13Th St NW		FEC Identification Number C Transaction ID : VNV49A15Q# Amount of Each Disbursement this Period 39.76 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20010-1408	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Care Creative		Date of Disbursement MM / DD / YYYY 08 / 27 / 2020
Mailing Address 172 Pacific Avenue,		FEC Identification Number C Transaction ID : VNV49A15QJ Amount of Each Disbursement this Period 2082.50 non-contribution account <input type="checkbox"/> Memo Item
City Toronto ON M6P 2P5 Canada	State ZZ	
Zip Code 00000	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. Care Creative		Date of Disbursement MM / DD / YYYY 09 / 18 / 2020
Mailing Address 172 Pacific Avenue,		FEC Identification Number C Transaction ID : VNV49A19NC Amount of Each Disbursement this Period 1275.00 non-contribution account <input type="checkbox"/> Memo Item
City Toronto ON M6P 2P5 Canada	State ZZ	
Zip Code 00000	Purpose of Disbursement Graphic Design	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).....▶	3397.26
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. CNA

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EF

Amount of Each Disbursement this Period: 243.77

Memo Item

B. CNA

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QK

Amount of Each Disbursement this Period: 243.77

Memo Item

C. CNA

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 02 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19NE

Amount of Each Disbursement this Period: 243.77

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Connolly For House

Full Name (Last, First, Middle Initial)

Mailing Address 1321 E Garfield St

City Laramie State WY Zip Code 82070-4133

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E8

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. DC Health Link

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EG

Amount of Each Disbursement this Period: 3799.74

non-contribution account

Memo Item

C. DC Health Link

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 25 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QI

Amount of Each Disbursement this Period: 3376.96

non-contribution account

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Goldenberg, Kira, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 345 W 145Th St
Apt 3A6

City New York State NY Zip Code 10031-5336

Purpose of Disbursement Salary

Candidate Name

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

State: District:

Date of Disbursement: 09 / 10 / 2020

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

B. Google

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Software

Candidate Name

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

State: District:

Date of Disbursement: 07 / 03 / 2020

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

C. Google

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Software

Candidate Name

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

State: District:

Date of Disbursement: 08 / 03 / 2020

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

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Grasshopper.Com		Date of Disbursement MM / DD / YYYY 09 / 04 / 2020
Mailing Address 197 1St Ave Ste 200		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NV Amount of Each Disbursement this Period [REDACTED] 34.00 non-contribution account <input type="checkbox"/> Memo Item
City Needham	State MA	Zip Code 02494-2873
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 07 / 27 / 2020
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13EM Amount of Each Disbursement this Period [REDACTED] 664.00 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 08 / 25 / 2020
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QI Amount of Each Disbursement this Period [REDACTED] 1068.00 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:		

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

[REDACTED] 1766.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Harmon Curran Spielberg + Eisenberg LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1726 M St NW
Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement Legal Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 21 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19NC

Amount of Each Disbursement this Period: 193.00

Memo Item

B. IPFS Corporation

Full Name (Last, First, Middle Initial)

Mailing Address 30 Montgomery St

City Jersey City State NJ Zip Code 07302-3829

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 02 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13EN

Amount of Each Disbursement this Period: 1275.44

Memo Item

C. Jennifer Webb Campaign

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 12142

City Saint Petersburg State FL Zip Code 33733-2142

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E9

Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. JoAnna For Wisconsin		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 1314 S 1St St # 179		FEC Identification Number C Transaction ID : VNV49A13EA Amount of Each Disbursement this Period 500.00
City Milwaukee	State WI Zip Code 53204-2405	
Purpose of Disbursement Non-Federal Contribution		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Michele Rayner For Florida		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address PO Box 35218		FEC Identification Number C Transaction ID : VNV49A13EB Amount of Each Disbursement this Period 1000.00
City Saint Petersburg	State FL Zip Code 33705-0504	
Purpose of Disbursement Non-Federal Contribution		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc.		Date of Disbursement MM / DD / YYYY 09 / 01 / 2020
Mailing Address 1101 15Th St NW Ste 500		FEC Identification Number C Transaction ID : VNV49A19N2 Amount of Each Disbursement this Period 1425.00 non-contribution account
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement Software		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

2925.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Olive Street Design		Date of Disbursement MM / DD / YYYY 07 / 03 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13EP
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website Services		Amount of Each Disbursement this Period [REDACTED] 34.00
Candidate Name		<input type="checkbox"/> 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. Olive Street Design		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QS
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website Services		Amount of Each Disbursement this Period [REDACTED] 34.00
Candidate Name		<input type="checkbox"/> 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. Olive Street Design		Date of Disbursement MM / DD / YYYY 09 / 03 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19Pc
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website Services		Amount of Each Disbursement this Period [REDACTED] 34.00
Candidate Name		<input type="checkbox"/> 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] 102.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C Transaction ID : VNV49A13EC Amount of Each Disbursement this Period 136.55 non-contribution account <input type="checkbox"/> Memo Item
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll Fee	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. Paychex		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C Transaction ID : VNV49A13ES Amount of Each Disbursement this Period 1974.49 non-contribution account <input type="checkbox"/> Memo Item
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 31 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13ER

Amount of Each Disbursement this Period: 125.95

Memo Item

B. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 14 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QW

Amount of Each Disbursement this Period: 125.96

Memo Item

C. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 14 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15Q

Amount of Each Disbursement this Period: 1920.92

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2172.83

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QZ

Amount of Each Disbursement this Period: 1930.95

Memo Item

B. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15QX

Amount of Each Disbursement this Period: 125.95

Memo Item

C. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19N.

Amount of Each Disbursement this Period: 133.26

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

3975.10

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. Preferred Insurance Services Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 26 Fairfax St SE
Ste G

City Leesburg State VA Zip Code 20175-3638

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 01 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19NF

Amount of Each Disbursement this Period: 1507.90

Memo Item

B. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 14 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E2

Amount of Each Disbursement this Period: 2910.41

Memo Item

C. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 30 / 2020

FEC Identification Number: C

Transaction ID : VNV49A13E3

Amount of Each Disbursement this Period: 2910.42

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Sandberg, Stephanie, , ,		Date of Disbursement MM / DD / YYYY 08 / 14 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QE Amount of Each Disbursement this Period [REDACTED] 2910.41 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton	State NJ	Zip Code 08540-6760	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 08 / 31 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15QC Amount of Each Disbursement this Period [REDACTED] 2910.42 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type
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 09 / 14 / 2020	
Mailing Address 32 Vreeland Ct		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19N5 Amount of Each Disbursement this Period [REDACTED] 2910.41 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton	State NJ	Zip Code 08540-6760	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)..... ▶

8731.24

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

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

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

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

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

2946.40

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Stamps.Com		Date of Disbursement MM / DD / YYYY 09 / 14 / 2020	
Mailing Address 1990 E Grand Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NR Amount of Each Disbursement this Period [REDACTED] 17.99 non-contribution account <input type="checkbox"/> Memo Item	
City El Segundo	State CA	Zip Code 90245-5013	Category/ Type
Purpose of Disbursement Postage			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. The Turner Group		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020	
Mailing Address PO Box 5373		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13EW Amount of Each Disbursement this Period [REDACTED] 8125.00 non-contribution account <input type="checkbox"/> Memo Item	
City Virginia Beach	State VA	Zip Code 23471-0373	Category/ Type
Purpose of Disbursement Political Strategy 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. The Turner Group		Date of Disbursement MM / DD / YYYY 08 / 25 / 2020	
Mailing Address PO Box 5373		FEC Identification Number C [REDACTED] Transaction ID : VNV49A15R1 Amount of Each Disbursement this Period [REDACTED] 8125.00 non-contribution account <input type="checkbox"/> Memo Item	
City Virginia Beach	State VA	Zip Code 23471-0373	Category/ Type
Purpose of Disbursement Political Strategy 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).....▶	[REDACTED] 16267.99
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)
A. The Turner Group

Date of Disbursement: MM / DD / YYYY
09 / 23 / 2020

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:

FEC Identification Number: **C**
Transaction ID : VNV49A19NT
Amount of Each Disbursement this Period: 8125.00
non-contribution account
 Memo Item

Full Name (Last, First, Middle Initial)
B. USPS

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

Mailing Address 1800 M St NW

City Washington State DC Zip Code 20036-5802

Purpose of Disbursement Postage

Candidate Name

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

State: District:

FEC Identification Number: **C**
Transaction ID : VNV49A19NQ
Amount of Each Disbursement this Period: 100.00
non-contribution account
 Memo Item

Full Name (Last, First, Middle Initial)
C. Witeck Communications

Date of Disbursement: MM / DD / YYYY
07 / 28 / 2020

Mailing Address 2120 L St NW Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

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

State: District:

FEC Identification Number: **C**
Transaction ID : VNV49A13E
Amount of Each Disbursement this Period: 1300.00
non-contribution account
 Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Witeck Communications		Date of Disbursement MM / DD / YYYY 09 / 18 / 2020
Mailing Address 2120 L St NW Ste 850		FEC Identification Number C [REDACTED] Transaction ID : VNV49A19NS Amount of Each Disbursement this Period [REDACTED] 650.00 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20037-1550
Purpose of Disbursement Rent		Category/ Type [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. Zoom.US		Date of Disbursement MM / DD / YYYY 07 / 01 / 2020
Mailing Address 55 Almaden Blvd		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13EY Amount of Each Disbursement this Period [REDACTED] 15.89 non-contribution account <input type="checkbox"/> Memo Item
City San Jose	State CA	Zip Code 95113-1608
Purpose of Disbursement Software		Category/ Type [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. Zoom.US		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 55 Almaden Blvd		FEC Identification Number C [REDACTED] Transaction ID : VNV49A13E2 Amount of Each Disbursement this Period [REDACTED] 12.31 non-contribution account <input type="checkbox"/> Memo Item
City San Jose	State CA	Zip Code 95113-1608
Purpose of Disbursement Software		Category/ Type [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] 678.20
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Zoom.US

Full Name (Last, First, Middle Initial)

Mailing Address 55 Almaden Blvd

City San Jose State CA Zip Code 95113-1608

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15R2

Amount of Each Disbursement this Period: 58.29

Memo Item

B. Zoom.US

Full Name (Last, First, Middle Initial)

Mailing Address 55 Almaden Blvd

City San Jose State CA Zip Code 95113-1608

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 19 / 2020

FEC Identification Number: C

Transaction ID : VNV49A15R3

Amount of Each Disbursement this Period: 22.23

Memo Item

C. Zoom.US

Full Name (Last, First, Middle Initial)

Mailing Address 55 Almaden Blvd

City San Jose State CA Zip Code 95113-1608

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 01 / 2020

FEC Identification Number: C

Transaction ID : VNV49A19N

Amount of Each Disbursement this Period: 111.29

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 191.81

TOTAL This Period (last page this line number only)..... ▶ 108678.96