

**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

BACKPAC

ADDRESS (number and street) ▼

1751 Potomac Greens Drive

☐ Check if different than previously reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00566562

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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 Katherine M Buchanan

Signature of Treasurer

Katherine M Buchanan

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

BACKPAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

|                                                                                                                                                                               | COLUMN A<br>This Period                                              | COLUMN B<br>Calendar Year-to-Date                                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span><br><span style="border: 1px solid black; padding: 2px;">2015</span> |                                                                      | <span style="border: 1px solid black; padding: 2px;">2250.00</span>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                                                                                     | <span style="border: 1px solid black; padding: 2px;">50391.51</span> |                                                                      |
| (c) Total Receipts (from Line 19) .....                                                                                                                                       | <span style="border: 1px solid black; padding: 2px;">27500.00</span> | <span style="border: 1px solid black; padding: 2px;">81000.00</span> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....                                                                           | <span style="border: 1px solid black; padding: 2px;">77891.51</span> | <span style="border: 1px solid black; padding: 2px;">83250.00</span> |
| 7. Total Disbursements (from Line 31) .....                                                                                                                                   | <span style="border: 1px solid black; padding: 2px;">53918.17</span> | <span style="border: 1px solid black; padding: 2px;">59276.66</span> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                                                                                     | <span style="border: 1px solid black; padding: 2px;">23973.34</span> | <span style="border: 1px solid black; padding: 2px;">23973.34</span> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....                                                               | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |                                                                      |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....                                                              | <span style="border: 1px solid black; padding: 2px;">0.00</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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**BACKPAC**

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 1 |   | 2 | 0 | 1 | 5 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 1 | 5 |

**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).....

17500.00

43500.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

17500.00

43500.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

10000.00

37500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

27500.00

81000.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

27500.00

81000.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

27500.00

81000.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>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 .....                                                 | 6218.17                       | 11576.66                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 6218.17                       | 11576.66                          |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 47700.00                      | 47700.00                          |
| 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)) ..      | 53918.17                      | 59276.66                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 53918.17                      | 59276.66                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                                          | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|----------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 27500.00                      | 81000.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 27500.00                      | 81000.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 6218.17                       | 11576.66                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 6218.17                       | 11576.66                          |

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 18  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**BACKPAC**

Full Name (Last, First, Middle Initial)

**A. Barbara J Fried**

Mailing Address 5924 Fried Farm Rd

City  
CrozetState  
VAZip Code  
22932-1605FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fried Companies, Inc.Occupation  
Business Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    | / | 10    | / | 2015        |

Transaction ID : VNJ1EE5N9C0

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Benjamin Klein**

Mailing Address 1401 Kenwood Ave

City  
AlexandriaState  
VAZip Code  
22302-2315FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heather Podesta + PartnersOccupation  
Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    | / | 20    | / | 2015        |

Transaction ID : VNJ1EE652S5

Amount of Each Receipt this Period

2500.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

**C. ACTBLUE**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    | / | 20    | / | 2015        |

Transaction ID : VNJ1EE652S5E

Amount of Each Receipt this Period

2500.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ►

7500.00

**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: PAGE 7 OF 18

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**BACKPAC**

Full Name (Last, First, Middle Initial)

**A. Christopher Smith**Mailing Address 500 Madison St  
Unit 405

City Alexandria State VA Zip Code 22314-1998

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Denton US, LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 04 / 2015

Transaction ID : VNJ1EE5FQX6

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. John M Toups**Mailing Address 7222 Farm Meadow Ct  
Apt 102

City Mc Lean State VA Zip Code 22101-5670

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 02 / 2015

Transaction ID : VNJ1EE3Y4P7

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

10000.00

17500.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BACKPAC**

Full Name (Last, First, Middle Initial)

## **A. UBS AMERICAS INC. POLITICAL ACTION COMMITTEE (UBS PAC)**

Mailing Address 400 Atlantic St

City

Stamford

State

CT

Zip Code

06901-3512

FEC ID number of contributing  
federal political committee.

C

C00012245

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 14 / 2015

**Transaction ID : VNJ1EE5WEA1**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. NEW DEMOCRAT COALITION POLITICAL ACTION COMMITTEE AKA NDC PAC**

Mailing Address 700 13th St NW  
Ste 600

City

Washington

State

DC

Zip Code

20005-3960

FEC ID number of contributing  
federal political committee.

C

C00409730

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 07 / 2015

**Transaction ID : VNJ1EE2NY47**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

10000.00

10000.00





**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 18

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**BACKPAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 1270

City

Newark

State

NJ

Zip Code

07101-1270

Purpose of Disbursement

Credit Card Payment

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 22 / 2015

Transaction ID : VNH26A01DK5

Amount of Each Disbursement this Period

3346.30

Full Name (Last, First, Middle Initial)

**B. Robert Morris Inn**

Mailing Address 314 N Morris St

City

Oxford

State

MD

Zip Code

21654-1019

Purpose of Disbursement

Catering/Events

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 22 / 2015

Transaction ID : VNH26A01DW6

Amount of Each Disbursement this Period

2111.58

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Robert Morris Inn**

Mailing Address 314 N Morris St

City

Oxford

State

MD

Zip Code

21654-1019

Purpose of Disbursement

Lodging

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 22 / 2015

Transaction ID : VNH26A01DP9

Amount of Each Disbursement this Period

382.60

[MEMO ITEM]

\*

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

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

3346.30

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

# BACKPAC

| Age Group | Percentage |
|-----------|------------|
| 18-24     | 10.0       |
| 25-34     | 10.0       |
| 35-44     | 10.0       |
| 45-54     | 10.0       |
| 55-64     | 10.0       |
| 65-74     | 10.0       |
| 75-84     | 10.0       |
| 85+       | 592.70     |

Category/  
Type

336.39

Category/  
Type

Three digital displays showing the date 10/05/2015 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '05' with 'D' indicators above it. The third display shows '2015' with 'Y' indicators above it.

336.39

Category/  
Type

929.09

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

# BACKPAC

Category/  
Type

300.00

M M / D D / Y Y Y Y  
12 21 2015

Category/  
TypeCategory/  
Type

300.00

6068.17

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 18

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" 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)

**BACKPAC**

Full Name (Last, First, Middle Initial)

**A. PETE AGUILAR FOR CONGRESS**

Mailing Address PO Box 10954

|                |       |            |
|----------------|-------|------------|
| City           | State | Zip Code   |
| San Bernardino | CA    | 92423-0954 |

Purpose of Disbursement  
Contribution

Candidate Name

**PETE AGUILAR**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 31

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 02    |   | 2015        |

**Transaction ID : VNH26A099X0**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. KUSTER FOR CONGRESS, INC.**

Mailing Address PO Box 1498

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Concord | NH    | 03302-1498 |

Purpose of Disbursement  
Contribution

Candidate Name

**ANN MCLANE KUSTER**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NH District: 02

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 02    |   | 2015        |

**Transaction ID : VNH26A09A11**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. DR. RAUL RUIZ FOR CONGRESS**

Mailing Address PO Box 3433

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Palm Desert | CA    | 92261-3433 |

Purpose of Disbursement  
Contribution

Candidate Name

**Dr. RAUL RUIZ**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 36

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 02    |   | 2015        |

**Transaction ID : VNH26A09A51**

Amount of Each Disbursement this Period

|         |
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| 1000.00 |
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

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| 3000.00 |
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 18

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" 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)

**BACKPAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF CHERI BUSTOS**Mailing Address 1050 17th St NW  
Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement  
Contribution

Candidate Name

**CHERI BUSTOS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 17

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 02    |   | 2015        |

**Transaction ID : VNH26A09A43**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
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Full Name (Last, First, Middle Initial)

**B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement  
Contribution

Candidate Name

**DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    |   | 01    |   | 2015        |

**Transaction ID : VNH26A0GWF3**

Amount of Each Disbursement this Period

|          |
|----------|
| 15000.00 |
|----------|

Full Name (Last, First, Middle Initial)

**C. SEAN PATRICK MALONEY FOR CONGRESS**

Mailing Address PO Box 270

City Newburgh State NY Zip Code 12551-0270

Purpose of Disbursement  
Contribution

Candidate Name

**SEAN PATRICK MALONEY**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 18

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 02    |   | 2015        |

**Transaction ID : VNH26A09A85**

Amount of Each Disbursement this Period

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| 1000.00 |
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

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|  | 21b |  | 22  | X | 23  |  | 24  |  | 25 |  | 26  |
|  | 27  |  | 28a |   | 28b |  | 28c |  | 29 |  | 30b |

# BACKPAC

## A. KYRSTEN SINEMA FOR CONGRESS

Date of Disbursement

Transaction ID : VNH26A099Z5

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Amount of Each Disbursement this Period

Category/  
Type

KYRSTEN SINEMA

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

1000.00

## B. KATHLEEN MATTHEWS FOR CONGRESS

Date of Disbursement

Transaction ID : VNH26A0QQ17

|  |  |  |  |
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Amount of Each Disbursement this Period

Category/  
Type

KATHLEEN MATTHEWS

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

2000.00

### C. GRAHAM FOR CONGRESS

Date of Disbursement

Transaction ID : VNH26A09A37

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Amount of Each Disbursement this Period

Category/  
Type

GWEN GRAHAM

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

1000.00

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

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

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

4000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 18

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" 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)

**BACKPAC**

Full Name (Last, First, Middle Initial)

**A. Ami Bera for Congress**

Mailing Address PO Box 582496

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Elk Grove | CA    | 95758-0042 |

Purpose of Disbursement  
Contribution

Candidate Name

**Amerish Bera**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 07

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 02    |   | 2015        |

**Transaction ID : VNH26A09A77**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. VAN HOLLEN FOR SENATE**Mailing Address 10605 Concord St  
Ste 202

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Kensington | MD    | 20895-2526 |

Purpose of Disbursement  
Contribution

Candidate Name

**CHRIS VAN HOLLEN**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 03

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    |   | 11    |   | 2015        |

**Transaction ID : VNH26A0GWJ7**

Amount of Each Disbursement this Period

|         |
|---------|
| 1700.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. PROGRESSIVE ACTION PAC**

Mailing Address PO Box 75357

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Washington | DC    | 20013-0357 |

Purpose of Disbursement  
Contribution

Candidate Name

**PROGRESSIVE ACTION PAC**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    |   | 17    |   | 2015        |

**Transaction ID : VNH26A0HEZ7**

Amount of Each Disbursement this Period

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| 1000.00 |
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 18

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" 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)

**BACKPAC**

Full Name (Last, First, Middle Initial)

**A. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 02    |   | 2015        |

Mailing Address 40138 Sawmill Rd  
PO BOX 252

City Emily State MN Zip Code 56447-2031

Purpose of Disbursement  
Contribution

Candidate Name

**RICHARD MICHAEL NOLAN**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President  
State: MN District: 08Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼**Transaction ID : VNH26A099Y8**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. JULIA BROWNLEY FOR CONGRESS**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 02    |   | 2015        |

Mailing Address 728 W Edna Pl

City Covina State CA Zip Code 91722-3222

Purpose of Disbursement  
Contribution

Candidate Name

**JULIA BROWNLEY**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President  
State: CA District: 26Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼**Transaction ID : VNH26A09A29**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. Brad Ashford for Congress**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 02    |   | 2015        |

Mailing Address PO Box 24023

City Omaha State NE Zip Code 68124-0023

Purpose of Disbursement  
Contribution

Candidate Name

**Brad Ashford**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President  
State: NE District: 02Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼**Transaction ID : VNH26A09A69**

Amount of Each Disbursement this Period

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| 1000.00 |
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

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