

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
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

ADDRESS (number and street) 430 SOUTH CAPITOL STREET SE
Check if different than previously reported. (ACC) WASHINGTON DC 20003

2. FEC IDENTIFICATION NUMBER C C00460147
3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [ ] 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)
(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 08 / 01 / 2013 through 08 / 31 / 2013

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

Type or Print Name of Treasurer ANDREW TOBIAS

Signature of Treasurer ANDREW TOBIAS [Electronically Filed] Date 09 / 19 / 2013

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

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="2013"/>		<input type="text" value="372297.07"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="233253.57"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="42000.00"/>	<input type="text" value="1303446.57"/>
(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="275253.57"/>	<input type="text" value="1675743.64"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="61274.63"/>	<input type="text" value="1461764.70"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="213978.94"/>	<input type="text" value="213978.94"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

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).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
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).....	42000.00	1303446.57
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))..... ▶	42000.00	1303446.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	42000.00	1303446.57

**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 .....	61274.63	1461764.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	61274.63	1461764.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	61274.63	1461764.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61274.63	1461764.70

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	61274.63	1461764.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	42000.00	1303446.57
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	19274.63	158318.13

**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 27
<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

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)  
**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial) <b>A. Friends of Maggie Hassan</b>		Date of Receipt MM / DD / YYYY 08 / 20 / 2013 <b>Transaction ID : SA15-6273</b>
Mailing Address PO Box 1464		Amount of Each Receipt this Period 27000.00
City Manchester	State NH	Zip Code 03101
FEC ID number of contributing federal political committee. C	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 27000.00	

Full Name (Last, First, Middle Initial) <b>B. Obama for America</b>		Date of Receipt MM / DD / YYYY 08 / 21 / 2013 <b>Transaction ID : SA15-6287</b>
Mailing Address PO Box 8102		Amount of Each Receipt this Period 15000.00
City Chicago	State IL	Zip Code 60680
FEC ID number of contributing federal political committee. C C00431445	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 441184.59	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	42000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	42000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. Budget Rent-A-Car Systems, Inc.**

Mailing Address 14297 Collections Center Drive

City Chicago State IL Zip Code 60693

Purpose of Disbursement  
Car Rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2013

**Transaction ID : SB21B-6220**

Amount of Each Disbursement this Period

473.68

Full Name (Last, First, Middle Initial)

**B. DEPARTMENT OF TREASURY**

Mailing Address P.O. BOX 27800

City WASHINGTON State DC Zip Code 20038-7800

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2013

**Transaction ID : SB21B-6221**

Amount of Each Disbursement this Period

241.95

Full Name (Last, First, Middle Initial)

**C. DEPARTMENT OF TREASURY**

Mailing Address P.O. BOX 27800

City WASHINGTON State DC Zip Code 20038-7800

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2013

**Transaction ID : SB21B-6222**

Amount of Each Disbursement this Period

8.25

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

723.88

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. DEPARTMENT OF TREASURY**

Mailing Address P.O. BOX 27800

City WASHINGTON State DC Zip Code 20038-7800

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2013

**Transaction ID : SB21B-6223**

Amount of Each Disbursement this Period

508.98

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. WHITE HOUSE AIRLIFT OPERATIONS**

Mailing Address Eisenhower Executive Office Bldg  
Room 25

City Washington State DC Zip Code 20502

Purpose of Disbursement  
White House Airlift In-flight Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2013

**Transaction ID : SB21B-6224**

Amount of Each Disbursement this Period

44.05

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. WHITE HOUSE AIRLIFT OPERATIONS**

Mailing Address Eisenhower Executive Office Bldg  
Room 25

City Washington State DC Zip Code 20502

Purpose of Disbursement  
White House Airlift Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2013

**Transaction ID : SB21B-6225**

Amount of Each Disbursement this Period

11786.13

Category/  
Type

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

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

12339.16



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. WHITE HOUSE AIRLIFT OPERATIONS**

Mailing Address Eisenhower Executive Office Bldg  
Room 25

City Washington State DC Zip Code 20502

Purpose of Disbursement  
White House Airlift In-flight Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	01	/	2013

**Transaction ID : SB21B-6226**

Amount of Each Disbursement this Period

8.23
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Full Name (Last, First, Middle Initial)

**B. WHITE HOUSE AIRLIFT OPERATIONS**

Mailing Address Eisenhower Executive Office Bldg  
Room 25

City Washington State DC Zip Code 20502

Purpose of Disbursement  
White House Airlift In-flight Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	01	/	2013

**Transaction ID : SB21B-6227**

Amount of Each Disbursement this Period

16.68
-------

Full Name (Last, First, Middle Initial)

**C. WHITE HOUSE AIRLIFT OPERATIONS**

Mailing Address Eisenhower Executive Office Bldg  
Room 25

City Washington State DC Zip Code 20502

Purpose of Disbursement  
White House Airlift In-flight Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	01	/	2013

**Transaction ID : SB21B-6228**

Amount of Each Disbursement this Period

8.23
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

33.14
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. WHITE HOUSE AIRLIFT OPERATIONS**

Mailing Address Eisenhower Executive Office Bldg  
Room 25

City Washington State DC Zip Code 20502

Purpose of Disbursement  
White House Airlift Helo

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2013

**Transaction ID : SB21B-6229**

Amount of Each Disbursement this Period

120.60

Full Name (Last, First, Middle Initial)

**B. WHITE HOUSE AIRLIFT OPERATIONS**

Mailing Address Eisenhower Executive Office Bldg  
Room 25

City Washington State DC Zip Code 20502

Purpose of Disbursement  
White House Airlift Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2013

**Transaction ID : SB21B-6230**

Amount of Each Disbursement this Period

1767.17

Full Name (Last, First, Middle Initial)

**C. WHITE HOUSE AIRLIFT OPERATIONS**

Mailing Address Eisenhower Executive Office Bldg  
Room 25

City Washington State DC Zip Code 20502

Purpose of Disbursement  
White House Airlift In-flight Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2013

**Transaction ID : SB21B-6231**

Amount of Each Disbursement this Period

9.58

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

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

1897.35

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. BENJAMIN FINKENBINDER**

Mailing Address 2853 Ontario Road, NW, Apt 119

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2013

**Transaction ID : SB21B-6232**

Amount of Each Disbursement this Period

-29.28
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Voided Check

Full Name (Last, First, Middle Initial)

**B. James Quinn**

Mailing Address 1608 13th Street, NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Advance Logistics Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2013

**Transaction ID : SB21B-6233**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. James Quinn**

Mailing Address 1608 13th Street, NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Travel Local

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2013

**Transaction ID : SB21B-6234**

Amount of Each Disbursement this Period

25.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

495.72
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. James Quinn**

Mailing Address 1608 13th Street, NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Travel Fuel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	08	/	2013

**Transaction ID : SB21B-6235**

Amount of Each Disbursement this Period

18.87
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Full Name (Last, First, Middle Initial)

**B. James Quinn**

Mailing Address 1608 13th Street, NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Train/Bus Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	08	/	2013

**Transaction ID : SB21B-6236**

Amount of Each Disbursement this Period

19.75
-------

Full Name (Last, First, Middle Initial)

**C. James Quinn**

Mailing Address 1608 13th Street, NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Advance Logistics Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	08	/	2013

**Transaction ID : SB21B-6237**

Amount of Each Disbursement this Period

700.00
--------

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

738.62
--------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. James Quinn**

Mailing Address 1608 13th Street, NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Travel Local

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	08	/	2013

**Transaction ID : SB21B-6238**

Amount of Each Disbursement this Period

23.45
-------

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA,NA**

Mailing Address REGIONAL CENTER, VA2-125-04-01  
P.O. BOX 27025

City RICHMOND State VA Zip Code 23261-7025

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : SB21B-6295**

Amount of Each Disbursement this Period

121.03
--------

Full Name (Last, First, Middle Initial)

**C. Alex May-Sealey**

Mailing Address 777 7th Street, NW, Apt 320

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Advance Logistics Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : SB21B-6239**

Amount of Each Disbursement this Period

-700.00
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Voided Check

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

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

-555.52
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. Alex May-Sealey**

Mailing Address 777 7th Street, NW, Apt 320

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel Local

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2013

**Transaction ID : SB21B-6240**

Amount of Each Disbursement this Period

-35.50

Voided Check

Full Name (Last, First, Middle Initial)

**B. WHITE HOUSE AIRLIFT OPERATIONS**

Mailing Address Eisenhower Executive Office Bldg  
Room 25

City Washington State DC Zip Code 20502

Purpose of Disbursement  
White House Airlift Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6241**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. WHITE HOUSE AIRLIFT OPERATIONS**

Mailing Address Eisenhower Executive Office Bldg  
Room 25

City Washington State DC Zip Code 20502

Purpose of Disbursement  
White House Airlift Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6242**

Amount of Each Disbursement this Period

5694.69

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

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

10659.19

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. Noam Bar-Zemer**

Mailing Address 15 Laurel Court

City Providence State RI Zip Code 02906

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6243**

Amount of Each Disbursement this Period

199.15

Full Name (Last, First, Middle Initial)

**B. Janice Broderick**

Mailing Address 255 Fieldston Terrace, Apt 3J

City Riverdale State NY Zip Code 20471-3057

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6244**

Amount of Each Disbursement this Period

50.76

Full Name (Last, First, Middle Initial)

**C. Budget Rent-A-Car Systems, Inc.**

Mailing Address 14297 Collections Center Drive

City Chicago State IL Zip Code 60693

Purpose of Disbursement  
Car Rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6245**

Amount of Each Disbursement this Period

473.93

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

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

723.84

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. Jose Cerda**

Mailing Address 1735 Willard, NW, #3

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6246**

Amount of Each Disbursement this Period

54.31

Full Name (Last, First, Middle Initial)

**B. MICHAEL DONILON**

Mailing Address 1120 Alexandria Avenue

City Alexandria State VA Zip Code 22308

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6247**

Amount of Each Disbursement this Period

53.25

Full Name (Last, First, Middle Initial)

**C. MICHAEL DONILON**

Mailing Address 1120 Alexandria Avenue

City Alexandria State VA Zip Code 22308

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6248**

Amount of Each Disbursement this Period

5.86

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

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

113.42



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. Meghan Goodman**

Mailing Address 48 West 87th St, Apt B

City New York State NY Zip Code 10024

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6249**

Amount of Each Disbursement this Period

235.37

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Meghan Goodman**

Mailing Address 48 West 87th St, Apt B

City New York State NY Zip Code 10024

Purpose of Disbursement  
Travel Local

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6250**

Amount of Each Disbursement this Period

106.42

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Meghan Goodman**

Mailing Address 48 West 87th St, Apt B

City New York State NY Zip Code 10024

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6251**

Amount of Each Disbursement this Period

50.76

Category/  
Type

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

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

392.55

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. Meghan Goodman**

Mailing Address 48 West 87th St, Apt B

City New York State NY Zip Code 10024

Purpose of Disbursement  
Travel Local

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6252**

Amount of Each Disbursement this Period

21.17

Full Name (Last, First, Middle Initial)

**B. Jennifer Grace**

Mailing Address 700 1st Street, Apt 1N

City Hoboken State NJ Zip Code 07030

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6253**

Amount of Each Disbursement this Period

195.25

Full Name (Last, First, Middle Initial)

**C. Jennifer Grace**

Mailing Address 700 1st Street, Apt 1N

City Hoboken State NJ Zip Code 07030

Purpose of Disbursement  
Travel Local

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6254**

Amount of Each Disbursement this Period

71.00

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

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

287.42

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. Alex May-Sealey**

Mailing Address 777 7th Street, NW, Apt 320

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Advance Logistics Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6255**

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**B. Alex May-Sealey**

Mailing Address 777 7th Street, NW, Apt 320

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel Local

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6256**

Amount of Each Disbursement this Period

35.50

Full Name (Last, First, Middle Initial)

**C. Alex May-Sealey**

Mailing Address 777 7th Street, NW, Apt 320

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel Local

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6257**

Amount of Each Disbursement this Period

42.50

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

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

778.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. Donald H. McCurren**

Mailing Address 303 W Lafayette St

City Edina State MO Zip Code 63537

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2013

**Transaction ID : SB21B-6258**

Amount of Each Disbursement this Period

281.51
--------

Full Name (Last, First, Middle Initial)

**B. Donald H. McCurren**

Mailing Address 303 W Lafayette St

City Edina State MO Zip Code 63537

Purpose of Disbursement  
Airline Baggage Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2013

**Transaction ID : SB21B-6259**

Amount of Each Disbursement this Period

30.50
-------

Full Name (Last, First, Middle Initial)

**C. Clare McNulty**

Mailing Address 597 Coney Island Ave, Apt 2F

City Brooklyn State NY Zip Code 11218

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2013

**Transaction ID : SB21B-6260**

Amount of Each Disbursement this Period

50.76
-------

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

362.77
--------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. Shailagh Murray**

Mailing Address 233 1/2 Ninth St, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2013

**Transaction ID : SB21B-6261**

Amount of Each Disbursement this Period

5.86
------

Full Name (Last, First, Middle Initial)

**B. JANNA SIDLEY**

Mailing Address 10358 Lorenzo Drive

City Los Angeles State CA Zip Code 90064

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2013

**Transaction ID : SB21B-6262**

Amount of Each Disbursement this Period

238.21
--------

Full Name (Last, First, Middle Initial)

**C. JANNA SIDLEY**

Mailing Address 10358 Lorenzo Drive

City Los Angeles State CA Zip Code 90064

Purpose of Disbursement  
Airline Baggage Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2013

**Transaction ID : SB21B-6263**

Amount of Each Disbursement this Period

15.25
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

259.32
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. JANNA SIDLEY**

Mailing Address 10358 Lorenzo Drive

City Los Angeles State CA Zip Code 90064

Purpose of Disbursement  
Travel Local

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6264**

Amount of Each Disbursement this Period

57.34

Full Name (Last, First, Middle Initial)

**B. JANNA SIDLEY**

Mailing Address 10358 Lorenzo Drive

City Los Angeles State CA Zip Code 90064

Purpose of Disbursement  
Travel Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2013

**Transaction ID : SB21B-6265**

Amount of Each Disbursement this Period

2.28

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address P O BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement  
Travel Agent fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2013

**Transaction ID : SB21B-6290**

Amount of Each Disbursement this Period

1054.00

See Attached Memo Entry

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

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

1113.62

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. American Express Busin Travel**

Mailing Address 1901 N Moore St, 10th Floor

City Arlington State VA Zip Code 22209

Purpose of Disbursement  
Travel Agent fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2013

**Transaction ID : SB21B-6290-10000**

Amount of Each Disbursement this Period

1054.00
---------

**[MEMO ITEM]**  
Memo Entry

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address P O BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2013

**Transaction ID : SB21B-6291**

Amount of Each Disbursement this Period

2893.50
---------

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

**C. JetBlue Airways Corporation**

Mailing Address 118-29 Queens Blvd

City Forest Hills State NY Zip Code 11375

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2013

**Transaction ID : SB21B-6291-10000**

Amount of Each Disbursement this Period

-449.90
---------

**[MEMO ITEM]**  
Memo Entry

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

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

2893.50
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2013

Transaction ID : SB21B-6291-20000

Amount of Each Disbursement this Period

469.90

[MEMO ITEM]  
Memo Entry

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 77 W. Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2013

Transaction ID : SB21B-6291-30000

Amount of Each Disbursement this Period

470.80

[MEMO ITEM]  
Memo Entry

Full Name (Last, First, Middle Initial)

**C. US Airways Group Inc.**

Mailing Address 111 W. Rio Salado Pkwy

City Tempe State AZ Zip Code 85281

Purpose of Disbursement Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2013

Transaction ID : SB21B-6291-40000

Amount of Each Disbursement this Period

2402.70

[MEMO ITEM]  
Memo Entry

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address P O BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement  
Train/Bus Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2013

**Transaction ID : SB21B-6292**

Amount of Each Disbursement this Period

292.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address Union Station  
50 Massachusetts Ave., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Train/Bus Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2013

**Transaction ID : SB21B-6292-10000**

Amount of Each Disbursement this Period

292.00

**[MEMO ITEM]**  
Memo Entry

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address P O BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement  
Lodging & Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2013

**Transaction ID : SB21B-6293**

Amount of Each Disbursement this Period

12098.73

See Attached Memo Entry

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

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

12390.73

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial) <b>A. Boston Marriott Long Wharf</b>	Date of Disbursement MM / DD / YYYY 08 / 20 / 2013
Mailing Address 296 State Street	<b>Transaction ID : SB21B-6293-10000</b>  Amount of Each Disbursement this Period 12098.73  <b>[MEMO ITEM]</b> Memo Entry
City Boston      State MA      Zip Code 02109	
Purpose of Disbursement Lodging & Catering	
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>	Date of Disbursement MM / DD / YYYY 08 / 20 / 2013
Mailing Address P O BOX 1270	<b>Transaction ID : SB21B-6294</b>  Amount of Each Disbursement this Period 627.92  See Attached Memo Entry
City NEWARK      State NJ      Zip Code 07101	
Purpose of Disbursement Car Rental	
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Enterprise Rent-A-Car</b>	Date of Disbursement MM / DD / YYYY 08 / 20 / 2013
Mailing Address PO Box 795153	<b>Transaction ID : SB21B-6294-10000</b>  Amount of Each Disbursement this Period 627.92  <b>[MEMO ITEM]</b> Memo Entry
City St. Louis      State MO      Zip Code 63179	
Purpose of Disbursement Car Rental	
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	627.92
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Full Name (Last, First, Middle Initial)

**A. WHITE HOUSE AIRLIFT OPERATIONS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2013

Mailing Address Eisenhower Executive Office Bldg  
Room 25

City Washington State DC Zip Code 20502

Purpose of Disbursement  
White House Airlift Airfare

Candidate Name

Category/  
Type

**Transaction ID : SB21B-6274**

Amount of Each Disbursement this Period

15000.00
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Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

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

15000.00
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61274.63
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