

# 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

Democrats United To Change and Hope PAC

ADDRESS (number and street) 499 S. Capitol St., SW

▼ Suite 422

Check if different than previously reported. (ACC) Washington DC 20003 -

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

C C00448001 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
- Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
- Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

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

(d) 30-Day POST-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

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

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2016 through M M / D D / Y Y Y Y Y Y 09 / 30 / 2016

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

Signature of Treasurer Angerholzer, Lindsay, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 11 / 2016

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

**Democrats United To Change and Hope PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="20157.93"/>	<input type="text" value="20157.93"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="39730.28"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="21838.20"/>	<input type="text" value="50538.20"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="61568.48"/>	<input type="text" value="70696.13"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15894.37"/>	<input type="text" value="25022.02"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="45674.11"/>	<input type="text" value="45674.11"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Democrats United To Change and Hope PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10000.00	21200.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10000.00	21200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	9500.00	27000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	19500.00	48200.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	2338.20	2338.20
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	21838.20	50538.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	21838.20	50538.20

**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 .....	6894.37	9022.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6894.37	9022.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	10000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	6000.00	6000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15894.37	25022.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15894.37	25022.02

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	19500.00	48200.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19500.00	48200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6894.37	9022.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2338.20	2338.20
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4556.17	6683.82

**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 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Democrats United To Change and Hope PAC**

**A. Townsend, Deborah, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1716 Greenspring Valley Road  
 City Stevenson State MD Zip Code 21153  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 26 / 2016  
**Transaction ID : C6736040**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Townsend, Dennis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11311 McCormick Road Suite 470  
 City Hunt Valley State MD Zip Code 21031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Townsend Capital LLC Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 26 / 2016  
**Transaction ID : C6736041**  
 Amount of Each Receipt this Period 5000.00  
 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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	10000.00

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

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NAME OF COMMITTEE (In Full)  
**Democrats United To Change and Hope PAC**

**A. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

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

Mailing Address 101 Constitution Avenue NW  
Suite 500 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2016

**Transaction ID : C6736055**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL A**

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

Mailing Address 1550 Crystal Drive  
Suite 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2016

**Transaction ID : C6736042**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

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

Mailing Address 1100 Wilson Boulevard  
Suite 1500

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2016

**Transaction ID : C6736043**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9500.00
<b>TOTAL</b> This Period (last page this line number only).....	9500.00

**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 8 OF 14
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democrats United To Change and Hope PAC**

**A. Hilton Ocean City Oceanfront Suites**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3200 Baltimore Avenue

City Ocean City	State MD	Zip Code 21842
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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 ▼  
2338.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

**Transaction ID : C6736056**

Amount of Each Receipt this Period  
584.55

Memo Item

**B. Hilton Ocean City Oceanfront Suites**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3200 Baltimore Avenue

City Ocean City	State MD	Zip Code 21842
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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 ▼  
2338.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

**Transaction ID : C6736057**

Amount of Each Receipt this Period  
584.55

Memo Item

**C. Hilton Ocean City Oceanfront Suites**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3200 Baltimore Avenue

City Ocean City	State MD	Zip Code 21842
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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 ▼  
2338.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

**Transaction ID : C6736058**

Amount of Each Receipt this Period  
584.55

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1753.65
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

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NAME OF COMMITTEE (In Full)  
**Democrats United To Change and Hope PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Hilton Ocean City Oceanfront Suites**

Mailing Address 3200 Baltimore Avenue

City Ocean City	State MD	Zip Code 21842
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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 ▼  
2338.20

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		31		2016

**Transaction ID : C6736059**

Amount of Each Receipt this Period  
584.55

Memo Item

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	584.55
<b>TOTAL</b> This Period (last page this line number only).....	2338.20

**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)

**Democrats United To Change and Hope PAC**

Full Name (Last, First, Middle Initial)

**A. Angerholzer Broz Consulting**

Mailing Address 499 S. Capitol St., SW  
Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Compliance Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 18 / 2016

FEC Identification Number

C [ ]

Transaction ID : D459710

Amount of Each Disbursement this Period

[ ] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Angerholzer Broz Consulting**

Mailing Address 499 S. Capitol St., SW  
Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Fundraising Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  Primary  General  Other (specify)

Date of Disbursement

MM / DD / YYYY  
07 / 18 / 2016

FEC Identification Number

C [ ]

Transaction ID : D459711

Amount of Each Disbursement this Period

[ ] 310.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hilton Ocean City Oceanfront Suites**

Mailing Address 3200 Baltimore Avenue

City Ocean City State MD Zip Code 21842

Purpose of Disbursement  
Travel Lodging Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

FEC Identification Number

C [ ]

Transaction ID : D459718

Amount of Each Disbursement this Period

[ ] 584.55

Memo Item

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

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

[ ] 1394.55

[ ]

**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)

**Democrats United To Change and Hope PAC**

Full Name (Last, First, Middle Initial)

**A. Hilton Ocean City Oceanfront Suites**

Mailing Address 3200 Baltimore Avenue

City Ocean City State MD Zip Code 21842

Purpose of Disbursement  
Travel Lodging Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

FEC Identification Number

C

Transaction ID : D459719

Amount of Each Disbursement this Period

584.55

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hilton Ocean City Oceanfront Suites**

Mailing Address 3200 Baltimore Avenue

City Ocean City State MD Zip Code 21842

Purpose of Disbursement  
Travel Lodging Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

FEC Identification Number

C

Transaction ID : D459720

Amount of Each Disbursement this Period

584.55

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hilton Ocean City Oceanfront Suites**

Mailing Address 3200 Baltimore Avenue

City Ocean City State MD Zip Code 21842

Purpose of Disbursement  
Travel Lodging Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

FEC Identification Number

C

Transaction ID : D459721

Amount of Each Disbursement this Period

584.55

Memo Item

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

1753.65

**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)

**Democrats United To Change and Hope PAC**

Full Name (Last, First, Middle Initial)

**A. Hilton Ocean City Oceanfront Suites**

Mailing Address 3200 Baltimore Avenue

City Ocean City State MD Zip Code 21842

Purpose of Disbursement  
Travel Lodging Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

FEC Identification Number

C

Transaction ID : D459722

Amount of Each Disbursement this Period

584.55

Memo Item

Full Name (Last, First, Middle Initial)

**B. NGP VAN**

Mailing Address 1101 15th Street, NW  
Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Database Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2016

FEC Identification Number

C

Transaction ID : D459712

Amount of Each Disbursement this Period

300.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Vineyard Vines**

Mailing Address 181 Harbor Dr

City Stamford State CT Zip Code 06902-7474

Purpose of Disbursement  
Gifts Given

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

FEC Identification Number

C

Transaction ID : D459713

Amount of Each Disbursement this Period

2861.62

Memo Item

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

3746.17

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

6894.37

**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)

**Democrats United To Change and Hope PAC**

Full Name (Last, First, Middle Initial)

**A. ANTHONY BROWN FOR CONGRESS**

Mailing Address 12138 CENTRAL AVE #671

City  
BOWIE

State  
MD

Zip Code  
20721

Purpose of Disbursement  
Political Contribution

Candidate Name

**BROWN, ANTHONY GREGORY, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MD District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

FEC Identification Number

**C** C00574640

**Transaction ID : D459715**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. JAMIE RASKIN FOR CONGRESS**

Mailing Address P.O. BOX 5418

City  
TAKOMA PARK

State  
MD

Zip Code  
20913

Purpose of Disbursement  
Political Contribution

Candidate Name

**RASKIN, JAMIE, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: MD District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

FEC Identification Number

**C** C00575126

**Transaction ID : D459716**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. LUANN BENNETT FOR CONGRESS**

Mailing Address PO BOX 446

City  
MCLEAN

State  
VA

Zip Code  
22101

Purpose of Disbursement  
Political Contribution

Candidate Name

**BENNETT, LUANN, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: VA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	6

FEC Identification Number

**C** C00595116

**Transaction ID : D459714**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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

3000.00

**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)

**Democrats United To Change and Hope PAC**

Full Name (Last, First, Middle Initial)

**A. Maryland Democratic Party**

Mailing Address 33 West Street

City  
Annapolis

State  
MD

Zip Code  
21401

Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2016

FEC Identification Number

C

**Transaction ID : D459717**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Takai Family Trust**

Mailing Address c/o Sami Takai  
PO Box 2267

City  
Pearl City

State  
HI

Zip Code  
96782

Purpose of Disbursement  
Charitable Donation

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2016

FEC Identification Number

C

**Transaction ID : D459709**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

6000.00

6000.00