

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) 1001 G Street, NW Suite 800 Washington DC 20001

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00519413

3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01 01 2016 through 03 31 2016

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

Type or Print Name of Treasurer Hillary Rosen

Signature of Treasurer Hilary Rosen [Electronically Filed] Date 04 15 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only table with 7 empty columns

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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="2016"/>	<input type="text" value="92855.76"/>	<input type="text" value="92855.76"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="92855.76"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="238243.50"/>	<input type="text" value="238243.50"/>
(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="331099.26"/>	<input type="text" value="331099.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="199320.62"/>	<input type="text" value="199320.62"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="131778.64"/>	<input type="text" value="131778.64"/>
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: 01 / 01 / 2016 To: 03 / 31 / 2016

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).....	75420.16	75420.16
(ii) Unitemized	3048.34	3048.34
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	78468.50	78468.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1075.00	1075.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	79543.50	79543.50
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.).....	158700.00	158700.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	238243.50	238243.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	238243.50	238243.50

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	219.30	219.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	219.30	219.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13270.16	13270.16
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	185831.16	185831.16
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	199320.62	199320.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	199320.62	199320.62

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	79543.50	79543.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	79543.50	79543.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	219.30	219.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	219.30	219.30

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Donna Aliperti		Date of Receipt MM / DD / YYYY 03 / 24 / 2016 Transaction ID : VNW3HE9EAG6
Mailing Address 623 Commercial St		Amount of Each Receipt this Period 1000.00
City Provincetown	State MA	Zip Code 02657-1723
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Front Street	Occupation Chef	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Duffy Baum		Date of Receipt MM / DD / YYYY 03 / 25 / 2016 Transaction ID : VNW3HE9FP10
Mailing Address 37 Applecross Rd		Amount of Each Receipt this Period 250.00
City Weaverville	State NC	Zip Code 28787-9203
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Patricia Bauman		Date of Receipt MM / DD / YYYY 03 / 24 / 2016 Transaction ID : VNW3HE9EC79
Mailing Address 2358 Massachusetts Ave NW		Amount of Each Receipt this Period 10000.00
City Washington	State DC	Zip Code 20008-2801
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Bauman Foundation	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional).....▶	11250.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 51
<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 (Last, First, Middle Initial) A. Elizabeth Bremner			Date of Receipt MM / DD / YYYY 03 / 09 / 2016 Transaction ID : VNW3HE8N041
Mailing Address 907 Allahna Way			Amount of Each Receipt this Period 500.00
City Santa Fe	State NM	Zip Code 87501-7068	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer KC Properties	Occupation Administrator	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Kathy Cotter			Date of Receipt MM / DD / YYYY 03 / 12 / 2016 Transaction ID : VNW3HE8SP40
Mailing Address 623 Commercial St			Amount of Each Receipt this Period 250.00
City Provincetown	State MA	Zip Code 02657-1723	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer front street	Occupation chef	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Karen Dixon			Date of Receipt MM / DD / YYYY 03 / 11 / 2016 Transaction ID : VNW3HE8SMM4
Mailing Address 2414 Tracy PI NW			Amount of Each Receipt this Period 25000.00
City Washington	State DC	Zip Code 20008-1627	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Attorney	Aggregate Year-to-Date ▼ 25000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	25750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 51
	<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 (Last, First, Middle Initial)
A. Barcy Fisher

Mailing Address 1620 7th Ave W

City State Zip Code
Seattle WA 98119-2919

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

Name of Employer Occupation
Stay at home mom Stay at home mom

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : VNW3HE9FHY7

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Gabrielle Hanna

Mailing Address 41 Pleasant St

City State Zip Code
Provincetown MA 02657-2000

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

Name of Employer Occupation
Coldwell Banker Pat Shultz Real Estate Realtor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 23 / 2016

Transaction ID : VNW3HE5NHQ2

Amount of Each Receipt this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Dawn Laguens

Mailing Address 3250 Tennyson St NW

City State Zip Code
Washington DC 20015-2463

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

Name of Employer Occupation
Planned Parenthood Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2016

Transaction ID : VNW3HE8SHD2

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1650.00

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 51
<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. Patrick Lannon
Full Name (Last, First, Middle Initial)
Mailing Address 4410 N Racine Ave
City Chicago State IL Zip Code 60640-5613
FEC ID number of contributing federal political committee. **C**
Name of Employer Wild & Precious Occupation Ex. Asst
Receipt For: 2016
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt 03 / 31 / 2016
Transaction ID : VNW3HE9VWR6
Amount of Each Receipt this Period 20.16
 Memo Item
Earmarked for TAMMY FOR ILLINOIS

B. Joyce Newstat
Full Name (Last, First, Middle Initial)
Mailing Address 1200 California St # 27
City San Francisco State CA Zip Code 94109-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer Rocket Science Associates Occupation Policy consultant
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 11 / 2016
Transaction ID : VNW3HEA6J04
Amount of Each Receipt this Period 5000.00
 Memo Item

C. Betty Orlandino
Full Name (Last, First, Middle Initial)
Mailing Address 3332 NE 190th St Uph 15
City Aventura State FL Zip Code 33180-2672
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Master Coach
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 100.00

Date of Receipt 03 / 19 / 2016
Transaction ID : VNW3HE96RV7
Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5120.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 51
	<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 (Last, First, Middle Initial)
A. Betty Orlandino

Mailing Address 3332 NE 190th St
Uph 15

City Aventura State FL Zip Code 33180-2672

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

Name of Employer Self Occupation Master Coach

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
03 / 22 / 2016
Transaction ID : VNW3HE98MF1

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Mario Palumbo

Mailing Address 1995 Broadway
FI 3

City New York State NY Zip Code 10023-5882

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

Name of Employer Millennium Partners Occupation real estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
02 / 26 / 2016
Transaction ID : VNW3HE7F8N5

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Esther Paster

Mailing Address 33 Flying Point Rd
Ste 204

City Southampton State NY Zip Code 11968-5276

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

Name of Employer Peconic Bay Realty Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 22 / 2016
Transaction ID : VNW3HE98JY6

Amount of Each Receipt this Period
250.00

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 11 OF 51
	<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 (Last, First, Middle Initial)
A. Michelle Peak

Mailing Address **6939 WILDERNESS WAY DRIVE**
MD 5675

City **Grand Prairie** State **TX** Zip Code **75054**

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

Name of Employer **American** Occupation **attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt
03 / 08 / 2016

Transaction ID : VNW3HE8HPY2

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Nancy Proffitt

Mailing Address **326 Maddock St**

City **West Palm Beach** State **FL** Zip Code **33405-4626**

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

Name of Employer **Proffitt Management Solution** Occupation **Executive Business Coach**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
03 / 22 / 2016

Transaction ID : VNW3HE98N39

Amount of Each Receipt this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Suzanne Rice

Mailing Address **5310 N Ocean Dr**
801

City **Riviera Beach** State **FL** Zip Code **33404-2567**

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

Name of Employer **na** Occupation **na**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
03 / 28 / 2016

Transaction ID : VNW3HE9KS19

Amount of Each Receipt this Period
500.00

Memo Item

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 12 OF 51
<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 (Last, First, Middle Initial) A. Laura Ricketts		Date of Receipt 03 / 31 / 2016 Transaction ID : VNW3HE9VXX8
Mailing Address 430 Sheridan Rd		Amount of Each Receipt this Period 2700.00
City Wilmette	State IL	Zip Code 60091-2821
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Self Employed	Occupation Businesswoman	Earmarked for TAMMY FOR ILLINOIS
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Alix L Ritchie		Date of Receipt 03 / 22 / 2016 Transaction ID : VNW3HE9FQ54
Mailing Address PO Box 30220		Amount of Each Receipt this Period 5000.00
City Fort Lauderdale	State FL	Zip Code 33303-0220
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Fort Lauderdale	Occupation media consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Hilary Rosen		Date of Receipt 01 / 12 / 2016 Transaction ID : VNW3HE4ZH49
Mailing Address 4835 Hutchins PI NW		Amount of Each Receipt this Period 10000.00
City Washington	State DC	Zip Code 20007-1529
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer SKDKnickerbocker	Occupation Public Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional).....▶	17700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 51
	<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 (Last, First, Middle Initial) A. Hilary Rosen		Date of Receipt MM / DD / YYYY 03 / 10 / 2016
Mailing Address 4835 Hutchins PI NW		Transaction ID : VNW3HE8RBS6
City Washington	State DC	Zip Code 20007-1529
FEC ID number of contributing federal political committee.	C	
Name of Employer SKDKnickerbocker	Occupation Public Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10400.00	
		Amount of Each Receipt this Period 400.00
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Hilary Rosen		Date of Receipt MM / DD / YYYY 03 / 22 / 2016
Mailing Address 4835 Hutchins PI NW		Transaction ID : VNW3HE98N47
City Washington	State DC	Zip Code 20007-1529
FEC ID number of contributing federal political committee.	C	
Name of Employer SKDKnickerbocker	Occupation Public Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10900.00	
		Amount of Each Receipt this Period 500.00
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Urvashi Vaid		Date of Receipt MM / DD / YYYY 02 / 11 / 2016
Mailing Address 230 W End Ave Apt 10C		Transaction ID : VNW3HE6RX28
City New York	State NY	Zip Code 10023-3664
FEC ID number of contributing federal political committee.	C	
Name of Employer Self-employed	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
		Amount of Each Receipt this Period 750.00
		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1650.00
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 51
	<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. Urvashi Vaid
Full Name (Last, First, Middle Initial)
Mailing Address 230 W End Ave
Apt 10C
City New York State NY Zip Code 10023-3664
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1500.00

Date of Receipt 03 / 11 / 2016
Transaction ID : VNW3HE8RGJ1
Amount of Each Receipt this Period 750.00
 Memo Item

B. Urvashi Vaid
Full Name (Last, First, Middle Initial)
Mailing Address 230 W End Ave
Apt 10C
City New York State NY Zip Code 10023-3664
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Consultant
Receipt For: 2016 Primary General Other (specify) Aggregate Year-to-Date 1500.00

Date of Receipt 03 / 31 / 2016
Transaction ID : VNW3HE9W2B6
Amount of Each Receipt this Period 500.00
 Memo Item
Earmarked for TAMMY FOR ILLINOIS

C. Charlotte Walker
Full Name (Last, First, Middle Initial)
Mailing Address 173 Putnam Park
City Greenwich State CT Zip Code 06830-5782
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1500.00

Date of Receipt 03 / 29 / 2016
Transaction ID : VNW3HE9N4B8
Amount of Each Receipt this Period 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 2750.00
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 15 OF 51
(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. Leonie Walker
Full Name (Last, First, Middle Initial)
Mailing Address 40 Buckeye
City Portola Valley State CA Zip Code 94028-8015
FEC ID number of contributing federal political committee. **C**
Name of Employer small business owner Occupation Self Employed
Receipt For: 2016
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2016
Transaction ID : VNW3HE9VXN5
Amount of Each Receipt this Period
50.00
 Memo Item
Earmarked for TAMMY FOR ILLINOIS

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

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 Memo Item

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

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	75420.16

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 51
<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. LOIS FRANKEL FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 812421
 City Boca Raton State FL Zip Code 33481-2421
 FEC ID number of contributing federal political committee. **C** C00494856
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016
Transaction ID : VNW3HE8X5M3
 Amount of Each Receipt this Period
 1075.00
 Memo Item

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	1075.00

**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 17 OF 51
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Susan Allee		Date of Receipt
Mailing Address 200 W 108th St		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City	State	Zip Code
New York	NY	10025-2951
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : VNW3HEA3BJ6
Self	Attorney	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	<input type="text" value="500.00"/>
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Eileen Diamond		Date of Receipt
Mailing Address 5795 SW 50th Ter		<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2016"/>
City	State	Zip Code
Miami	FL	33155-6311
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : VNW3HE9B438
Information Requested	Information Requested	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Virginia Emes		Date of Receipt
Mailing Address 1441 Q St NW		<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2016"/>
City	State	Zip Code
Washington	DC	20009-3807
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : VNW3HE837K4
Virginia Emes	Landlord/Property Manager	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2000.00"/>	<input type="text" value="2000.00"/>
		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2750.00"/>
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 18 OF 51
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Diane Felicio		Date of Receipt MM / DD / YYYY 02 / 24 / 2016 Transaction ID : VNW3HE7C057
Mailing Address 39 Westchester Rd Address Line 2		Amount of Each Receipt this Period 400.00
City Jamaica Plain	State MA	Zip Code 02130-3451
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Community Catalyst	Occupation Fundraiser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Pamela J Layng		Date of Receipt MM / DD / YYYY 03 / 22 / 2016 Transaction ID : VNW3HE9B462
Mailing Address 248 Cortez Rd		Amount of Each Receipt this Period 400.00
City West Palm Beach	State FL	Zip Code 33405-4106
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Girl Scouts of Southwest FL	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Judy Mencher		Date of Receipt MM / DD / YYYY 03 / 22 / 2016 Transaction ID : VNW3HE9B454
Mailing Address 2900 Bent Cypress Rd		Amount of Each Receipt this Period 500.00
City Wellington	State FL	Zip Code 33414-7029
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Information Requested	Occupation Information Requested	
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).....▶	1300.00
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 51
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Joyce Newstat		Date of Receipt MM / DD / YYYY 03 / 11 / 2016 Transaction ID : VNW3HE8SHA9
Mailing Address 1200 California St # 27		Amount of Each Receipt this Period 20000.00
City San Francisco	State CA	Zip Code 94109-0001
FEC ID number of contributing federal political committee. C	Name of Employer Rocket Science Associates	Occupation Policy consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

Full Name (Last, First, Middle Initial) B. Joyce Newstat		Date of Receipt MM / DD / YYYY 03 / 22 / 2016 Transaction ID : VNW3HE9B4V7
Mailing Address 1200 California St # 27		Amount of Each Receipt this Period 400.00
City San Francisco	State CA	Zip Code 94109-0001
FEC ID number of contributing federal political committee. C	Name of Employer Rocket Science Associates	Occupation Policy consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20400.00	

Full Name (Last, First, Middle Initial) C. Palm Beach County Human Rights Council		Date of Receipt MM / DD / YYYY 03 / 22 / 2016 Transaction ID : VNW3HE9B4F3
Mailing Address PO Box 267		Amount of Each Receipt this Period 500.00
City West Palm Beach	State FL	Zip Code 33402-0267
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
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).....▶	20900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 51
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Laura Ricketts		Date of Receipt MM / DD / YYYY 02 / 24 / 2016 Transaction ID : VNW3HE7C065
Mailing Address 1615 W Rosehill Dr		Amount of Each Receipt this Period 50000.00
City Chicago	State IL	Zip Code 60660-4017
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation 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 ▼ 50000.00	

Full Name (Last, First, Middle Initial) B. Alix L Ritchie		Date of Receipt MM / DD / YYYY 02 / 24 / 2016 Transaction ID : VNW3HE7C049
Mailing Address PO Box 30220		Amount of Each Receipt this Period 25000.00
City Fort Lauderdale	State FL	Zip Code 33303-0220
FEC ID number of contributing federal political committee. C		
Name of Employer Fort Lauderdale	Occupation media 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 ▼ 25000.00	

Full Name (Last, First, Middle Initial) C. Alix L Ritchie		Date of Receipt MM / DD / YYYY 03 / 22 / 2016 Transaction ID : VNW3HE9B4X3
Mailing Address PO Box 30220		Amount of Each Receipt this Period 20000.00
City Fort Lauderdale	State FL	Zip Code 33303-0220
FEC ID number of contributing federal political committee. C		
Name of Employer Fort Lauderdale	Occupation media 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 ▼ 45000.00	

SUBTOTAL of Receipts This Page (optional).....▶	95000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 51
<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. Sandy Rosploch
Full Name (Last, First, Middle Initial)

Mailing Address 2199 Canal Rd

City State Zip Code
Palm Beach Gardens FL 33410-3404

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 22 / 2016
Transaction ID : VNW3HE9B446

Amount of Each Receipt this Period
250.00

Memo Item

B. Edward Schmidt
Full Name (Last, First, Middle Initial)

Mailing Address 204 Wenonah Pl

City State Zip Code
West Palm Beach FL 33405-1948

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

Name of Employer Occupation
Table 26 Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 22 / 2016
Transaction ID : VNW3HE9B4H8

Amount of Each Receipt this Period
1000.00

Memo Item

C. Jon Stryker
Full Name (Last, First, Middle Initial)

Mailing Address 450 W 14th St
Fl 9

City State Zip Code
New York NY 10014-1059

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

Name of Employer Occupation
Streamline Circle LLC Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
02 / 12 / 2016
Transaction ID : VNW3HE84G01

Amount of Each Receipt this Period
10000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	11250.00
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 51
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
	<input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)
A. Joy Tomchin

Mailing Address 252 7th Ave
Apt 15D

City New York State NY Zip Code 10001-7348

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

Name of Employer Self Occupation Real Estate Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : VNW3HEA3BH8

Amount of Each Receipt this Period
25000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Urvashi Vaid

Mailing Address 230 W End Ave
Apt 10C

City New York State NY Zip Code 10023-3664

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

Name of Employer The Vaid Group LLC Occupation Attorney/Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2016

Transaction ID : VNW3HE9B4T0

Amount of Each Receipt this Period
400.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	25400.00
TOTAL This Period (last page this line number only).....▶	156600.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Elizabeth Shipp

Full Name (Last, First, Middle Initial)

Mailing Address 1607 26th St S
Apt 2

City Arlington State VA Zip Code 22206-2966

Purpose of Disbursement
Travel Reimbursement, unitemized

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
03 / 18 / 2016

Transaction ID : VNV499SV1E7

Amount of Each Disbursement this Period
200.08

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	200.08
TOTAL This Period (last page this line number only).....▶	200.08

**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"/> 24	<input type="checkbox"/> 25	<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. DONNA EDWARDS FOR CONGRESS

Mailing Address PO Box 441153

City State Zip Code
Fort Washington MD 20749-1153

Purpose of Disbursement
Contribution

Candidate Name
DONNA EDWARDS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MD District: 04

Date of Disbursement

/ /

Transaction ID : VNV499STHS9

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address PO Box 59348

City State Zip Code
Schaumburg IL 60159-0348

Purpose of Disbursement
Contribution

Candidate Name
L TAMMY DUCKWORTH

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: IL District: 00

Date of Disbursement

/ /

Transaction ID : VNV499STM24

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address PO Box 59348

City State Zip Code
Schaumburg IL 60159-0348

Purpose of Disbursement
Conduit Contribution

Candidate Name
L TAMMY DUCKWORTH

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: IL District: 00

Date of Disbursement

/ /

Transaction ID : VNV3HE9VWR6C

Amount of Each Disbursement this Period

Memo Item
Earmarked by Patrick Lannon

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. TAMMY FOR ILLINOIS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address PO Box 59348		Transaction ID : VNW3HE9VXN5C
City Schaumburg	State IL	
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 50.00
Candidate Name L TAMMY DUCKWORTH		<input type="checkbox"/> Memo Item Earmarked by Leonie Walker
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 00	

Full Name (Last, First, Middle Initial) B. TAMMY FOR ILLINOIS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address PO Box 59348		Transaction ID : VNW3HE9VXX8C
City Schaumburg	State IL	
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 2700.00
Candidate Name L TAMMY DUCKWORTH		<input type="checkbox"/> Memo Item Earmarked by Laura Ricketts
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 00	

Full Name (Last, First, Middle Initial) C. TAMMY FOR ILLINOIS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address PO Box 59348		Transaction ID : VNW3HE9W2B6C
City Schaumburg	State IL	
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 500.00
Candidate Name L TAMMY DUCKWORTH		<input type="checkbox"/> Memo Item Earmarked by Urvashi Vaid
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 00	

SUBTOTAL of Disbursements This Page (optional).....▶	3250.00
TOTAL This Period (last page this line number only).....▶	13270.16

**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"/> 24	<input type="checkbox"/> 25	<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. Amtrak

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STGS6

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STGT4

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STGV2

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Angel's Food Market

Mailing Address 4681 Mountain Rd

City Pasadena State MD Zip Code 21122-5462

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499SN601

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Aureole Restaurant

Mailing Address 135 W 42nd St

City New York State NY Zip Code 10036-6509

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016 Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STMB5

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. BuySellAds.com

Mailing Address PO Box 55071
30027

City Boston State MA Zip Code 02205-5071

Purpose of Disbursement
Print ads

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STH43

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Carefirst Bluecross/Blueshield		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 840 1st St NE		Transaction ID : VNV499SN643
City Washington State DC Zip Code 20065-0003	Amount of Each Disbursement this Period 777.43	
Purpose of Disbursement Health Insurance	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) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Carefirst Bluecross/Blueshield		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 840 1st St NE		Transaction ID : VNV499STH51
City Washington State DC Zip Code 20065-0003	Amount of Each Disbursement this Period 777.43	
Purpose of Disbursement Health Insurance	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) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. Carefirst Bluecross/Blueshield		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 840 1st St NE		Transaction ID : VNV499STH69
City Washington State DC Zip Code 20065-0003	Amount of Each Disbursement this Period 777.43	
Purpose of Disbursement Health Insurance	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) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	2332.29
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"/> 24	<input type="checkbox"/> 25	<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. Carr Workplace

Mailing Address 1101 Connecticut Ave NW
Ste 450

City Washington State DC Zip Code 20036-4359

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499SN684

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Carr Workplace

Mailing Address 1101 Connecticut Ave NW
Ste 450

City Washington State DC Zip Code 20036-4359

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STH77

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Carr Workplace

Mailing Address 1101 Connecticut Ave NW
Ste 450

City Washington State DC Zip Code 20036-4359

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STH85

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Carr Workplace

Mailing Address 1101 Connecticut Ave NW
Ste 450

City Washington State DC Zip Code 20036-4359

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STH93

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Civitas Public Affairs

Mailing Address 601 13th St NW

City Washington State DC Zip Code 20005-3805

Purpose of Disbursement
Strategic Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499SN692

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Collective Conscience, LLC

Mailing Address 7254 Hollywood Blvd
Apt 1

City Los Angeles State CA Zip Code 90046-3117

Purpose of Disbursement
Communication Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499SN6A0

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Collective Conscience, LLC

Mailing Address 7254 Hollywood Blvd
Apt 1

City Los Angeles State CA Zip Code 90046-3117

Purpose of Disbursement
Communication Consulting Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 23 / 2016

Transaction ID : VNV499STHD4

Amount of Each Disbursement this Period

6584.19

Memo Item

Full Name (Last, First, Middle Initial)

B. Collective Conscience, LLC

Mailing Address 7254 Hollywood Blvd
Apt 1

City Los Angeles State CA Zip Code 90046-3117

Purpose of Disbursement
Communication Consulting Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : VNV499STHG8

Amount of Each Disbursement this Period

8674.97

Memo Item

Full Name (Last, First, Middle Initial)

C. DC Department of Employment Services

Mailing Address 4058 Minnesota Ave NE

City Washington State DC Zip Code 20019-3540

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 05 / 2016

Transaction ID : VNV499SN6B8

Amount of Each Disbursement this Period

472.75

Memo Item

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

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

15731.91

**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"/> 24	<input type="checkbox"/> 25	<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. First Data - Merchant Services		Date of Disbursement M M / D D / Y Y Y Y Y Y 01 / 04 / 2016	
Mailing Address 1 Western Maryland Pkwy		Transaction ID : VNV499SN6D4	
City Hagerstown State MD Zip Code 21740-5146	Amount of Each Disbursement this Period 2383.38		
Purpose of Disbursement Credit card processing for PAC	Category/Type		
Candidate Name	<input type="checkbox"/> Memo Item		
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. First Data - Merchant Services		Date of Disbursement M M / D D / Y Y Y Y Y Y 02 / 01 / 2016	
Mailing Address 1 Western Maryland Pkwy		Transaction ID : VNV499STHT7	
City Hagerstown State MD Zip Code 21740-5146	Amount of Each Disbursement this Period 628.26		
Purpose of Disbursement Credit card processing for PAC	Category/Type		
Candidate Name	<input type="checkbox"/> Memo Item		
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. First Data - Merchant Services		Date of Disbursement M M / D D / Y Y Y Y Y Y 03 / 02 / 2016	
Mailing Address 1 Western Maryland Pkwy		Transaction ID : VNV499STHV5	
City Hagerstown State MD Zip Code 21740-5146	Amount of Each Disbursement this Period 183.29		
Purpose of Disbursement Credit card processing for PAC	Category/Type		
Candidate Name	<input type="checkbox"/> Memo Item		
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)..... ▶		3194.93	
TOTAL This Period (last page this line number only)..... ▶		[Empty Box]	

**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"/> 24	<input type="checkbox"/> 25	<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. Jaime M Grant

Mailing Address 623 Rock Creek Rd NW

City Washington State DC Zip Code 20010

Purpose of Disbursement
Consulting: Fundraising services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STJ46

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Jaime M Grant

Mailing Address 623 Rock Creek Rd NW

City Washington State DC Zip Code 20010

Purpose of Disbursement
Consulting: Fundraising services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STJ54

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Harmon, Curran, Spielberg & Eisenberg, LLC

Mailing Address 1726 M St NW
Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499SN6J3

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)

A. Harmon, Curran, Spielberg & Eisenberg, LLC

Mailing Address 1726 M St NW
Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STHZ7

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Harmon, Curran, Spielberg & Eisenberg, LLC

Mailing Address 1726 M St NW
Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STJ05

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Harmon, Curran, Spielberg & Eisenberg, LLC

Mailing Address 1726 M St NW
Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STJ12

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Kaiser HPS

Mailing Address 1615 L St NW

City Washington State DC Zip Code 20036-5610

Purpose of Disbursement
Health Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2016

Transaction ID : VNV499STJ96

Amount of Each Disbursement this Period

209.66

Memo Item

Full Name (Last, First, Middle Initial)

B. Michele Karlsberg

Mailing Address 101 Lexington Ave

City Staten Island State NY Zip Code 10302-2025

Purpose of Disbursement
Communication Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2016

Transaction ID : VNV499STJY0

Amount of Each Disbursement this Period

6000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Kate Kight

Mailing Address 1629 L St NE
Unit 303

City Washington State DC Zip Code 20002-3055

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2016

Transaction ID : VNV499SN6R9

Amount of Each Disbursement this Period

1278.14

Memo Item

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

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

7487.80

**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"/> 24	<input type="checkbox"/> 25	<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. Kate Kight

Mailing Address 1629 L St NE
Unit 303

City Washington State DC Zip Code 20002-3055

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STJA4

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Kate Kight

Mailing Address 1629 L St NE
Unit 303

City Washington State DC Zip Code 20002-3055

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STJB1

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Kate Kight

Mailing Address 1629 L St NE
Unit 303

City Washington State DC Zip Code 20002-3055

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STJC9

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Kate Kight

Mailing Address 1629 L St NE
Unit 303

City Washington State DC Zip Code 20002-3055

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STJD7

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Lea Krauss for Judge Campaign

Mailing Address 3101 N Federal Hwy
Ste 401

City Fort Lauderdale State FL Zip Code 33306-1073

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STJX2

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Mindset

Mailing Address 1220 N Fillmore St
Ste 400

City Arlington State VA Zip Code 22201-6501

Purpose of Disbursement
Consulting: Fundraising Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499SN6S6

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Mindset

Mailing Address 1220 N Fillmore St
Ste 400

City Arlington State VA Zip Code 22201-6501

Purpose of Disbursement
Consulting: Fundraising Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STJZ7

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. NGP VAN

Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
Software

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STK55

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VAN

Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
Software

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STK63

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2016

Transaction ID : VNV499SN6W0

Amount of Each Disbursement this Period

199.45

Memo Item

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2016

Transaction ID : VNV499SN6X8

Amount of Each Disbursement this Period

2303.73

Memo Item

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2016

Transaction ID : VNV499SN6Y6

Amount of Each Disbursement this Period

2825.77

Memo Item

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

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

5328.95

**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"/> 24	<input type="checkbox"/> 25	<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

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499SN6Z4

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STKD8

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STKE6

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STKF4

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STKG2

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STKH0

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STKJ8

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STKK5

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STKN1

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. PCMS, LLC

Mailing Address 1050 17th St NW
Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499SN702

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PCMS, LLC

Mailing Address 1050 17th St NW
Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STKP9

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. PCMS, LLC

Mailing Address 1050 17th St NW
Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STKS3

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Practice Makes Progress		Date of Disbursement MM / DD / YYYY 01 / 05 / 2016
Mailing Address 1875 Connecticut Ave NW FI 10		Transaction ID : VNV499SN6Q1
City Washington	State DC	
Purpose of Disbursement Consulting: Communications services		Amount of Each Disbursement this Period 1725.00
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) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Practice Makes Progress		Date of Disbursement MM / DD / YYYY 02 / 02 / 2016
Mailing Address 1875 Connecticut Ave NW FI 10		Transaction ID : VNV499STJ62
City Washington	State DC	
Purpose of Disbursement Consulting: Communications services		Amount of Each Disbursement this Period 5000.00
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) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Practice Makes Progress		Date of Disbursement MM / DD / YYYY 02 / 23 / 2016
Mailing Address 1875 Connecticut Ave NW FI 10		Transaction ID : VNV499STJ70
City Washington	State DC	
Purpose of Disbursement Consulting: Communications services		Amount of Each Disbursement this Period 5000.00
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) ▼	
State: District:	Category/Type	

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

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

1725.00
5000.00
5000.00
11725.00

**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"/> 24	<input type="checkbox"/> 25	<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. Practice Makes Progress

Mailing Address 1875 Connecticut Ave NW
FI 10

City Washington State DC Zip Code 20009-5728

Purpose of Disbursement
Consulting: Communications services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : VNV499STJ88

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Seamless

Mailing Address 1065 Avenue Of The Americas

City New York State NY Zip Code 10018-1878

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : VNV499STKV9

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Seamless

Mailing Address 1065 Avenue Of The Americas

City New York State NY Zip Code 10018-1878

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : VNV499STKW7

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Elizabeth Shipp

Mailing Address 1607 26th St S
Apt 2

City Arlington State VA Zip Code 22206-2966

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499SN627

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Elizabeth Shipp

Mailing Address 1607 26th St S
Apt 2

City Arlington State VA Zip Code 22206-2966

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499SN635

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Elizabeth Shipp

Mailing Address 1607 26th St S
Apt 2

City Arlington State VA Zip Code 22206-2966

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STH02

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Elizabeth Shipp

Mailing Address 1607 26th St S
Apt 2

City Arlington State VA Zip Code 22206-2966

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : VNV499STH10

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Elizabeth Shipp

Mailing Address 1607 26th St S
Apt 2

City Arlington State VA Zip Code 22206-2966

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : VNV499STH28

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Elizabeth Shipp

Mailing Address 1607 26th St S
Apt 2

City Arlington State VA Zip Code 22206-2966

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : VNV499STH35

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. SkipJack

Mailing Address 8500 Governors Hill Dr

City State Zip Code
Symmes Twp OH 45249-1384

Purpose of Disbursement
Insurance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499SN710

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. SkipJack

Mailing Address 8500 Governors Hill Dr

City State Zip Code
Symmes Twp OH 45249-1384

Purpose of Disbursement
Insurance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STKY2

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. SkipJack

Mailing Address 8500 Governors Hill Dr

City State Zip Code
Symmes Twp OH 45249-1384

Purpose of Disbursement
Insurance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VNV499STKZ0

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Staples Inc.

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4478

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2016

Transaction ID : VNV499STM08

Amount of Each Disbursement this Period

125.96

Memo Item

Full Name (Last, First, Middle Initial)

B. Staples Inc.

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4478

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2016

Transaction ID : VNV499STM16

Amount of Each Disbursement this Period

240.81

Memo Item

Full Name (Last, First, Middle Initial)

C. The Kloppenburg for Justice Committee

Mailing Address PO Box 2483

City Madison State WI Zip Code 53701-2483

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016 Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2016

Transaction ID : VNV499STM58

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

1366.77

**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"/> 24	<input type="checkbox"/> 25	<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 Lesbian, Gay, Bisexual & Transgender Community Center

Mailing Address 208 W 13th St

City New York State NY Zip Code 10011-7702

Purpose of Disbursement
Site Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2016

Transaction ID : VNV499STM40

Amount of Each Disbursement this Period

360.00

Memo Item

Full Name (Last, First, Middle Initial)

B. The Seattle Lesbian

Mailing Address 15815 16th Ave SW

City Seattle State WA Zip Code 98166-2857

Purpose of Disbursement
Print ads

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2016

Transaction ID : VNV499STKX4

Amount of Each Disbursement this Period

540.00

Memo Item

Full Name (Last, First, Middle Initial)

C. W. Douglas Wingo Inc

Mailing Address 350 7th Ave
Rm 1603

City New York State NY Zip Code 10001-1934

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2016

Transaction ID : VNV499SNGJ3

Amount of Each Disbursement this Period

10000.00

Memo Item

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

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

10900.00

**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"/> 24	<input type="checkbox"/> 25	<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. W. Douglas Wingo Inc

Mailing Address 350 7th Ave
Rm 1603

City New York State NY Zip Code 10001-1934

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : VNV499STM81

Amount of Each Disbursement this Period

19000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Washington Blade

Mailing Address 529 14th St NW

City Washington State DC Zip Code 20045-1000

Purpose of Disbursement
Ad Buy

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : VNV499STM99

Amount of Each Disbursement this Period

700.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

19700.00

184453.78