

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Pineapple PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value=""/>	<input type="text" value="36496.79"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="18427.50"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="15000.00"/>	<input type="text" value="102374.47"/>
(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="33427.50"/>	<input type="text" value="138871.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10987.04"/>	<input type="text" value="116430.80"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="22440.46"/>	<input type="text" value="22440.46"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Pineapple 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).....	0.00	8750.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	8750.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	15000.00	93078.13
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	15000.00	101828.13
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	546.34
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	102374.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	15000.00	102374.47

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	10987.04	92430.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10987.04	92430.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	24000.00
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)) ..	10987.04	116430.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10987.04	116430.80

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	15000.00	101828.13
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	101828.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10987.04	92430.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	546.34
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10987.04	91884.46

**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 13
<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)
Pineapple PAC

A. American Association for Justice Political Action Committee (AAJ PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 6th St NW
 Ste 200
 City Washington State DC Zip Code 20001-3707
 FEC ID number of contributing federal political committee. **C** C00024521
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 01 / 2016
Transaction ID : VSHBTD7PX25
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Lockheed Martin Employees' PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2121 Crystal Dr
 Ste 100
 City Arlington State VA Zip Code 22202-3706
 FEC ID number of contributing federal political committee. **C** C00303024
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 14 / 2016
Transaction ID : VSHBTD8MQ11
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Merck Employees Political Action Committee (Merck PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 Pennsylvania Ave NW
 North Building, Suite 1200
 City Washington State DC Zip Code 20004-2601
 FEC ID number of contributing federal political committee. **C** C00097485
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 04 / 2016
Transaction ID : VSHBTD6VEW5
 Amount of Each Receipt this Period 4000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 14000.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pineapple PAC

A. Wal-Mart Stores Inc. PAC for Responsible Government (WALPAC)

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

Mailing Address 702 SW 8th St

City Bentonville	State AR	Zip Code 72716-6299
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00093054

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		01		2016

Transaction ID : VSHBTD7PXD2

Amount of Each Receipt this Period
1000.00

Memo Item

B.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	15000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Pineapple PAC

Full Name (Last, First, Middle Initial)

A. Benchmark Strategies

Mailing Address 303 Massachusetts Ave NE

City
Washington

State
DC

Zip Code
20002-5701

Purpose of Disbursement
Fundraising Consulting for PAC (no Fed candidates)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSGCJ9T90Y

Amount of Each Disbursement this Period

[Redacted] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Capitol Compliance Associates, Inc.

Mailing Address PO Box 15293

City
Washington

State
DC

Zip Code
20003-0293

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSGCJ9T90P

Amount of Each Disbursement this Period

[Redacted] 1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Capitol Compliance Associates, Inc.

Mailing Address PO Box 15293

City
Washington

State
DC

Zip Code
20003-0293

Purpose of Disbursement
Expense Reimbursement - Below if Itemized

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSGCJ9T90F

Amount of Each Disbursement this Period

[Redacted] 2628.78

Memo Item

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

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

[Redacted] 9128.78

[Redacted]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Pineapple PAC

Full Name (Last, First, Middle Initial) A. Sheraton Philadelphia Downtown		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016
Mailing Address 201 N 17th St		FEC Identification Number C [REDACTED] Transaction ID : VSGCJ9T90S Amount of Each Disbursement this Period 2628.78
City Philadelphia	State PA	Zip Code 19103-1201
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Hirono, Mazie, , ,		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address PO Box 677		FEC Identification Number C [REDACTED] Transaction ID : VSGCJ9TF93 Amount of Each Disbursement this Period 571.97
City Honolulu	State HI	Zip Code 96809-0677
Purpose of Disbursement Travel Reimbursement - Below if Itemized		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item Expenses paid as an in-kind to Deborah Ross for Senate (see line 23)	

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address PO Box 619612 MD 5675		FEC Identification Number C [REDACTED] Transaction ID : VSGCJ9TF92 Amount of Each Disbursement this Period 331.10
City Dallas	State TX	Zip Code 75261-9612
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	571.97
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Pineapple PAC

Full Name (Last, First, Middle Initial)

A. Hilton Garden Inn

Mailing Address 508 E Martin Luther King Blvd

City Charlotte State NC Zip Code 28202-2830

Purpose of Disbursement
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2016

FEC Identification Number

C
Transaction ID : VSGCJ9TF90
Amount of Each Disbursement this Period
240.87

Memo Item

Full Name (Last, First, Middle Initial)

B. Hirono, Mazie, , ,

Mailing Address PO Box 677

City Honolulu State HI Zip Code 96809-0677

Purpose of Disbursement
Travel Reimbursement - Below if Itemized

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2016

FEC Identification Number

C
Transaction ID : VSGCJ9TFBE
Amount of Each Disbursement this Period
629.09

Expenses paid as an in-kind to Maggie for NH (see line 23)

Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address PO Box 619612
MD 5675

City Dallas State TX Zip Code 75261-9612

Purpose of Disbursement
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2016

FEC Identification Number

C
Transaction ID : VSGCJ9TFB
Amount of Each Disbursement this Period
370.10

Memo Item

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

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

629.09

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Pineapple PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address PO Box 36647
1CR

City
Dallas

State
TX

Zip Code
75235-1647

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2016			

FEC Identification Number

C []

Transaction ID : VSGCJ9TFBI

Amount of Each Disbursement this Period

[] 258.99 []

Memo Item

Full Name (Last, First, Middle Initial)

B. Hirono, Mazie, , ,

Mailing Address PO Box 677

City
Honolulu

State
HI

Zip Code
96809-0677

Purpose of Disbursement
Travel Reimbursement - Below if Itemized

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2016			

FEC Identification Number

C []

Transaction ID : VSGCJ9TFBI

Amount of Each Disbursement this Period

[] 507.20 []

Memo Item Expenses paid as an in-kind to
Katie McGinty for Senate (see line
23)

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address PO Box 619612
MD 5675

City
Dallas

State
TX

Zip Code
75261-9612

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2016			

FEC Identification Number

C []

Transaction ID : VSGCJ9TFBI

Amount of Each Disbursement this Period

[] 295.60 []

Memo Item

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

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

[] 507.20 []

[] [] [] [] [] [] [] [] [] []

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Pineapple PAC

Full Name (Last, First, Middle Initial) A. The Westin Philadelphia		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 99 S 17th St		FEC Identification Number C [] Transaction ID : VSGCJ9TFBI Amount of Each Disbursement this Period [] 211.60
City Philadelphia	State PA	Zip Code 19103-4217
Purpose of Disbursement Travel		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item *	

Full Name (Last, First, Middle Initial) B. Norton, Kelly, , ,		Date of Disbursement MM / DD / YYYY 10 / 13 / 2016
Mailing Address 303 Massachusetts Ave NE		FEC Identification Number C [] Transaction ID : VSGCJ9TDZS Amount of Each Disbursement this Period [] 150.00
City Washington	State DC	Zip Code 20002-5701
Purpose of Disbursement Expense Reimbursement - Below if Itemized		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

SUBTOTAL of Disbursements This Page (optional).....▶	[] 150.00
TOTAL This Period (last page this line number only).....▶	[] 10987.04

**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)

Pineapple PAC

Full Name (Last, First, Middle Initial)

A. Deborah Ross for Senate

Mailing Address PO Box 28258

City
Raleigh

State
NC

Zip Code
27611-8258

Purpose of Disbursement
In-Kind Made - Sen. Hirono Travel

Candidate Name

Ross, Deborah, K., ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NC District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2016			

FEC Identification Number

C C00589820

Transaction ID : VSGCJ9TF8Y

Amount of Each Disbursement this Period

571.97

Memo Item * See disbursement to Mazie Hirono on line 21 for in-kind expenses paid

Full Name (Last, First, Middle Initial)

B. Katie McGinty for Senate

Mailing Address PO Box 22447

City
Philadelphia

State
PA

Zip Code
19110-2447

Purpose of Disbursement
In-Kind Made - Sen. Hirono Travel

Candidate Name

McGinty, Kathleen Alana, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: PA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2016			

FEC Identification Number

C C00582809

Transaction ID : VSGCJ9TFBF

Amount of Each Disbursement this Period

507.20

Memo Item * See disbursement to Mazie Hirono on line 21 for in-kind expenses paid

Full Name (Last, First, Middle Initial)

C. Maggie for NH

Mailing Address PO Box 298

City
Concord

State
NH

Zip Code
03302-0298

Purpose of Disbursement
In-Kind Made - Sen. Hirono Travel

Candidate Name

Hassan, Margaret Wood, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NH District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2016			

FEC Identification Number

C C00588772

Transaction ID : VSGCJ9TFA'

Amount of Each Disbursement this Period

629.09

Memo Item * See disbursement to Mazie Hirono on line 21 for in-kind expenses paid

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

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

0.00

0.00