

# 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

Robins Kaplan PAC

ADDRESS (number and street) 800 LaSalle Ave.

Suite 2800

Check if different than previously reported. (ACC) Minneapolis MN 55402

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

C C00275909

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

5. Covering Period M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2019 through M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2019

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

Signature of Treasurer Vaughn, Brandon, E., , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 01 / 28 / 2020

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Robins Kaplan 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="2019"/>	<input type="text" value=""/>	<input type="text" value="6089.93"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3589.93"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="15000.00"/>	<input type="text" value="15000.00"/>
(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="18589.93"/>	<input type="text" value="21089.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6000.00"/>	<input type="text" value="8500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="12589.93"/>	<input type="text" value="12589.93"/>
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

**Robins Kaplan 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).....	12852.88	12852.88
(ii) Unitemized .....	2147.12	2147.12
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	15000.00	15000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	15000.00	15000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	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)).....▶	15000.00	15000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	15000.00	15000.00

**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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	8500.00
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).....	0.00	0.00
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)) ..	6000.00	8500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6000.00	8500.00

**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) .....	15000.00	15000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15000.00	15000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 6 OF 19
<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

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)  
**Robins Kaplan PAC**

**A. Churan, Amy, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4478 Via Marina #902  
 City Marina Del Rey State CA Zip Code 90292  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 298.21

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15931**  
 Amount of Each Receipt this Period 298.21  
 Memo Item contribution

**B. Collyard, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12623 22nd Street No.  
 City West Lakeland Twsp State MN Zip Code 55082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 417.50

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15932**  
 Amount of Each Receipt this Period 417.50  
 Memo Item contribution

**C. Fahrenkrog, Aaron, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5625 Emerson Avenue South  
 City Minneapolis State MN Zip Code 55419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 238.57

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15934**  
 Amount of Each Receipt this Period 238.57  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	954.28
<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 7 OF 19
	<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)  
**Robins Kaplan PAC**

**A. Froio, Anthony A., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Valley Forge Drive  
 City Shrewsbury State MA Zip Code 01545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins, Kaplan, Miller & Ciresi LLP Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 417.50

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15937**  
 Amount of Each Receipt this Period 417.50  
 Memo Item contribution

**B. Gautier, Scott, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1201 8th Street  
 City Manhattan Beach State CA Zip Code 90266  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 298.21

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15938**  
 Amount of Each Receipt this Period 298.21  
 Memo Item contribution

**C. Geibelson, Michael, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2130 Kelton Avenue  
 City Los Angeles State CA Zip Code 90025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins, Kaplan, Miller & Cires Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 328.03

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15939**  
 Amount of Each Receipt this Period 328.03  
 Memo Item contribution

**SUBTOTAL** of Receipts This Page (optional).....▶ 1043.74  
**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 19
<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)  
**Robins Kaplan PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Gleason, Jeffrey, S., ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2019
Mailing Address 4526 Casco Avenue		<b>Transaction ID : SA11AI.15940</b>
City Edina	State MN	Zip Code 55424
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 372.76
Name of Employer (for Individual) Robins Kaplan LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 372.76	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Holdreith, Jacob M., , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2019
Mailing Address 2199 Saint Clair Avenue		<b>Transaction ID : SA11AI.15942</b>
City St. Paul	State MN	Zip Code 55105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 417.50
Name of Employer (for Individual) Robins Kaplan Miller & Ciresi	Occupation (for Individual) Lawyer	<input type="checkbox"/> Memo Item contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 417.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Johnson, Brendan, V., , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2019
Mailing Address 320 W Lyncrest Trail		<b>Transaction ID : SA11AI.15944</b>
City Sioux Falls	State SD	Zip Code 57108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 238.57
Name of Employer (for Individual) Robins Kaplan LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 238.57	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1028.83
<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:	PAGE 9 OF 19
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Robins Kaplan PAC**

**A. Johnson, Scott G., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7997 Lea Circle  
 City Bloomington State MN Zip Code 55438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 298.21

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15943**  
 Amount of Each Receipt this Period 298.21  
 Memo Item contribution

**B. Laconte, Mark S., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wilson Lane  
 City Acton State MA Zip Code 01720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins, Kaplan, Miller & Ciresi LLP Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 328.03

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15946**  
 Amount of Each Receipt this Period 328.03  
 Memo Item contribution

**C. Larus, Chris, K., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7018 Dakota Circle  
 City Chanhassen State MN Zip Code 55317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 417.50

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15947**  
 Amount of Each Receipt this Period 417.50  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1043.74
<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 10 OF 19
	<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)  
**Robins Kaplan PAC**

**A. Lerner, Kellie, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 River Terrace  
 Apt. 3C  
 City New York State NY Zip Code 10010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.76

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2019  
**Transaction ID : SA11AI.15949**  
 Amount of Each Receipt this Period  
 372.76  
 Memo Item contribution

**B. Lockner, Anne, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2918 Ewing Avenue South  
 City Minneapolis State MN Zip Code 55416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 238.57

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2019  
**Transaction ID : SA11AI.15950**  
 Amount of Each Receipt this Period  
 238.57  
 Memo Item contribution

**C. Mahlum, Thomas, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5312 Chantrey Road  
 City Edina State MN Zip Code 55436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 298.21

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2019  
**Transaction ID : SA11AI.15951**  
 Amount of Each Receipt this Period  
 298.21  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	909.54
<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 11 OF 19
<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)  
**Robins Kaplan PAC**

**A. Marder, David, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 Cheshire Road  
 City Sharon State MA Zip Code 02067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins, Kaplan, Miller & Cires Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 238.57

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15953**  
 Amount of Each Receipt this Period 238.57  
 Memo Item contribution

**B. Martinez, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9265 Airdome Street  
 City Los Angeles State CA Zip Code 90035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 298.21

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15954**  
 Amount of Each Receipt this Period 298.21  
 Memo Item contribution

**C. McMahon, Emmett J., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7970 County Rd 26  
 City Maple Plain State MN Zip Code 55359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 238.57

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15955**  
 Amount of Each Receipt this Period 238.57  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	775.35
<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 12 OF 19
<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)  
**Robins Kaplan PAC**

**A. Meghjee, Munir, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17725 45th Ave. N.  
 City Plymouth State MN Zip Code 55446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins, Kaplan, Miller & Cires Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 298.21

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15956**  
 Amount of Each Receipt this Period 298.21  
 Memo Item contribution

**B. Messerly, Chris A., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 317 Timberline Trail  
 City Vadnais Heights State MN Zip Code 55127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins, Kaplan, Miller & Ciresi LLP Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.76

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15957**  
 Amount of Each Receipt this Period 372.76  
 Memo Item contribution

**C. Morton, Cyrus, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6624 West Shore Drive  
 City Edina State MN Zip Code 55435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 328.03

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15958**  
 Amount of Each Receipt this Period 328.03  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	999.00
<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:	PAGE 13 OF 19
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Robins Kaplan PAC**

**A. Mutch, Jonathan, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 Morse Road  
 City Sherborn State MA Zip Code 01770  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 238.57

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2019  
**Transaction ID : SA11AI.15959**  
 Amount of Each Receipt this Period  
 238.57  
 Memo Item contribution

**B. Orloff, Steven K., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 260 King Hill Road  
 City Golden Valley State MN Zip Code 55416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins, Kaplan, Miller & Ciresi LLP Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 238.57

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2019  
**Transaction ID : SA11AI.15960**  
 Amount of Each Receipt this Period  
 238.57  
 Memo Item contribution

**C. Pfeiffer, Jason W., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 70 Wear Lane S.  
 City Orono State MN Zip Code 55356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 372.76

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2019  
**Transaction ID : SA11AI.15961**  
 Amount of Each Receipt this Period  
 372.76  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	849.90
<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 14 OF 19
	<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)  
**Robins Kaplan PAC**

**A. Safranski, Stephen, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6552 Cherokee Trail W  
 City Eden Prairie State MN Zip Code 55344  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 238.57

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15965**  
 Amount of Each Receipt this Period 238.57  
 Memo Item contribution

**B. Salzman, Hollis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 245E 25th Street Suite 6D  
 City New York State NY Zip Code 10010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 477.14

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15966**  
 Amount of Each Receipt this Period 477.14  
 Memo Item contribution

**C. Schmit, Peter A., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1345 Meadow Avenue  
 City Shoreview State MN Zip Code 55126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins, Kaplan, Miller & Ciresi LLP Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 328.03

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15967**  
 Amount of Each Receipt this Period 328.03  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1043.74
<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: PAGE 15 OF 19  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Robins Kaplan PAC**

**A. Schutz, Ronald J., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 865 Navajo Road  
 City Medina State MN Zip Code 55340  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 536.78

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15969**  
 Amount of Each Receipt this Period 536.78  
 Memo Item contribution

**B. Seidl, Christopher, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1712 Scheffer Avenue  
 City St. Paul State MN Zip Code 55116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 328.03

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15970**  
 Amount of Each Receipt this Period 328.03  
 Memo Item contribution

**C. Sieff, Philip L., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Sunset Blvd.  
 City St. Louis Park State MN Zip Code 55416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins, Kaplan, Miller & Cires Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 328.03

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15971**  
 Amount of Each Receipt this Period 328.03  
 Memo Item contribution

**SUBTOTAL** of Receipts This Page (optional).....▶ 1192.84  
**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 19
<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)  
**Robins Kaplan PAC**

**A. Slaughter, Stacey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4340 Lyndale Avenue S.  
 City Minneapolis State MN Zip Code 55409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 298.21

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15973**  
 Amount of Each Receipt this Period 298.21  
 Memo Item contribution

**B. Sutton, Tara D., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2943 Fairview Lane  
 City Orono State MN Zip Code 55356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 477.14

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15975**  
 Amount of Each Receipt this Period 477.14  
 Memo Item contribution

**C. Tietjen, Randall M., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5509 Interlachen Blvd.  
 City Edina State MN Zip Code 55436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 298.21

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15976**  
 Amount of Each Receipt this Period 298.21  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1073.56
<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:	PAGE 17 OF 19
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Robins Kaplan PAC**

**A. Undlin, Thomas J., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 Bridge Lane  
 City Edina State MN Zip Code 55424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 298.21

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15977**  
 Amount of Each Receipt this Period 298.21  
 Memo Item contribution

**B. Vogel, Bryan, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 714 Adams Street  
 City Hoboken State NJ Zip Code 07030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 238.57

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15979**  
 Amount of Each Receipt this Period 238.57  
 Memo Item contribution

**C. Webster, William A., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5047 Otis Avenue  
 City Los Angeles State CA Zip Code 91356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 328.03

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15980**  
 Amount of Each Receipt this Period 328.03  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	864.81
<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 18 OF 19
	<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)  
**Robins Kaplan PAC**

**A. Weiner, Craig, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 W. 58th Street, Apt. 2B  
 City New York State NY Zip Code 10019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.76

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15981**  
 Amount of Each Receipt this Period 372.76  
 Memo Item contribution

**B. Wilson, Gary L., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4612 Fremont Avenue South  
 City Minneapolis State MN Zip Code 55409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins, Kaplan, Miller & Ciresi LLP Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 328.03

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15983**  
 Amount of Each Receipt this Period 328.03  
 Memo Item contribution

**C. Woods, Matthew L., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6745 Lakeway Drive  
 City Chanhassen State MN Zip Code 55317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robins Kaplan Miller & Ciresi Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 372.76

Date of Receipt 12 / 19 / 2019  
**Transaction ID : SA11AI.15984**  
 Amount of Each Receipt this Period 372.76  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1073.55
<b>TOTAL</b> This Period (last page this line number only).....▶	12852.88

**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)  
**Robins Kaplan PAC**

**A. AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
12 / 19 / 2019

Mailing Address 777 6th Street, NW  
Suite 200

City Washington State DC Zip Code 20001

Purpose of Disbursement contribution  
Candidate Name  
FEC Identification Number: C 00024521  
Transaction ID : SB23.15997  
Amount of Each Disbursement this Period: 5000.00

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

Memo Item

**B. NADLER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
10 / 16 / 2019

Mailing Address 200 WEST 79TH STREET, #8N

City NEW YORK State NY Zip Code 10024

Purpose of Disbursement contribution  
Candidate Name  
FEC Identification Number: C 00290825  
Transaction ID : SB23.15995  
Amount of Each Disbursement this Period: 1000.00

Office Sought:  House  Senate  President  
Disbursement For: 2020  
 Primary  General  Other (specify) ▼  
State: NY District: 10

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement  
Candidate Name  
FEC Identification Number: C  
Amount of Each Disbursement this Period

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

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6000.00