

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) PO BOX 76940 Washington DC 20013 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00519413 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special. Election on 11/06/2018

5. Covering Period 10/18/2018 through 11/26/2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Robasciotti, Rachel, , , Type or Print Name of Treasurer

Signature of Treasurer Robasciotti, Rachel, , , [Electronically Filed] Date 12/06/2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2018"/> | | 85991.45 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 110087.30 | |
| (c) Total Receipts (from Line 19) | 113235.00 | 915911.93 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 223322.30 | 1001903.38 |
| 7. Total Disbursements (from Line 31)..... | 142190.63 | 920771.71 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 81131.67 | 81131.67 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

L PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 18 / 2018 To: M M / D D / Y Y Y Y 11 / 26 / 2018

| 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)..... | 51980.00 | 222403.00 |
| (ii) Unitemized | 4755.00 | 22512.50 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 56735.00 | 244915.50 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 5000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 56735.00 | 249915.50 |
| 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.)..... | 56500.00 | 665996.43 |
| 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)).....▶ | 113235.00 | 915911.93 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 113235.00 | 915911.93 |

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 | 24440.22 | 43231.71 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 24440.22 | 43231.71 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 20000.00 | 42500.00 |
| 24. Independent Expenditures (use Schedule E) | 11303.61 | 35053.61 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 3450.00 |
| (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 | 3450.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 86446.80 | 796536.39 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 142190.63 | 920771.71 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 142190.63 | 920771.71 |

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) | 56735.00 | 249915.50 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 3450.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 56735.00 | 246465.50 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 24440.22 | 43231.71 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 24440.22 | 43231.71 |

**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 60 |
| | <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 of Individual (Last, First, Middle Initial) or Full Organization Name A. Aberly, Naomi, , , | | Date of Receipt MM / DD / YYYY 10 / 21 / 2018 |
| Mailing Address 32 Derne St Apt 5A | | Transaction ID : VNW3HGF0665 |
| City Boston | State MA | Zip Code 02114-4212 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer (for Individual) None | Occupation (for Individual) Volunteer | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Allman, Kimberly, L, , | | Date of Receipt MM / DD / YYYY 10 / 23 / 2018 |
| Mailing Address 5214 Belvoir Dr | | Transaction ID : VNW3HGF2C3 |
| City Bethesda | State MD | Zip Code 20816-1951 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer (for Individual) Symantec | Occupation (for Individual) Director | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | | |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Anderson, Wendy, , , | | Date of Receipt MM / DD / YYYY 10 / 23 / 2018 |
| Mailing Address 3201 Esperanza Xing Apt 407 | | Transaction ID : VNW3HGFZ405 |
| City Austin | State TX | Zip Code 78758-7866 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 750.00 |
| Name of Employer (for Individual) SparkCognition | Occupation (for Individual) GM, Defense & National Security | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 750.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1750.00 |
| 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 60 |
| <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. Appelbaum, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7209 Willow Ave
 City Takoma Park State MD Zip Code 20912-4322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGFZ3W4
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Arboleda, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1406 Franklin St NE
 City Washington State DC Zip Code 20018-3744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Herbalife Nutrition Occupation (for Individual) Lobbyist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGF2G4
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Bilello, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 398 Hall Ct
 City South Orange State NJ Zip Code 07079-2322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regent Atlantic Occupation (for Individual) Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2018
Transaction ID : VNW3HGHKMN7
 Amount of Each Receipt this Period 500.00
 Memo Item

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

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 8 OF 60 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
L PAC

| | | |
|---|--------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Boyman, Kym, , , | | Date of Receipt |
| Mailing Address 1391 Robinson Rd | | <input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2018"/> |
| City Ferrisburgh | State VT | Zip Code 05456-9663 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : VNW3HGF07M8 |
| Name of Employer (for Individual) Vermont Gynecology | | Occupation (for Individual) Physician |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period <input type="text" value="50.00"/> |
| <input type="text" value="300.00"/> | | <input type="checkbox"/> Memo Item |

| | | |
|---|--------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Callahan, Sharon, , , | | Date of Receipt |
| Mailing Address 238 W 108Th St Apt 3 | | <input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2018"/> |
| City New York | State NY | Zip Code 10025-2997 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : VNW3HGJBX41 |
| Name of Employer (for Individual) Omnicom Group | | Occupation (for Individual) Chief Client Officer |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period <input type="text" value="500.00"/> |
| <input type="text" value="500.00"/> | | <input type="checkbox"/> Memo Item |

| | | |
|---|--------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Carter, Janet, , , | | Date of Receipt |
| Mailing Address 6514 E Halbert Rd | | <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2018"/> |
| City Bethesda | State MD | Zip Code 20817-5414 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : VNW3HGF2R6 |
| Name of Employer (for Individual) Reaction Retail | | Occupation (for Individual) President |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period <input type="text" value="500.00"/> |
| <input type="text" value="900.00"/> | | <input type="checkbox"/> Memo Item |

| | |
|---|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional)..... | <input type="text" value="1050.00"/> |
| 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 9 OF 60 |
| <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. Clarson, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 Main St
 FI 2
 City Northampton State MA Zip Code 01060-3583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NPS Occupation (for Individual) Librarian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018
Transaction ID : VNW3HGGR641
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Clarson, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 Main St
 FI 2
 City Northampton State MA Zip Code 01060-3583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NPS Occupation (for Individual) Librarian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2018
Transaction ID : VNW3HGJBX91
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Collins, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 Main St
 Ste 16
 City Northampton State MA Zip Code 01060-3131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Wealth Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2018
Transaction ID : VNW3HGJBXG6
 Amount of Each Receipt this Period
 500.00
 Memo Item

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

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 10 OF 60 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
L PAC

A. Cooper, Elizabeth, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 658 Union St
Apt 2

City Brooklyn State NY Zip Code 11215-1845

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 25 / 2018
Transaction ID : VNW3HGGN001

Amount of Each Receipt this Period 25.00

Memo Item

B. Cooper, Elizabeth, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 658 Union St
Apt 2

City Brooklyn State NY Zip Code 11215-1845

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 25 / 2018
Transaction ID : VNW3HGJVDB7

Amount of Each Receipt this Period 25.00

Memo Item

C. Correia, Linda, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 117 Hesketh St

City Chevy Chase State MD Zip Code 20815-4222

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

Name of Employer (for Individual) Correia & Puth Occupation (for Individual) Partner

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGFMS03

Amount of Each Receipt this Period 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

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 60 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
L PAC

| | | | |
|---|-------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Cronin, Patricia, , , | | | Date of Receipt MM / DD / YYYY 10 / 26 / 2018 |
| Mailing Address 244 Wyckoff St | | | Transaction ID : VNW3HGGN2B4 |
| City Brooklyn | State NY | Zip Code 11217-2229 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) Brooklyn College Of The City Universit | | Occupation (for Individual) Professor Of Art | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 250.00 | |

| | | | |
|---|-------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Delucchi, Christine, , , | | | Date of Receipt MM / DD / YYYY 10 / 23 / 2018 |
| Mailing Address 3 Bethesda Metro Ctr Ste 140 | | | Transaction ID : VNW3HGFM2P0 |
| City Bethesda | State MD | Zip Code 20814-6378 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) Streetsense | | Occupation (for Individual) Managing Principal | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1000.00 | |

| | | | |
|---|-------------|-------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Dixon, Karen, , , | | | Date of Receipt MM / DD / YYYY 11 / 21 / 2018 |
| Mailing Address 2414 Tracy Pl NW | | | Transaction ID : VNW3HGJSTM2 |
| City Washington | State DC | Zip Code 20008-1627 | Amount of Each Receipt this Period 5000.00 |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) Schiavi Seeds | | Occupation (for Individual) COO | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ 5000.00 | |

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

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 12 OF 60 |
| <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. Dufour, Philip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2215 49Th St NW
 City Washington State DC Zip Code 20007-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Du4 + Co Occupation (for Individual) President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGFM2B5
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Duran, Ingrid, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6601 Rannoch Rd
 City Bethesda State MD Zip Code 20817-5470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) D&P Creative Strategies Occupation (for Individual) Business Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 25 / 2018
Transaction ID : VNW3HGGN2W6
 Amount of Each Receipt this Period 1500.00
 Memo Item

C. Edwards, William, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 E Putnam Ave 3270
 City Greenwich State CT Zip Code 06830-5424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 26 / 2018
Transaction ID : VNW3HGJVDT6
 Amount of Each Receipt this Period 5000.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 6750.00 |
| 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 60 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
L PAC

A. Enloe, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3303 Water St NW
 5D
 City Washington State DC Zip Code 20007-3574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J.S. Held LLC Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 24 / 2018
Transaction ID : VNW3HGFKP42
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Felicio, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 Westchester Rd
 Westchester Road
 City Jamaica Plain State MA Zip Code 02130-3451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Community Catalyst Occupation (for Individual) Interim Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 27 / 2018
Transaction ID : VNW3HGGPHE7
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Field, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Central Park W
 City New York State NY Zip Code 10023-6006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Field Real Estate Holdings Occupation (for Individual) Real Estate Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 19 / 2018
Transaction ID : VNW3HGDWV4
 Amount of Each Receipt this Period 1000.00
 Memo Item

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

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

| | | | |
|---|-----|-----------------------------------|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 14 OF 60 |
| <input checked="" type="checkbox"/> | 11a | <input type="checkbox"/> | 11b |
| <input type="checkbox"/> | 13 | <input type="checkbox"/> | 14 |
| <input type="checkbox"/> | | <input type="checkbox"/> | 11c |
| <input type="checkbox"/> | | <input type="checkbox"/> | 12 |
| <input type="checkbox"/> | | <input type="checkbox"/> | 15 |
| <input type="checkbox"/> | | <input type="checkbox"/> | 16 |
| <input type="checkbox"/> | | <input type="checkbox"/> | 17 |

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NAME OF COMMITTEE (In Full)
L PAC

A. Ford, Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2130 W Lake Of The Isles Pkwy
 City Minneapolis State MN Zip Code 55405-2425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Land O'Lakes, Inc. Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2018
Transaction ID : VNW3HGF11R3
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Gattuso, Christina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3024 Tilden St NW Apt 502C
 City Washington State DC Zip Code 20008-3084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kilpatrick Townsend & Stockton LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGFZ439
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Gay, Faith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 5Th Ave Apt 3A
 City New York State NY Zip Code 10011-8843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Selendy & Gay Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGFZ3Y9
 Amount of Each Receipt this Period 2000.00
 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 15 OF 60 |
| | <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. Geller, Marian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Lincoln Ave
 City Northampton State MA Zip Code 01060-2331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Commonwealth Care Alliance Occupation (for Individual) Social Worker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2018
Transaction ID : VNW3HGGMKY8
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Geller, Marian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Lincoln Ave
 City Northampton State MA Zip Code 01060-2331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Commonwealth Care Alliance Occupation (for Individual) Social Worker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2018
Transaction ID : VNW3HGGR633
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Goldfrank, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1343 Wallach PI NW
 City Washington State DC Zip Code 20009-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Fannie Mae Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2018
Transaction ID : VNW3HGF03P5
 Amount of Each Receipt this Period 500.00
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 650.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 OF 60 |
| | <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. Hackett, Amanda, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 Aspen St NW
 City Washington State DC Zip Code 20012-2735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hire Counsel Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGFM2D1
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Holloway, Jane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 Decatur PI NW
 City Washington State DC Zip Code 20008-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGFZ463
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Holloway, Jane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 Decatur PI NW
 City Washington State DC Zip Code 20008-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 24 / 2018
Transaction ID : VNW3HGFQ014
 Amount of Each Receipt this Period 1000.00
 Memo Item

| | |
|--|---------|
| 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 17 OF 60 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
L PAC

A. Jones, Margaret, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3541 N Fremont St

| | | |
|-----------------|-------------|------------------------|
| City Chicago | State IL | Zip Code 60657-1706 |
|-----------------|-------------|------------------------|

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

| | |
|---|---|
| Name of Employer (for Individual) Hyatt Hotels & Resorts | Occupation (for Individual) Attorney |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | / | 29 | / | 2018 |

Transaction ID : VNW3HGGSWZ8

Amount of Each Receipt this Period
1000.00

Memo Item

B. Joyce, Ramona, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 E Uhler Ave

| | | |
|--------------------|-------------|------------------------|
| City Alexandria | State VA | Zip Code 22301-1427 |
|--------------------|-------------|------------------------|

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

| | |
|---|---|
| Name of Employer (for Individual) Federal Government | Occupation (for Individual) Chief Of Staff |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | / | 23 | / | 2018 |

Transaction ID : VNW3HGFZ4D8

Amount of Each Receipt this Period
500.00

Memo Item

C. Kunkel, Veronica, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2202 Decatur PI NW

| | | |
|--------------------|-------------|------------------------|
| City Washington | State DC | Zip Code 20008-4008 |
|--------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) Quest Diagnostics | Occupation (for Individual) Cytologist |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | / | 23 | / | 2018 |

Transaction ID : VNW3HGFZ488

Amount of Each Receipt this Period
200.00

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1700.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 OF 60 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
L PAC

A. Kunkel, Veronica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 Decatur PI NW
 City Washington State DC Zip Code 20008-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Quest Diagnostics Occupation (for Individual) Cytologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 24 / 2018
Transaction ID : VNW3HGFQ022
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Milbratz, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 723 Sheridan Rd
 City Wilmette State IL Zip Code 60091-1959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) E TRADE Occupation (for Individual) Principal Software Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 26 / 2018
Transaction ID : VNW3HGJVDV4
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Mondini, Elena J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1326 Laurel Ave
 City Ocean State NJ Zip Code 07712-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 11 / 04 / 2018
Transaction ID : VNW3HGH8CX6
 Amount of Each Receipt this Period 100.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2100.00 |
| 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 60 |
| <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. Murphy, Megan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4835 Hutchins PI NW
 City Washington State DC Zip Code 20007-1529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGFM2Y3
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Pino, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6601 Rannoch Rd
 City Bethesda State MD Zip Code 20817-5470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) D&P Creative Strategies Occupation (for Individual) Business Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 25 / 2018
Transaction ID : VNW3HGGN2V0
 Amount of Each Receipt this Period 1500.00
 Memo Item

C. Robasciotti, Rachel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 870 Market St Ste 1275
 City San Francisco State CA Zip Code 94102-2918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robasciotti & Philipson Occupation (for Individual) Principal/Wealth Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 10 / 28 / 2018
Transaction ID : VNW3HGGPX28
 Amount of Each Receipt this Period 200.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 6700.00 |
| 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 60 |
| <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. Rosenblum, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 Central Park W
 17H
 City New York State NY Zip Code 10023-4198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Altice USA Occupation (for Individual) Vice Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 15 / 2018
Transaction ID : VNW3HGJMYP5
 Amount of Each Receipt this Period 1500.00
 Memo Item

B. Sears, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 W 43Rd St
 Apt 28A
 City New York State NY Zip Code 10036-4355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Out Leadership LLC Occupation (for Individual) Consulting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4250.00

Date of Receipt 10 / 24 / 2018
Transaction ID : VNW3HGFM2Q8
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Sherman, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 W End Ave
 Apt 7AB
 City New York State NY Zip Code 10024-5724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Advertising Council Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGFZ496
 Amount of Each Receipt this Period 500.00
 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 21 OF 60 |
| | <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. Shore, Debra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9232 Avers Ave
 City Evanston State IL Zip Code 60203-1502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Metropolitan Water Reclamation District Occupation (for Individual) Commissioner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 19 / 2018
Transaction ID : VNW3HGDWYT9
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Shore, Debra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9232 Avers Ave
 City Evanston State IL Zip Code 60203-1502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Metropolitan Water Reclamation District Occupation (for Individual) Commissioner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 19 / 2018
Transaction ID : VNW3HGJRHJ8
 Amount of Each Receipt this Period 50.00
 Memo Item

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

Date of Receipt 11 / 16 / 2018
Transaction ID : VNW3HGJNBT5
 Amount of Each Receipt this Period 250.00
 Memo Item

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

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

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 OF 60 |
| | <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. Snider, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1504 13Th St NW
 City Washington State DC Zip Code 20005-3703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Occupation (for Individual) Insurance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2018
Transaction ID : VNW3HGGK360
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Stanton, Mary Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 New Jersey Ave NW
 City Washington State DC Zip Code 20001-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invariant Occupation (for Individual) Lobbyist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGFZ421
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Stanton, Mary Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 New Jersey Ave NW
 City Washington State DC Zip Code 20001-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Invariant Occupation (for Individual) Lobbyist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2018
Transaction ID : VNW3HGH0JY4
 Amount of Each Receipt this Period 500.00
 Memo Item

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

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 23 OF 60 |
| <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. Stark, Martha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 Union St
 Apt 2D
 City Brooklyn State NY Zip Code 11215-1619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) New York University Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 21 / 2018**
Transaction ID : VNW3HGF1MA2
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Stark, Martha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 Union St
 Apt 2D
 City Brooklyn State NY Zip Code 11215-1619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) New York University Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 21 / 2018**
Transaction ID : VNW3HGJTGR8
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Stubbs, Rennae, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33A Ellwood St
 City Glen Cove State NY Zip Code 11542-2430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Tv Host
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **11 / 26 / 2018**
Transaction ID : VNW3HGJVGE8
 Amount of Each Receipt this Period 2500.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2600.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 OF 60 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
L PAC

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Susman, Sally, , , | | Date of Receipt |
| Mailing Address 113 E 19Th St | | <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2018"/> |
| City New York | State NY | Zip Code 10003-2110 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : VNW3HGF3AM6 |
| Name of Employer (for Individual) Pfizer Incorporated | | Amount of Each Receipt this Period <input type="text" value="500.00"/> |
| Occupation (for Individual) EVP, Chief Corporate Affairs Officer | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="500.00"/> | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tilney, Augusta, , , | | Date of Receipt |
| Mailing Address 32 Vreeland Ct | | <input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2018"/> |
| City Princeton | State NJ | Zip Code 08540-6760 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : VNW3HGJB07 |
| Name of Employer (for Individual) Self Employed | | Amount of Each Receipt this Period <input type="text" value="500.00"/> |
| Occupation (for Individual) Psychiatrist | | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="500.00"/> | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Turner, Lisa, , , | | Date of Receipt |
| Mailing Address PO Box 5373 | | <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2018"/> |
| City Virginia Beach | State VA | Zip Code 23471-0373 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : VNW3HGFZ4C0 |
| Name of Employer (for Individual) Self Employed | | Amount of Each Receipt this Period <input type="text" value="500.00"/> |
| Occupation (for Individual) 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 ▼ <input type="text" value="500.00"/> | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1500.00"/> |
| 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 25 OF 60 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
L PAC

A. Vaid, Urvashi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 W End Ave
 10C
 City New York State NY Zip Code 10023-3661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Vaid Group Occupation (for Individual) Management Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt
 11 / 10 / 2018
Transaction ID : VNW3HGHQ2R3
 Amount of Each Receipt this Period
 3500.00
 Memo Item

B. Weiss, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 King St
 City Northampton State MA Zip Code 01060-3275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Susan A Weiss CPA Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt
 11 / 14 / 2018
Transaction ID : VNW3HGJBXF8
 Amount of Each Receipt this Period
 180.00
 Memo Item

C. Wilson, Ben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1990 Byers Dr
 City Menlo Park State CA Zip Code 94025-2662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 18 / 2018
Transaction ID : VNW3HGDF4M4
 Amount of Each Receipt this Period
 100.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 3780.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 OF 60 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
L PAC

A. Wilson, Ben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1990 Byers Dr
 City Menlo Park State CA Zip Code 94025-2662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 18 / 2018
Transaction ID : VNW3HGJPEMO
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Zavos, Michele, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1604 Newton St NE
 City Washington State DC Zip Code 20018-2318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGFZ447
 Amount of Each Receipt this Period 250.00
 Memo Item

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 350.00 |
| TOTAL This Period (last page this line number only)..... | 51980.00 |

**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 27 OF 60 |
| <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. Dixon, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2414 Tracy PI NW
 City Washington State DC Zip Code 20008-1627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Schiavi Seeds Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 45000.00

Date of Receipt 11 / 21 / 2018
Transaction ID : VNW3HGMBEQ3
 Amount of Each Receipt this Period 45000.00
 Memo Item
 Non-contribution account

B. Murphy, Megan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4835 Hutchins PI NW
 City Washington State DC Zip Code 20007-1529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 23 / 2018
Transaction ID : VNW3HGMBER1
 Amount of Each Receipt this Period 3000.00
 Memo Item
 Non-contribution account

C. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 030220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 95500.00

Date of Receipt 11 / 26 / 2018
Transaction ID : VNW3HGJVDW2
 Amount of Each Receipt this Period 6000.00
 Memo Item
 Non-contribution account

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 54000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 28 OF 60 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | | <input checked="" type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
L PAC

| | | | |
|---|--|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Robasciotti, Rachel, , , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2018 |
| Mailing Address 870 Market St Ste 1275 | | | Transaction ID : VNW3HGJKDR7 |
| City San Francisco | State CA | Zip Code 94102-2918 | Amount of Each Receipt this Period 2000.00 |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) Robasciotti & Philipson | | Occupation (for Individual) Principal/Wealth Advisor | <input type="checkbox"/> Non-contribution account |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2250.00 | | |

| | | | |
|---|--|--------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Slavin, Jeffrey, Z., , | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2018 |
| Mailing Address 5706 Warwick PI | | | Transaction ID : VNW3HGFMS11 |
| City Chevy Chase | State MD | Zip Code 20815-5502 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item |
| Name of Employer (for Individual) Town Of Somerset, MD | | Occupation (for Individual) Mayor | <input type="checkbox"/> Non-contribution account |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1500.00 | | |

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

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2500.00 |
| TOTAL This Period (last page this line number only).....▶ | 56500.00 |

**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"/> 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. Blue Parasol Group, LLC

Mailing Address 3901 Centerview Dr
Ste W

City Chantilly State VA Zip Code 20151-3229

Purpose of Disbursement
Contribution Processing Fees

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 02 / 2018

FEC Identification Number

C
Transaction ID : VNV499YRP7
Amount of Each Disbursement this Period
 23419.69

Memo Item

Full Name (Last, First, Middle Initial)
B. DC Government

Mailing Address 1207 Taylor St NW

City Washington State DC Zip Code 20011-5617

Purpose of Disbursement
Health Insurance

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 05 / 2018

FEC Identification Number

C
Transaction ID : VNV499YVCF
Amount of Each Disbursement this Period
 1020.53
portion of admin. expense allocable to contribution account

Memo Item

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

Mailing Address 1207 Taylor St NW

City Washington State DC Zip Code 20011-5617

Purpose of Disbursement
Health Insurance

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 16 / 2018

FEC Identification Number

C
Transaction ID : VNV499YVCI
Amount of Each Disbursement this Period
 771.43
* portion of admin. expense allocable to contribution account

Memo Item

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

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

24440.22

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

| | | | | | |
|--|-------------|------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) A. Fouracre, Matthew, , , | | | Date of Disbursement MM / DD / YYYY 10 / 31 / 2018 | | |
| Mailing Address 2523 13Th St NW Apt 207 | | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YV33 | | |
| City Washington | State DC | Zip Code 20009-5200 | Amount of Each Disbursement this Period [REDACTED] 205.88 | | |
| Purpose of Disbursement Salary | | Candidate Name | * Portion of admin. expense allocable to contribution account <input checked="" 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. Fouracre, Matthew, , , | | | Date of Disbursement MM / DD / YYYY 11 / 14 / 2018 | | |
| Mailing Address 2523 13Th St NW Apt 207 | | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YV34! | | |
| City Washington | State DC | Zip Code 20009-5200 | Amount of Each Disbursement this Period [REDACTED] 205.88 | | |
| Purpose of Disbursement Salary | | Candidate Name | * Portion of admin. expense allocable to contribution account <input checked="" 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. Paychex | | | Date of Disbursement MM / DD / YYYY 11 / 01 / 2018 | | |
| Mailing Address 911 Panorama Trl S | | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YV38 | | |
| City Rochester | State NY | Zip Code 14625-2396 | Amount of Each Disbursement this Period [REDACTED] 394.75 | | |
| Purpose of Disbursement Payroll Taxes | | Candidate Name | * Portion of admin. expense allocable to contribution account <input checked="" type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: | District: | | | | |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 0.00 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement
Payroll fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement
Payroll fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2018

FEC Identification Number

C

Transaction ID : VNV499YV39

Amount of Each Disbursement this Period

16.64

Memo Item * Portion of admin. expense allocable to contribution account

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2018

FEC Identification Number

C

Transaction ID : VNV499YV37I

Amount of Each Disbursement this Period

394.75

Memo Item * Portion of admin. expense allocable to contribution account

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2018

FEC Identification Number

C

Transaction ID : VNV499YV3I

Amount of Each Disbursement this Period

16.64

Memo Item * Portion of admin. expense allocable to contribution account

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: 10 / 31 / 2018

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : VNV499YV31

Amount of Each Disbursement this Period: 582.14

Memo Item * Portion of admin. expense allocable to contribution account

B. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: 11 / 14 / 2018

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : VNV499YV2Y

Amount of Each Disbursement this Period: 582.14

Memo Item * Portion of admin. expense allocable to contribution account

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement:

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶ 24440.22

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 25 | | 2018 |

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement
Campaign Contribution

| | |
|---|-----------|
| C | C00575209 |
|---|-----------|

Candidate Name
CRAIG, ANGELA DAWN, , ,

Category/
Type

Transaction ID : VNV499YRNI

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

| |
|---------|
| 4000.00 |
|---------|

State: MN District: 02

Memo Item

B. DONNA SHALALA FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 330602

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 25 | | 2018 |

City Miami State FL Zip Code 33233-0602

FEC Identification Number

Purpose of Disbursement
Campaign Contribution

| | |
|---|-----------|
| C | C00672311 |
|---|-----------|

Candidate Name
SHALALA, DONNA, , ,

Category/
Type

Transaction ID : VNV499YRPD

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

| |
|---------|
| 4000.00 |
|---------|

State: FL District: 27

Memo Item

C. Gina Ortiz Jones For Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 769186

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 25 | | 2018 |

City San Antonio State TX Zip Code 78245-9186

FEC Identification Number

Purpose of Disbursement
Campaign Contribution

| | |
|---|-----------|
| C | C00652297 |
|---|-----------|

Candidate Name
Ortiz Jones, Gina, , ,

Category/
Type

Transaction ID : VNV499YRPI

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

| |
|---------|
| 4000.00 |
|---------|

State: TX District: 23

Memo Item

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

| |
|----------|
| 12000.00 |
|----------|

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

| |
|--|
| |
|--|

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Lauren Baer For Congress | | Date of Disbursement MM / DD / YYYY 10 / 25 / 2018 |
| Mailing Address 6231 Pga Blvd | | FEC Identification Number C 006652594 Transaction ID : VNV499YRX8 Amount of Each Disbursement this Period 4000.00 |
| City West Palm Beach | State FL | Zip Code 33418-4033 |
| Purpose of Disbursement Campaign Contribution | | Category/ Type |
| Candidate Name Baer, Lauren, , , | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: FL | District: 18 | |
| <input type="checkbox"/> Memo Item | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. SHARICE FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 10 / 25 / 2018 |
| Mailing Address 13851 W 63Rd St NUM 303 | | FEC Identification Number C 00670034 Transaction ID : VNV499YRVZ Amount of Each Disbursement this Period 4000.00 |
| City Shawnee | State KS | Zip Code 66216-3800 |
| Purpose of Disbursement Campaign Contribution | | Category/ Type |
| Candidate Name DAVIDS, SHARICE, , , | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: KS | District: 03 | |
| <input type="checkbox"/> Memo Item | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement MM / DD / YYYY |
| Mailing Address | | FEC Identification Number C |
| City | State | Zip Code |
| Purpose of Disbursement | | Category/ Type |
| Candidate Name | | Amount of Each Disbursement this Period |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: | District: | |
| <input type="checkbox"/> Memo Item | | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 8000.00 |
| TOTAL This Period (last page this line number only).....▶ | 20000.00 |

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Amtrak | | Date of Disbursement MM / DD / YYYY 10 / 24 / 2018 |
| Mailing Address 201 I St NE | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRM Amount of Each Disbursement this Period [REDACTED] 6.00 non-contribution account <input type="checkbox"/> Memo Item |
| City Washington | State DC | Zip Code 20002-4449 |
| Purpose of Disbursement Food/Beverage | | Category/ Type [REDACTED] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Amtrak | | Date of Disbursement MM / DD / YYYY 11 / 01 / 2018 |
| Mailing Address 201 I St NE | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRN8 Amount of Each Disbursement this Period [REDACTED] 7.75 non-contribution account <input type="checkbox"/> Memo Item |
| City Washington | State DC | Zip Code 20002-4449 |
| Purpose of Disbursement Food/Beverage | | Category/ Type [REDACTED] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Amtrak | | Date of Disbursement MM / DD / YYYY 11 / 01 / 2018 |
| Mailing Address 201 I St NE | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRN Amount of Each Disbursement this Period [REDACTED] 3.50 non-contribution account <input type="checkbox"/> Memo Item |
| City Washington | State DC | Zip Code 20002-4449 |
| Purpose of Disbursement Food/Beverage | | Category/ Type [REDACTED] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|------------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 17.25 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Amtrak | | Date of Disbursement MM / DD / YYYY 11 / 02 / 2018 |
| Mailing Address 201 I St NE | | FEC Identification Number C Transaction ID : VNV499YRNC Amount of Each Disbursement this Period 78.00 non-contribution account <input type="checkbox"/> Memo Item |
| City Washington | State DC | |
| Zip Code 20002-4449 | Purpose of Disbursement Food/Beverage | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Amtrak | | Date of Disbursement MM / DD / YYYY 11 / 13 / 2018 |
| Mailing Address 201 I St NE | | FEC Identification Number C Transaction ID : VNV499YRNE Amount of Each Disbursement this Period 188.00 non-contribution account <input type="checkbox"/> Memo Item |
| City Washington | State DC | |
| Zip Code 20002-4449 | Purpose of Disbursement Train Travel | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. Amtrak | | Date of Disbursement MM / DD / YYYY 11 / 14 / 2018 |
| Mailing Address 201 I St NE | | FEC Identification Number C Transaction ID : VNV499YRNI Amount of Each Disbursement this Period 6.75 non-contribution account <input type="checkbox"/> Memo Item |
| City Washington | State DC | |
| Zip Code 20002-4449 | Purpose of Disbursement Food/Beverage | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 272.75 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

L PAC

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
Food/Beverage

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 1 | 5 | | 2 | 0 | 1 | 8 |

FEC Identification Number

C [REDACTED]

Transaction ID : VNV499YRNC

Amount of Each Disbursement this Period

[REDACTED] 11.00

non-contribution account

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
Train Travel

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 1 | 5 | | 2 | 0 | 1 | 8 |

FEC Identification Number

C [REDACTED]

Transaction ID : VNV499YRNH

Amount of Each Disbursement this Period

[REDACTED] 51.00

non-contribution account

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.Net

Mailing Address PO Box 8999

City
San Francisco

State
CA

Zip Code
94128-8999

Purpose of Disbursement
Contribution Processing Fees

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 0 | 2 | | 2 | 0 | 1 | 8 |

FEC Identification Number

C [REDACTED]

Transaction ID : VNV499YRNI

Amount of Each Disbursement this Period

[REDACTED] 40.00

non-contribution account

Memo Item

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

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

[REDACTED] 102.00

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

| | | | | | |
|---|--|------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) A. Bank Of America | | | Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 19 / 2018 | | |
| Mailing Address 700 13Th St NW | | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRNF Amount of Each Disbursement this Period [REDACTED] 10.00 non-contribution account <input type="checkbox"/> Memo Item | | |
| City Washington | State DC | Zip Code 20005-3950 | Category/Type [REDACTED] | | |
| Purpose of Disbursement Bank Fees | | Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | State: District: | | |
| Full Name (Last, First, Middle Initial) B. Bank Of America | | | Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 24 / 2018 | | |
| Mailing Address 700 13Th St NW | | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRNC Amount of Each Disbursement this Period [REDACTED] 10.00 non-contribution account <input type="checkbox"/> Memo Item | | |
| City Washington | State DC | Zip Code 20005-3950 | Category/Type [REDACTED] | | |
| Purpose of Disbursement Bank Fees | | Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | State: District: | | |
| Full Name (Last, First, Middle Initial) C. Bank Of America | | | Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 26 / 2018 | | |
| Mailing Address 700 13Th St NW | | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRY! Amount of Each Disbursement this Period [REDACTED] 1186.80 non-contribution account <input type="checkbox"/> Memo Item | | |
| City Washington | State DC | Zip Code 20005-3950 | Category/Type [REDACTED] | | |
| Purpose of Disbursement Bank Fees | | Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | State: District: | | |
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | | | [REDACTED] 1206.80 | | |
| TOTAL This Period (last page this line number only)..... ▶ | | | [REDACTED] | | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Bank Of America

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2018

FEC Identification Number: C

Transaction ID : VNV499YS16

Amount of Each Disbursement this Period: 5.93

Memo Item

B. Bank Of America

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2018

FEC Identification Number: C

Transaction ID : VNV499YRNY

Amount of Each Disbursement this Period: 5.00

Memo Item

C. Blue Parasol Group, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3901 Centerview Dr Ste W

City Chantilly State VA Zip Code 20151-3229

Purpose of Disbursement Contribution Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 02 / 2018

FEC Identification Number: C

Transaction ID : VNV499YRPF

Amount of Each Disbursement this Period: 42.81

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 53.74

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Christine Halquist For Governor

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 1328

| | | | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 11 | | | 02 | | | 2018 | | | | | |

City Morrisville State VT Zip Code 05661-1328

FEC Identification Number

Purpose of Disbursement Campaign Contribution

| |
|---|
| C |
|---|

Candidate Name

Transaction ID : VNV499YRZ1
Amount of Each Disbursement this Period

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

| |
|---------|
| 1000.00 |
|---------|

State: District:

Memo Item

B. CNA

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1 Meridian Blvd Ste 3A01

| | | | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 11 | | | 01 | | | 2018 | | | | | |

City Wyomissing State PA Zip Code 19610-3235

FEC Identification Number

Purpose of Disbursement Insurance

| |
|---|
| C |
|---|

Candidate Name

Transaction ID : VNV499YRP9
Amount of Each Disbursement this Period

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

| |
|--------|
| 268.65 |
|--------|

State: District:

Memo Item

C. DC Government

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1207 Taylor St NW

| | | | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 11 | | | 05 | | | 2018 | | | | | |

City Washington State DC Zip Code 20011-5617

FEC Identification Number

Purpose of Disbursement Health Insurance

| |
|---|
| C |
|---|

Candidate Name

Transaction ID : VNV499YRPI
Amount of Each Disbursement this Period

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

| |
|---------|
| 9277.58 |
|---------|

State: District:

Memo Item

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

| |
|----------|
| 10546.23 |
|----------|

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

| |
|--|
| |
|--|

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. DC Government

Full Name (Last, First, Middle Initial)

Mailing Address 1207 Taylor St NW

City Washington State DC Zip Code 20011-5617

Purpose of Disbursement Health Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 16 / 2018

FEC Identification Number: C

Transaction ID : VNV499YRPC

Amount of Each Disbursement this Period: 6429.56

Memo Item

B. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2018

FEC Identification Number: C

Transaction ID : VNV499YV3Q

Amount of Each Disbursement this Period: 750.00

Memo Item

C. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2018

FEC Identification Number: C

Transaction ID : VNV499YV5S

Amount of Each Disbursement this Period: 750.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7929.56

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 23 / 2018

FEC Identification Number: C

Transaction ID : VNV499YV3R

Amount of Each Disbursement this Period: 750.00

Memo Item

B. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 26 / 2018

FEC Identification Number: C

Transaction ID : VNV499YV3N

Amount of Each Disbursement this Period: 750.00

Memo Item

C. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 02 / 2018

FEC Identification Number: C

Transaction ID : VNV499YV3F

Amount of Each Disbursement this Period: 750.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2250.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

| | | | | | |
|---|--|------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) A. Facebook | | | Date of Disbursement M M / D D / Y Y Y Y Y 11 / 07 / 2018 | | |
| Mailing Address 1 Hacker Way | | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YV5X Amount of Each Disbursement this Period [REDACTED] 684.26 <input type="checkbox"/> non-contribution account <input type="checkbox"/> Memo Item | | |
| City Menlo Park | State CA | Zip Code 94025-1456 | Category/ Type | | |
| Purpose of Disbursement Online Advertising | | Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | State: District: | | |
| Full Name (Last, First, Middle Initial) B. Facebook | | | Date of Disbursement M M / D D / Y Y Y Y Y 11 / 09 / 2018 | | |
| Mailing Address 1 Hacker Way | | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YV3K Amount of Each Disbursement this Period [REDACTED] 589.18 <input type="checkbox"/> non-contribution account <input type="checkbox"/> Memo Item | | |
| City Menlo Park | State CA | Zip Code 94025-1456 | Category/ Type | | |
| Purpose of Disbursement Online Advertising | | Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | State: District: | | |
| Full Name (Last, First, Middle Initial) C. Facebook | | | Date of Disbursement M M / D D / Y Y Y Y Y 11 / 09 / 2018 | | |
| Mailing Address 1 Hacker Way | | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YV3M Amount of Each Disbursement this Period [REDACTED] 750.00 <input type="checkbox"/> non-contribution account <input type="checkbox"/> Memo Item | | |
| City Menlo Park | State CA | Zip Code 94025-1456 | Category/ Type | | |
| Purpose of Disbursement Online Advertising | | Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | State: District: | | |
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | | | [REDACTED] 2023.44 | | |
| TOTAL This Period (last page this line number only)..... ▶ | | | [REDACTED] | | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Fouracre, Matthew, , , | | Date of Disbursement MM / DD / YYYY 10 / 31 / 2018 |
| Mailing Address 2523 13Th St NW Apt 207 | | FEC Identification Number C Transaction ID : VNV499YRX Amount of Each Disbursement this Period 1871.66 non-contribution account <input type="checkbox"/> Memo Item |
| City Washington | State DC | |
| Purpose of Disbursement Salary | Zip Code 20009-5200 | Category/ Type |
| Candidate Name | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Fouracre, Matthew, , , | | Date of Disbursement MM / DD / YYYY 11 / 14 / 2018 |
| Mailing Address 2523 13Th St NW Apt 207 | | FEC Identification Number C Transaction ID : VNV499YRVN Amount of Each Disbursement this Period 1871.66 non-contribution account <input type="checkbox"/> Memo Item |
| City Washington | State DC | |
| Purpose of Disbursement Salary | Zip Code 20009-5200 | Category/ Type |
| Candidate Name | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Goldberg, Kira, , , | | Date of Disbursement MM / DD / YYYY 10 / 18 / 2018 |
| Mailing Address 345 W 145Th St Apt 3A6 | | FEC Identification Number C Transaction ID : VNV499YRX Amount of Each Disbursement this Period 5357.00 non-contribution account <input type="checkbox"/> Memo Item |
| City New York | State NY | |
| Purpose of Disbursement Communications Consulting | Zip Code 10031-5336 | Category/ Type |
| Candidate Name | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 9100.32 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

| | | | | |
|--|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Goldberg, Kira, , , | | | Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 19 / 2018 | |
| Mailing Address 345 W 145Th St Apt 3A6 | | | | |
| City New York | State NY | Zip Code 10031-5336 | | |
| Purpose of Disbursement Communications Consulting | | <input type="checkbox"/> Category/Type | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |
| Full Name (Last, First, Middle Initial) B. Google | | | Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 02 / 2018 | |
| Mailing Address 1600 Amphitheatre Pkwy | | | | |
| City Mountain View | State CA | Zip Code 94043-1351 | | |
| Purpose of Disbursement Email Hosting | | <input type="checkbox"/> Category/Type | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |
| Full Name (Last, First, Middle Initial) C. Google | | | Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 07 / 2018 | |
| Mailing Address 1600 Amphitheatre Pkwy | | | | |
| City Mountain View | State CA | Zip Code 94043-1351 | | |
| Purpose of Disbursement Email Hosting | | <input type="checkbox"/> Category/Type | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | | | 5082.00 | |
| TOTAL This Period (last page this line number only)..... ▶ | | | | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Grasshopper.Com | | Date of Disbursement MM / DD / YYYY 11 / 05 / 2018 |
| Mailing Address 197 1St Ave Ste 200 | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YS33 |
| City Needham | State MA | Zip Code 02494-2873 |
| Purpose of Disbursement Subscription | | Amount of Each Disbursement this Period [REDACTED] 33.06 |
| Candidate Name | | Category/Type [REDACTED] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Harmon, Curran, Spielberg & Eisenberg, LLC | | Date of Disbursement MM / DD / YYYY 10 / 31 / 2018 |
| Mailing Address 1726 M St NW Ste 600 | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRWI |
| City Washington | State DC | Zip Code 20036-4523 |
| Purpose of Disbursement Legal Fees | | Amount of Each Disbursement this Period [REDACTED] 102.60 |
| Candidate Name | | Category/Type [REDACTED] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Kate Brown Committee | | Date of Disbursement MM / DD / YYYY 10 / 24 / 2018 |
| Mailing Address PO Box 8069 | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRXI |
| City Portland | State OR | Zip Code 97207-8069 |
| Purpose of Disbursement Campaign Contribution | | Amount of Each Disbursement this Period [REDACTED] 2500.00 |
| Candidate Name | | Category/Type [REDACTED] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | |
|--|--------------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 2635.66 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

| | | | |
|---|--|---|-------------------|
| Full Name (Last, First, Middle Initial) A. Lupe Valdez For Governor | | Date of Disbursement MM / DD / YYYY 10 / 29 / 2018 | |
| Mailing Address PO Box 227501 | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRXC Amount of Each Disbursement this Period 2500.00 | |
| City Dallas | State TX | Zip Code 75222-7501 | Category/ Type |
| Purpose of Disbursement Campaign Contribution | | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial) B. NGP VAN, Inc. | | Date of Disbursement MM / DD / YYYY 11 / 02 / 2018 | |
| Mailing Address 1101 15Th St NW Ste 500 | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRXC Amount of Each Disbursement this Period 150.00 non-contribution account | |
| City Washington | State DC | Zip Code 20005-5006 | Category/ Type |
| Purpose of Disbursement Database Subscription | | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|---|-------------------|
| Full Name (Last, First, Middle Initial) C. Olive Street Design | | Date of Disbursement MM / DD / YYYY 11 / 05 / 2018 | |
| Mailing Address 264 E Kenilworth Ave | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRXC Amount of Each Disbursement this Period 25.00 non-contribution account | |
| City Villa Park | State IL | Zip Code 60181-5502 | Category/ Type |
| Purpose of Disbursement Website Hosting | | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | |
| 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).....▶ | 2675.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Olive Street Design | | Date of Disbursement MM / DD / YYYY 11 / 05 / 2018 |
| Mailing Address 264 E Kenilworth Ave | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRXS Amount of Each Disbursement this Period 25.00 non-contribution account <input type="checkbox"/> Memo Item |
| City Villa Park | State IL | Zip Code 60181-5502 |
| Purpose of Disbursement Website Hosting | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Paychex | | Date of Disbursement MM / DD / YYYY 11 / 01 / 2018 |
| Mailing Address 911 Panorama Trl S | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRVE Amount of Each Disbursement this Period 3588.66 non-contribution account <input type="checkbox"/> Memo Item |
| City Rochester | State NY | Zip Code 14625-2396 |
| Purpose of Disbursement Payroll Taxes | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Paychex | | Date of Disbursement MM / DD / YYYY 11 / 01 / 2018 |
| Mailing Address 911 Panorama Trl S | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRVV Amount of Each Disbursement this Period 151.29 non-contribution account <input type="checkbox"/> Memo Item |
| City Rochester | State NY | Zip Code 14625-2396 |
| Purpose of Disbursement Payroll fee | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 3764.95 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2018

FEC Identification Number: C

Transaction ID : VNV499YRVF

Amount of Each Disbursement this Period: 3588.66

Memo Item

B. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2018

FEC Identification Number: C

Transaction ID : VNV499YRVG

Amount of Each Disbursement this Period: 151.26

Memo Item

C. PowerThru

Full Name (Last, First, Middle Initial)

Mailing Address 3205 Lincoln St

City Columbia State SC Zip Code 29201-1205

Purpose of Disbursement Digital Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 26 / 2018

FEC Identification Number: C

Transaction ID : VNV499YRV!

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8739.92

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
L PAC

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Princeton Printing | | Date of Disbursement MM / DD / YYYY 10 / 31 / 2018 |
| Mailing Address 150 Nassau St | | FEC Identification Number C |
| City Princeton | State NJ | |
| Zip Code 08542-7006 | | Transaction ID : VNV499YRVV |
| Purpose of Disbursement Printing | | Amount of Each Disbursement this Period 237.45 |
| Candidate Name | | <input type="checkbox"/> non-contribution account |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Princeton Printing | | Date of Disbursement MM / DD / YYYY 10 / 31 / 2018 |
| Mailing Address 150 Nassau St | | FEC Identification Number C |
| City Princeton | State NJ | |
| Zip Code 08542-7006 | | Transaction ID : VNV499YRVX |
| Purpose of Disbursement Printing | | Amount of Each Disbursement this Period 168.20 |
| Candidate Name | | <input type="checkbox"/> non-contribution account |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Sandberg, Stephanie, , , | | Date of Disbursement MM / DD / YYYY 10 / 31 / 2018 |
| Mailing Address 32 Vreeland Ct | | FEC Identification Number C |
| City Princeton | State NJ | |
| Zip Code 08540-6760 | | Transaction ID : VNV499YRX1 |
| Purpose of Disbursement Salary | | Amount of Each Disbursement this Period 5292.20 |
| Candidate Name | | <input type="checkbox"/> non-contribution account |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 5697.85 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
L PAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Sandberg, Stephanie, , , | | Date of Disbursement MM / DD / YYYY 11 / 14 / 2018 |
| Mailing Address 32 Vreeland Ct | | FEC Identification Number C Transaction ID : VNV499YRV# Amount of Each Disbursement this Period 5292.20 non-contribution account <input type="checkbox"/> Memo Item |
| City Princeton | State NJ | |
| Zip Code 08540-6760 | Category/ Type | |
| Purpose of Disbursement Salary | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Stacey Abrams For Governor | | Date of Disbursement MM / DD / YYYY 10 / 29 / 2018 |
| Mailing Address 1270 Caroline St NE Ste D120-447 | | FEC Identification Number C Transaction ID : VNV499YRW# Amount of Each Disbursement this Period 3300.00 non-contribution account <input type="checkbox"/> Memo Item |
| City Atlanta | State GA | |
| Zip Code 30307-2758 | Category/ Type | |
| Purpose of Disbursement Campaign Contribution | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. The Turner Group | | Date of Disbursement MM / DD / YYYY 11 / 07 / 2018 |
| Mailing Address PO Box 5373 | | FEC Identification Number C Transaction ID : VNV499YRY# Amount of Each Disbursement this Period 12500.00 non-contribution account <input type="checkbox"/> Memo Item |
| City Virginia Beach | State VA | |
| Zip Code 23471-0373 | Category/ Type | |
| Purpose of Disbursement Political Consultant | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

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

21092.20

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. The Turner Group | | Date of Disbursement MM / DD / YYYY 11 / 13 / 2018 |
| Mailing Address PO Box 5373 | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRYC Amount of Each Disbursement this Period [REDACTED] 1730.49 non-contribution account <input type="checkbox"/> Memo Item |
| City Virginia Beach | State VA | Zip Code 23471-0373 |
| Purpose of Disbursement Political Consultant | | Category/ Type [REDACTED] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. The Wink Hotel | | Date of Disbursement MM / DD / YYYY 10 / 26 / 2018 |
| Mailing Address 1143 New Hampshire Ave NW | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRZM Amount of Each Disbursement this Period [REDACTED] 320.71 non-contribution account <input type="checkbox"/> Memo Item |
| City Washington | State DC | Zip Code 20037-1522 |
| Purpose of Disbursement Lodging | | Category/ Type [REDACTED] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. The Wink Hotel | | Date of Disbursement MM / DD / YYYY 10 / 26 / 2018 |
| Mailing Address 1143 New Hampshire Ave NW | | FEC Identification Number C [REDACTED] Transaction ID : VNV499YRZz Amount of Each Disbursement this Period [REDACTED] 8.87 non-contribution account <input type="checkbox"/> Memo Item |
| City Washington | State DC | Zip Code 20037-1522 |
| Purpose of Disbursement Food/Beverage | | Category/ Type [REDACTED] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|--------------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 2060.07 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. US Postal Service

Full Name (Last, First, Middle Initial)

Mailing Address 475 Lenfant Plz SW

City Washington State DC Zip Code 20260-0004

Purpose of Disbursement postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2018

FEC Identification Number: C

Transaction ID : VNV499YRYJ

Amount of Each Disbursement this Period: 8.52

Memo Item

B. US Postal Service

Full Name (Last, First, Middle Initial)

Mailing Address 475 Lenfant Plz SW

City Washington State DC Zip Code 20260-0004

Purpose of Disbursement postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 19 / 2018

FEC Identification Number: C

Transaction ID : VNV499YRYM

Amount of Each Disbursement this Period: 39.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 47.52

TOTAL This Period (last page this line number only)..... ▶ 85297.26

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) L PAC
FEC IDENTIFICATION NUMBER C C00519413

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Facebook non-contribution account
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025-1456
Purpose of Expenditure Online Advertising
Name of Federal Candidate: VUKMIR, LEAH, , ,
Calendar Year-To-Date Per Election for Office Sought 9949.29
Disbursement For: General 2018

Full Name of Payee Facebook non-contribution account
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025-1456
Purpose of Expenditure Online Advertising
Name of Federal Candidate: VUKMIR, LEAH, , ,
Calendar Year-To-Date Per Election for Office Sought 9949.29
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 3750.02
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robasciotti, Rachel, , ,

[Electronically Filed]

Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
L PAC
FEC IDENTIFICATION NUMBER
C C00519413

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Facebook non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park State: CA Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising
Category/Type:
Name of Federal Candidate: McSally, Martha, , ,
Support: [] Oppose: [x]
Office Sought: [] House [x] Senate District: 00 State: AZ
Calendar Year-To-Date Per Election for Office Sought: 5104.32
Disbursement For: [] Primary [x] General 2018 [] Other (specify)

Full Name of Payee: Facebook non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park State: CA Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising
Category/Type:
Name of Federal Candidate: VUKMIR, LEAH, , ,
Support: [] Oppose: [x]
Office Sought: [] House [x] Senate District: 00 State: WI
Calendar Year-To-Date Per Election for Office Sought: 9949.29
Disbursement For: [] Primary [x] General 2018 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robasciotti, Rachel, , ,

[Electronically Filed]

Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
L PAC
FEC IDENTIFICATION NUMBER
C C00519413

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Facebook
non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising
Category/Type:
Name of Federal Candidate: McSally, Martha, ,
Support: [], Oppose: [x]
Office Sought: [] House, [x] Senate, District: 00, State: AZ
Calendar Year-To-Date Per Election for Office Sought: 5104.32
Disbursement For: [] Primary, [x] General 2018, [] Other (specify)

Full Name of Payee: Facebook
non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising
Category/Type:
Name of Federal Candidate: VUKMIR, LEAH, ,
Support: [], Oppose: [x]
Office Sought: [] House, [x] Senate, District: 00, State: WI
Calendar Year-To-Date Per Election for Office Sought: 9949.29
Disbursement For: [] Primary, [x] General 2018, [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robasciotti, Rachel, ,

[Electronically Filed]

Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
L PAC
FEC IDENTIFICATION NUMBER
C C00519413

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Facebook, non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising
Category/Type:
Name of Federal Candidate: McSally, Martha, , ,
Support: [], Oppose: [x]
Office Sought: [] House, [x] Senate, District: 00, State: AZ
Calendar Year-To-Date Per Election for Office Sought: 5104.32
Disbursement For: [] Primary, [x] General 2018, [] Other (specify)

Full Name of Payee: Facebook, non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising
Category/Type:
Name of Federal Candidate: VUKMIR, LEAH, , ,
Support: [], Oppose: [x]
Office Sought: [] House, [x] Senate, District: 00, State: WI
Calendar Year-To-Date Per Election for Office Sought: 9949.29
Disbursement For: [] Primary, [x] General 2018, [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robasciotti, Rachel, , ,

[Electronically Filed]

Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
L PAC
FEC IDENTIFICATION NUMBER
C C00519413

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Facebook, non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising
Category/Type:
Name of Federal Candidate: McSally, Martha, , , Support: [], Oppose: [x]
Office Sought: [] House, [x] Senate, District: 00, State: AZ
Calendar Year-To-Date Per Election for Office Sought: 5104.32
Disbursement For: [] Primary, [x] General 2018, [] Other (specify)

Full Name of Payee: Facebook, non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising
Category/Type:
Name of Federal Candidate: McSally, Martha, , , Support: [], Oppose: [x]
Office Sought: [] House, [x] Senate, District: 00, State: AZ
Calendar Year-To-Date Per Election for Office Sought: 5104.32
Disbursement For: [] Primary, [x] General 2018, [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robasciotti, Rachel, , ,

[Electronically Filed]

Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
L PAC
FEC IDENTIFICATION NUMBER
C C00519413

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Facebook
non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising
Category/Type:
Name of Federal Candidate: McSally, Martha, ,
Support: [], Oppose: [x]
Office Sought: [] House, [x] Senate, District: 00, State: AZ
Calendar Year-To-Date Per Election for Office Sought: 5104.32
Disbursement For: [] Primary, [x] General 2018

Full Name of Payee: Facebook
non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising
Category/Type:
Name of Federal Candidate: McSally, Martha, ,
Support: [], Oppose: [x]
Office Sought: [] House, [x] Senate, District: 00, State: AZ
Calendar Year-To-Date Per Election for Office Sought: 5104.32
Disbursement For: [] Primary, [x] General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 1354.32
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robasciotti, Rachel, ,

[Electronically Filed]

Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
L PAC
FEC IDENTIFICATION NUMBER
C C00519413

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Facebook non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park State: CA Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising
Category/Type:
Name of Federal Candidate: VUKMIR, LEAH, ,
Support: Oppose
Office Sought: Senate State: WI
Calendar Year-To-Date Per Election for Office Sought: 9949.29
Disbursement For: General 2018

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type
Name of Federal Candidate
Support
Oppose
Office Sought
House
Senate
State
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: Primary General
Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures: 199.27
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures: 11303.61

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robasciotti, Rachel, ,

[Electronically Filed]

Date 12 / 06 / 2018

Signature