

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

**RECEIVED  
FEC MAIL CENTER**  
Office Use Only  
DEC 8 PM 4:32

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

*Mid-Atlantic Progressive Leadership Committee*

ADDRESS (number and street) *2304 Holly Ave*

Check if different than previously reported. (ACC) *Takoma Park MD 20912*

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

C00300236

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 MM/DD/YYYY in the State of  

- (d) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on 11/08/2016 in the State of USA

5. Covering Period 10/16/2016 through 11/30/2016

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

Type or Print Name of Treasurer *Wesley Smith*

Signature of Treasurer *[Signature]* Date 12/07/2016

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

NON-FEDERAL CAMPAIGN FINANCIAL REPORTING

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

*Mid-Atlantic Progressive Leadership Committee*

Report Covering the Period: \*

From:

MM ' DD ' YYYY  
10 / 16 / 2016

To:

MM ' DD ' YYYY  
11 / 30 / 2016

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">2016</span>	<span style="border: 1px solid black; padding: 2px;">1759.89</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">2702.88</span>
(c) Total Receipts (from Line 19).....	<span style="border: 1px solid black; padding: 2px;">1480.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">14815.89</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">12402.01</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">2413.88</span>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<span style="border: 1px solid black; padding: 2px;">-0-</span>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<span style="border: 1px solid black; padding: 2px;">-0-</span>



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

*Mid-Atlantic Progressive Leadership Committee*

Report Covering the Period: From: MM DD YYYY 10 16 2016 To: MM DD YYYY 11 30 2016

**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-

2850.00

(ii) Unitemized.....

1480.00

10206.00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

1480.00

13056.00

(b) Political Party Committees.....

-0-

-0-

(c) Other Political Committees (such as PACs).....

-0-

-0-

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

1480.00

13056.00

12. Transfers From Affiliated/Other Party Committees.....

NA

NA

13. All Loans Received.....

-0-

-0-

14. Loan Repayments Received.....

NA

NA

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

-0-

-0-

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

NA

NA

17. Other Federal Receipts (Dividends, Interest, etc.).....

-0-

-0-

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

NA

NA

(b) Levin Funds (from Schedule H5).....

NA

NA

(c) Total Transfers (add 18(a) and 18(b))..

NA

NA

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

1480.00

13056.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

1480.00

13056.00

NON-FEDERAL AND LEVIN FUNDS

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

**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 .....	NA	NA
(ii) Non-Federal Share.....	NA	NA
(b) Other Federal Operating Expenditures .....	1769.00	12402.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1769.00	12402.01
22. Transfers to Affiliated/Other Party Committees .....	NA	NA
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-0-	-0-
24. Independent Expenditures (use Schedule E) .....	-0-	-0-
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	NA	NA
26. Loan Repayments Made.....	NA	NA
27. Loans Made.....	-0-	-0-
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	-0-	-0-
(b) Political Party Committees .....	NA	NA
(c) Other Political Committees (such as PACs).....	NA	NA
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	-0-	-0-
29. Other Disbursements .....	-0-	-0-
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	NA	NA
(ii) "Levin" Share.....	NA	NA
(b) Federal Election Activity Paid Entirely With Federal Funds .....	NA	NA
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	-0-	-0-
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1769.00	12402.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1769.00	12402.01

20101100100100100100

**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) .....	14,800.00	13,056.00
34. Total Contribution Refunds (from Line 28(d)) .....	-0-	-0-
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14,800.00	13,056.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	17,690.00	12,402.01
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	-0-	-0-
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17,690.00	12,402.01

NON-FINANCIAL DOCUMENT

**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 1 OF 3
	<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	

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)  
*Mid-Atlantic Progressive Leadership Committee*

**A.**

Full Name (Last, First, Middle Initial) *Hinds, Carol*

Mailing Address *7304 Molly Ave.*

City *Takoma Park* State *MD* Zip Code *20912*

Purpose of Disbursement *office rent*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *10/17/2016*

Amount of Each Disbursement this Period: *230.00*

Category/Type: *00*

**B.**

Full Name (Last, First, Middle Initial) *Smith, Wesley J.*

Mailing Address *7304 Molly Ave.*

City *Takoma Park* State *MD* Zip Code *20912*

Purpose of Disbursement *party cash to support non-partisan absentee ballot program; GW*

Candidate Name *University*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *10/18/2016*

Amount of Each Disbursement this Period: *145.00*

Category/Type: *002*

**C.**

Full Name (Last, First, Middle Initial) *Smith, Wesley J.*

Mailing Address *7304 Molly Ave.*

City *Takoma Park* State *MD* Zip Code *20912*

Purpose of Disbursement *party cash to support non-partisan absentee program; Howard University*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *10/20/2016*

Amount of Each Disbursement this Period: *200.00*

Category/Type: *002*

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

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

NON-FEDERAL CAMPAIGN CONTRIBUTION

**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 2 OF 3	
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)  
*Mid-Atlantic Progressive Leadership Committee*

**A.**

Full Name (Last, First, Middle Initial)  
*Smith, Wesley J.*

Date of Disbursement  
MM/DD/YYYY  
*10/23/2016*

Mailing Address  
*7304 Holly Ave.*

City  
*Takoma Park* State  
*MD* Zip Code  
*20912*

Purpose of Disbursement  
*party cash to support*

Candidate Name  
*partisan absentee program; Howard University*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) *▼*

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period  
*002*  
*150.00*

**B.**

Full Name (Last, First, Middle Initial)  
*Hinds, Carol*

Date of Disbursement  
MM/DD/YYYY  
*11/01/2016*

Mailing Address  
*7304 Holly Ave.*

City  
*Takoma Park* State  
*MD* Zip Code  
*20912*

Purpose of Disbursement  
*office rent*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) *▼*

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period  
*001*  
*230.00*

**C.**

Full Name (Last, First, Middle Initial)  
*Smith, Wesley J.*

Date of Disbursement  
MM/DD/YYYY  
*11/01/2016*

Mailing Address  
*7304 Holly Ave.*

City  
*Takoma Park* State  
*MD* Zip Code  
*20912*

Purpose of Disbursement  
*party cash*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) *▼*

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period  
*001*  
*110.00*

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

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

2016-11-03 10:01 AM

**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 3 OF 3

<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)  
Mid-Atlantic Progressive Leadership Committee

A. Full Name (Last, First, Middle Initial) Hinds, Carol

Mailing Address 7304 Holly Ave

City Takoma Park State MD Zip Code 20912

Purpose of Disbursement office rent

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement 11 / 16 / 2016

Amount of Each Disbursement this Period 230.00

B. Full Name (Last, First, Middle Initial) Smith, Wesley Jr

Mailing Address 7304 Holly Ave

City Takoma Park State MD Zip Code 20912

Purpose of Disbursement \_\_\_\_\_

Candidate Name petty cash

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement 11 / 20 / 2016

Amount of Each Disbursement this Period 80.00

C. Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Purpose of Disbursement \_\_\_\_\_

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement \_\_\_\_\_

Amount of Each Disbursement this Period \_\_\_\_\_

SUBTOTAL of Disbursements This Page (optional) \_\_\_\_\_

TOTAL This Period (last page this line number only) 1375.00

2016-11-01 10:00 AM



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<input type="checkbox"/> No Postmark	
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

  
 PREPARER

12/9/16  
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