

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.

For Our Future

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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 in the State of

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

Election on in the State of

5. Covering Period 11 / 29 / 2016 through 12 / 31 / 2016

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

Bidel-Niyat, Shirin, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Bidel-Niyat, Shirin, , ,* [Electronically Filed] Date 01 / 31 / 2017

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

For Our Future

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="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2099993.50"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="229429.11"/>	<input type="text" value="48890547.03"/>
(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="2329422.61"/>	<input type="text" value="48890547.03"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1718754.35"/>	<input type="text" value="48279878.77"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="610668.26"/>	<input type="text" value="610668.26"/>
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="189099.28"/>	

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

For Our Future

Report Covering the Period: From: MM / DD / YYYY 11 / 29 / 2016 To: MM / DD / YYYY 12 / 31 / 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).....	126500.00	19867879.46
(ii) Unitemized	300.00	300.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	126800.00	19868179.46
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	65000.00	27778591.67
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	191800.00	47646771.13
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).....	4088.67	870235.46
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	33540.44	373540.44
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)).....▶	229429.11	48890547.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	229429.11	48890547.03

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	1433464.78	16949687.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1433464.78	16949687.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4153.00	4869956.73
24. Independent Expenditures (use Schedule E)	281011.57	8400640.96
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).....	125.00	18059593.62
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)) ..	1718754.35	48279878.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1718754.35	48279878.77

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)	191800.00	47646771.13
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	191800.00	47646771.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1433464.78	16949687.46
37. Offsets to Operating Expenditures (from Line 15, page 3).....	4088.67	870235.46
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1429376.11	16079452.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 53
	<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)
For Our Future

A. AFSCME Special Account

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

Mailing Address 1625 L St NW

City Washington	State DC	Zip Code 20036-5665
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5517979.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2016

Transaction ID : VSH7WE9BGS3

Amount of Each Receipt this Period
16500.00

Memo Item

B. Educators For Washoe Schools

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

Mailing Address 3511 E Harmon Ave

City Las Vegas	State NV	Zip Code 89121-5028
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2016

Transaction ID : VSH7WE9BH16

Amount of Each Receipt this Period
25000.00

Memo Item

C. Holland And Knight LLP

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

Mailing Address 524 Grand Regency Blvd

City Brandon	State FL	Zip Code 33510-3931
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
85000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2016

Transaction ID : VSH7WE9BGZ1

Amount of Each Receipt this Period
85000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	126500.00
TOTAL This Period (last page this line number only).....	126500.00

**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 7 OF 53
<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)
For Our Future

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sierra Club Independent Action

Mailing Address 85 2Nd St
FI 2

City San Francisco State CA Zip Code 94105-3456

FEC ID number of contributing federal political committee. **C** C00483693

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
65000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2016

Transaction ID : VSH7WE9BGX5

Amount of Each Receipt this Period
65000.00

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 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 Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	65000.00
TOTAL This Period (last page this line number only).....	65000.00

**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 53
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
For Our Future

A. AKG Properties
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1425 S Summerlin Ave

City Orlando	State FL	Zip Code 32806-2249
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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 ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2016

Transaction ID : VSH7WE9BGY3

Amount of Each Receipt this Period
2500.00

Memo Item

Return of Security Deposit

B. Amazon
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 345 Boren Ave N

City Seattle	State WA	Zip Code 98109-5306
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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 ▼
3311.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2016

Transaction ID : VSH7WE65E49

Amount of Each Receipt this Period
44.90

Memo Item

Refund

C. Amazon
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 345 Boren Ave N

City Seattle	State WA	Zip Code 98109-5306
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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 ▼
3311.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2016

Transaction ID : VSH7WE9BGH0

Amount of Each Receipt this Period
62.93

Memo Item

Refund

SUBTOTAL of Receipts This Page (optional).....	2607.83
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 9 OF 53
<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)
For Our Future

A. Amazon

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

Mailing Address 345 Boren Ave N

City Seattle	State WA	Zip Code 98109-5306
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3311.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2016

Transaction ID : VSH7WE9BGJ8

Amount of Each Receipt this Period
15.99

Memo Item

Refund

B. Amazon

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

Mailing Address 345 Boren Ave N

City Seattle	State WA	Zip Code 98109-5306
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3311.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2016

Transaction ID : VSH7WE9BGK6

Amount of Each Receipt this Period
15.99

Memo Item

Refund

C. Amazon

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

Mailing Address 345 Boren Ave N

City Seattle	State WA	Zip Code 98109-5306
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3311.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2016

Transaction ID : VSH7WE9BGM4

Amount of Each Receipt this Period
95.94

Memo Item

Refund

SUBTOTAL of Receipts This Page (optional).....	127.92
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 10 OF 53
<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)
For Our Future

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Amazon		Date of Receipt
Mailing Address 345 Boren Ave N		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2016"/>
City Seattle	State WA	Zip Code 98109-5306
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VSH7WE9BGN2
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="127.92"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="3311.07"/>	Refund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. James F. Floyd, Jr.		Date of Receipt
Mailing Address 3116 1St Ave N		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2016"/>
City Saint Petersburg	State FL	Zip Code 33713-8609
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VSH7WE9BH09
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	Return of Security Deposit

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Oshkosh Martial Education Center		Date of Receipt
Mailing Address 208 State St		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2016"/>
City Oshkosh	State WI	Zip Code 54901-4800
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VSH7WE9BGV9
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="725.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="725.00"/>	Return of Security Deposit

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="1352.92"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="4088.67"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 53
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
For Our Future

A. Advance North Carolina

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

Mailing Address 401 N Mangum St

City Durham	State NC	Zip Code 27701-3310
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
33000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2016

Transaction ID : VSH7WE9BGW7

Amount of Each Receipt this Period
33000.00

Memo Item

Refund

B. Amalgamated Bank

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

Mailing Address 1825 K St NW

City Washington	State DC	Zip Code 20006-1245
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : VSH7WE9BJG6

Amount of Each Receipt this Period
97.81

Memo Item

Interest

C. Amalgamated Bank

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

Mailing Address 1825 K St NW

City Washington	State DC	Zip Code 20006-1245
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
540.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : VSH7WE9BGP0

Amount of Each Receipt this Period
142.63

Memo Item

Interest

SUBTOTAL of Receipts This Page (optional).....	33240.44
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 12 OF 53
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
For Our Future

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ricci, Tiffany, , ,

Mailing Address 1514 Hamilton St NW

City Washington State DC Zip Code 20011-3858

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 ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 02 / 2016

Transaction ID : VSH7WE9BGT1

Amount of Each Receipt this Period
 300.00

Memo Item

Purchase of Office Equipment

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).....	300.00
TOTAL This Period (last page this line number only).....	33540.44

**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)
For Our Future

A. AFSCME Council 32

Full Name (Last, First, Middle Initial)

Mailing Address 8033 Excelsior Dr

City Madison State WI Zip Code 53717-2900

Purpose of Disbursement Telephone Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYC

Amount of Each Disbursement this Period: 186.75

Memo Item

B. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 20 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYC

Amount of Each Disbursement this Period: 474.90

Memo Item

C. Amazon

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 09 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYC

Amount of Each Disbursement this Period: 29.09

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 690.74

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)
For Our Future

Full Name (Last, First, Middle Initial) A. Asana			Date of Disbursement MM / DD / YYYY 12 / 28 / 2016	
Mailing Address 1550 Bryant St			FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VYC	
City San Francisco	State CA	Zip Code 94103-4832	Amount of Each Disbursement this Period [REDACTED] 500.00	
Purpose of Disbursement Project Management Services		Category/Type 001		
Candidate Name		Memo Item <input type="checkbox"/>		
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:				

Full Name (Last, First, Middle Initial) B. AT&T			Date of Disbursement MM / DD / YYYY 12 / 06 / 2016	
Mailing Address PO Box 6463			FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VYC	
City Carol Stream	State IL	Zip Code 60197-6463	Amount of Each Disbursement this Period [REDACTED] 54.44	
Purpose of Disbursement Telecommunications Services		Category/Type 001		
Candidate Name		Memo Item <input type="checkbox"/>		
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:				

Full Name (Last, First, Middle Initial) C. AT&T			Date of Disbursement MM / DD / YYYY 12 / 12 / 2016	
Mailing Address PO Box 6463			FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VYC	
City Carol Stream	State IL	Zip Code 60197-6463	Amount of Each Disbursement this Period [REDACTED] 143.77	
Purpose of Disbursement Telecommunications Services		Category/Type 001		
Candidate Name		Memo Item <input type="checkbox"/>		
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:				

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 698.21
TOTAL This Period (last page this line number only).....▶	[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)
For Our Future

A. Augustus Strategies Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 20165 N 67Th Ave
Ste 122A

City Glendale State AZ Zip Code 85308-7155

Purpose of Disbursement
Voter Outreach Calls - No Express Advocacy

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 21 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYC

Amount of Each Disbursement this Period: 527.25

Memo Item

B. Battle Born Progress

Full Name (Last, First, Middle Initial)

Mailing Address 2657 Windmill Pkwy
619

City Henderson State NV Zip Code 89074-3384

Purpose of Disbursement
Communications Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 30 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VKCI

Amount of Each Disbursement this Period: 5000.00

Memo Item

C. Bauman, Brad, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1030 15Th St NW
Ste 180

City Washington State DC Zip Code 20005-1503

Purpose of Disbursement
Reimbursement - Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 09 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYC

Amount of Each Disbursement this Period: 1150.89

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6678.14

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)
For Our Future

Full Name (Last, First, Middle Initial) A. Avis		Date of Disbursement MM / DD / YYYY 12 / 09 / 2016
Mailing Address 7135 Gilespie St		FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VYC Amount of Each Disbursement this Period 1150.89
City Las Vegas	State NV	Zip Code 89119-4267
Purpose of Disbursement Travel	Category/Type 002	
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) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. BlueLabs, LLC		Date of Disbursement MM / DD / YYYY 12 / 19 / 2016
Mailing Address 700 14Th St NW Frnt 2		FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VYC Amount of Each Disbursement this Period 5000.00
City Washington	State DC	Zip Code 20005-2016
Purpose of Disbursement Research Services	Category/Type 001	
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) ▼	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Bright House Networks		Date of Disbursement MM / DD / YYYY 12 / 22 / 2016
Mailing Address PO Box 31710		FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VYD Amount of Each Disbursement this Period 141.08
City Tampa	State FL	Zip Code 33631-3710
Purpose of Disbursement Utilities	Category/Type 001	
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) ▼	
<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	5141.08
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)
For Our Future

Full Name (Last, First, Middle Initial)

A. Brilliant Corners Research And Strategies

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		21		2016

Mailing Address 1250 I St NW
Ste 200

City Washington State DC Zip Code 20005-5994

Purpose of Disbursement
Polling Services

001
Category/ Type

FEC Identification Number

C
Transaction ID : VSG8M9VYD
Amount of Each Disbursement this Period
51000.00

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

B. By Beck LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		21		2016

Mailing Address 3100 Mill St
Ste. 204

City Reno State NV Zip Code 89502-2259

Purpose of Disbursement
Rent

001
Category/ Type

FEC Identification Number

C
Transaction ID : VSG8M9VYD
Amount of Each Disbursement this Period
1095.00

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

C. By Beck LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		21		2016

Mailing Address 3100 Mill St
Ste. 204

City Reno State NV Zip Code 89502-2259

Purpose of Disbursement
Rent

001
Category/ Type

FEC Identification Number

C
Transaction ID : VSG8M9VYD
Amount of Each Disbursement this Period
1095.00

Candidate Name

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

Memo Item

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

53190.00

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"/> 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)
For Our Future

Full Name (Last, First, Middle Initial) A. Carmona-Paredes, Johali, , ,			Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 8321 W Sahara Ave Apt 1119			FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VMW	
City Las Vegas	State NV	Zip Code 89117-1879	Amount of Each Disbursement this Period [REDACTED] 470.26	
Purpose of Disbursement Reimbursement - Travel, Food/Beverage		Category/Type 001	Memo Item <input type="checkbox"/>	
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:				

Full Name (Last, First, Middle Initial) B. Uber			Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 1455 Market St Ste 400			FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VMW	
City San Francisco	State CA	Zip Code 94103-1355	Amount of Each Disbursement this Period [REDACTED] 428.54	
Purpose of Disbursement Travel		Category/Type 002	Memo Item <input checked="" type="checkbox"/>	
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:				

Full Name (Last, First, Middle Initial) C. Christ And Saint Ambrose Episcopal Church			Date of Disbursement MM / DD / YYYY 12 / 02 / 2016	
Mailing Address 3552 N 6Th St			FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VYD	
City Philadelphia	State PA	Zip Code 19140-4506	Amount of Each Disbursement this Period [REDACTED] 300.00	
Purpose of Disbursement Room Rental for Event		Category/Type 007	Memo Item <input type="checkbox"/>	
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:				

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

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

770.26
[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)
For Our Future

A. Cox Communications

Full Name (Last, First, Middle Initial)

Mailing Address 6205B Peachtree Dunwoody Rd

City Atlanta State GA Zip Code 30328-4524

Purpose of Disbursement Telecommunications Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYD

Amount of Each Disbursement this Period: 300.47

Memo Item

B. Data Farm Consulting, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 12932 W Glacier Dr

City Evansville State WI Zip Code 53536-9389

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 07 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYD

Amount of Each Disbursement this Period: 540.20

Memo Item

C. Dhir, Nimit, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2140 E Pebble Rd Ste 260

City Las Vegas State NV Zip Code 89123-3237

Purpose of Disbursement Reimbursement - Mileage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 09 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYD

Amount of Each Disbursement this Period: 150.66

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 991.33

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)
For Our Future

A. Dhir, Nimit, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2140 E Pebble Rd
Ste 260

City Las Vegas State NV Zip Code 89123-3237

Purpose of Disbursement Field Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 09 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYD'

Amount of Each Disbursement this Period: 6000.00

Memo Item

B. Evans & Katz, LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 75357

City Washington State DC Zip Code 20013-0357

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYDI

Amount of Each Disbursement this Period: 18660.11

Memo Item

C. For Our Future Action Fund

Full Name (Last, First, Middle Initial)

Mailing Address 888 16Th St NW
Ste 650

City Washington State DC Zip Code 20006-4112

Purpose of Disbursement Administrative Staff Salaries and Benefits

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYF

Amount of Each Disbursement this Period: 455656.61

Memo Item

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

480316.72

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)
For Our Future

Full Name (Last, First, Middle Initial)
A. For Our Future Action Fund

Mailing Address 888 16Th St NW
Ste 650

City Washington State DC Zip Code 20006-4112

Purpose of Disbursement Administrative Staff Salaries and Benefits

Candidate Name

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

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYF

Amount of Each Disbursement this Period: 544590.28

Memo Item

Full Name (Last, First, Middle Initial)
B. Gilbert & Wolfand, PC

Mailing Address 2201 Wisconsin Ave NW
NW

City Washington State DC Zip Code 20007-4105

Purpose of Disbursement Accounting Services

Candidate Name

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

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYDI

Amount of Each Disbursement this Period: 10110.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Grassroots Campaigns, Inc.

Mailing Address PO Box 120557

City Boston State MA Zip Code 02112-0557

Purpose of Disbursement Administrative Staff Salaries and Benefits

Candidate Name

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

Date of Disbursement: 11 / 30 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYF

Amount of Each Disbursement this Period: 95370.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 650070.28

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)
For Our Future

Full Name (Last, First, Middle Initial) A. Hirestrategy		Date of Disbursement MM / DD / YYYY 12 / 09 / 2016	
Mailing Address 7076 Solutions Ctr			
City Chicago	State IL	Zip Code 60677-7000	
Purpose of Disbursement Payroll - Temp Services		<input type="checkbox"/> 001	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : VSG8M9VYDI
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) ▼		Amount of Each Disbursement this Period 665.00
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Hirestrategy		Date of Disbursement MM / DD / YYYY 12 / 19 / 2016	
Mailing Address 7076 Solutions Ctr			
City Chicago	State IL	Zip Code 60677-7000	
Purpose of Disbursement Payroll - Temp Services		<input type="checkbox"/> 001	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : VSG8M9VYDI
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) ▼		Amount of Each Disbursement this Period 755.00
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Hirestrategy		Date of Disbursement MM / DD / YYYY 12 / 22 / 2016	
Mailing Address 7076 Solutions Ctr			
City Chicago	State IL	Zip Code 60677-7000	
Purpose of Disbursement Payroll - Temp Services		<input type="checkbox"/> 001	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : VSG8M9VYDI
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) ▼		Amount of Each Disbursement this Period 485.00
State: District:			<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1905.00
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"/> 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)
For Our Future

Full Name (Last, First, Middle Initial)
A. Hotels.Com

Mailing Address 5400 Lbj Fwy
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 13 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYD

Amount of Each Disbursement this Period: 308.70

Memo Item

Full Name (Last, First, Middle Initial)
B. Image Plus Graphics, Inc.

Mailing Address 1440 NE 131St St

City North Miami State FL Zip Code 33161-4424

Purpose of Disbursement Printing - Pledge Cards, No Express Advocacy

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 29 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VMVI

Amount of Each Disbursement this Period: 2049.05

Memo Item

Full Name (Last, First, Middle Initial)
C. Image Plus Graphics, Inc.

Mailing Address 1440 NE 131St St

City North Miami State FL Zip Code 33161-4424

Purpose of Disbursement Printing - Banners, ID Cards, Mailing Labels - No Express Advocacy

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 29 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VMV

Amount of Each Disbursement this Period: 14211.72

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 16569.47

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)
For Our Future

A. Image Plus Graphics, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1440 NE 131St St

City North Miami State FL Zip Code 33161-4424

Purpose of Disbursement Printing - Flyers, No Express Advocacy

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 11 / 29 / 2016

FEC Identification Number C

Transaction ID : VSG8M9VMV

Amount of Each Disbursement this Period 556.40

Memo Item

B. Mercury Public Affairs

Full Name (Last, First, Middle Initial)

Mailing Address 437 Madison Ave

City New York State NY Zip Code 10022-7001

Purpose of Disbursement Communications Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 12 / 07 / 2016

FEC Identification Number C

Transaction ID : VSG8M9VYDI

Amount of Each Disbursement this Period 9250.00

Memo Item

C. Mercury Public Affairs

Full Name (Last, First, Middle Initial)

Mailing Address 437 Madison Ave

City New York State NY Zip Code 10022-7001

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 12 / 07 / 2016

FEC Identification Number C

Transaction ID : VSG8M9VYD

Amount of Each Disbursement this Period 2513.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 12320.33

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)
For Our Future

Full Name (Last, First, Middle Initial)

A. Mosaic Express

Mailing Address 1920 L St NW
Frnt 3

City
Washington

State
DC

Zip Code
20036-5000

Purpose of Disbursement
Printing - Stickers, No Express Advocacy

004

Category/
Type

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
11			29			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9VMY

Amount of Each Disbursement this Period

[REDACTED] 479.60

Memo Item

Full Name (Last, First, Middle Initial)

B. New Partners Consulting, Inc.

Mailing Address 1250 I St NW
Ste 200

City
Washington

State
DC

Zip Code
20005-5994

Purpose of Disbursement
Communications Consulting Services

001

Category/
Type

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
12			02			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9VYD

Amount of Each Disbursement this Period

[REDACTED] 11428.50

Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VAN, Inc.

Mailing Address 1445 New York Ave NW
Ste 200

City
Washington

State
DC

Zip Code
20005-2158

Purpose of Disbursement
Software and Support

001

Category/
Type

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
12			19			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9VYD

Amount of Each Disbursement this Period

[REDACTED] 892.61

Memo Item

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

[REDACTED] 12800.71

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

[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)
For Our Future

Full Name (Last, First, Middle Initial) A. NV Energy		Date of Disbursement MM / DD / YYYY 12 / 14 / 2016	
Mailing Address PO Box 98910		FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VYD Amount of Each Disbursement this Period [REDACTED] 455.58	
City Las Vegas	State NV	Zip Code 89193-8910	Category/ Type 001
Purpose of Disbursement Utilities		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. NV Energy		Date of Disbursement MM / DD / YYYY 12 / 22 / 2016	
Mailing Address PO Box 98910		FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VYD Amount of Each Disbursement this Period [REDACTED] 95.99	
City Las Vegas	State NV	Zip Code 89193-8910	Category/ Type 001
Purpose of Disbursement Utilities		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Parra, Jose, , ,		Date of Disbursement MM / DD / YYYY 12 / 02 / 2016	
Mailing Address 888 16Th St NW		FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VYD Amount of Each Disbursement this Period [REDACTED] 76.46	
City Washington	State DC	Zip Code 20006-4103	Category/ Type 002
Purpose of Disbursement Reimb.- Travel, Food/Beverage		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 628.03
TOTAL This Period (last page this line number only).....▶	[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)
For Our Future

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
Ste 400

City San Francisco State CA Zip Code 94103-1355

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
12			02			2016			

FEC Identification Number

C [REDACTED]
Transaction ID : VSG8M9VYD
Amount of Each Disbursement this Period
[REDACTED] 20.30

Memo Item

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1175 John St

City West Henrietta State NY Zip Code 14586-9102

Purpose of Disbursement
Administrative Staff Salaries and Benefits

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
12			01			2016			

FEC Identification Number

C [REDACTED]
Transaction ID : VSG8M9VYD
Amount of Each Disbursement this Period
[REDACTED] 2759.37

Memo Item

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1175 John St

City West Henrietta State NY Zip Code 14586-9102

Purpose of Disbursement
Administrative Staff Salaries and Benefits

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
12			01			2016			

FEC Identification Number

C [REDACTED]
Transaction ID : VSG8M9VYE
Amount of Each Disbursement this Period
[REDACTED] 994.51

Memo Item

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

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

[REDACTED]	3753.88
[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)
For Our Future

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1175 John St

City West Henrietta State NY Zip Code 14586-9102

Purpose of Disbursement
Administrative Staff Salaries and Benefits

Candidate Name

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

Category/
Type

Date of Disbursement
MM / DD / YYYY
12 / 02 / 2016

FEC Identification Number

Transaction ID : VSG8M9VYE
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1175 John St

City West Henrietta State NY Zip Code 14586-9102

Purpose of Disbursement
Payroll Services

Candidate Name

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

Category/
Type

Date of Disbursement
MM / DD / YYYY
12 / 07 / 2016

FEC Identification Number

Transaction ID : VSG8M9VYE
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1175 John St

City West Henrietta State NY Zip Code 14586-9102

Purpose of Disbursement
Administrative Staff Salaries and Benefits

Candidate Name

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

Category/
Type

Date of Disbursement
MM / DD / YYYY
12 / 15 / 2016

FEC Identification Number

Transaction ID : VSG8M9VYE
Amount of Each Disbursement this Period

Memo Item

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

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)
For Our Future

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement MM / DD / YYYY 12 / 15 / 2016
Mailing Address 1175 John St		FEC Identification Number C Transaction ID : VSG8M9VYE Amount of Each Disbursement this Period 570.81
City West Henrietta	State NY	
Zip Code 14586-9102		Memo Item <input type="checkbox"/>
Purpose of Disbursement Administrative Staff Salaries and Benefits		
Candidate Name		Category/Type 001
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:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 12 / 21 / 2016
Mailing Address 1175 John St		FEC Identification Number C Transaction ID : VSG8M9VYE Amount of Each Disbursement this Period 100.00
City West Henrietta	State NY	
Zip Code 14586-9102		Memo Item <input type="checkbox"/>
Purpose of Disbursement Payroll Services		
Candidate Name		Category/Type 001
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:		

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 12 / 22 / 2016
Mailing Address 1175 John St		FEC Identification Number C Transaction ID : VSG8M9VYE Amount of Each Disbursement this Period 623.45
City West Henrietta	State NY	
Zip Code 14586-9102		Memo Item <input type="checkbox"/>
Purpose of Disbursement Administrative Staff Salaries and Benefits		
Candidate Name		Category/Type 001
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	1294.26
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)
For Our Future

Full Name (Last, First, Middle Initial) A. PDQ Printing Of Las Vegas		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 3820 S Valley View Blvd		FEC Identification Number C [REDACTED]
City Las Vegas	State NV	Zip Code 89103-2904
Purpose of Disbursement Printing - T-Shirts, No Express Advocacy		Category/Type 004
Candidate Name		Transaction ID : VSG8M9VN1' Amount of Each Disbursement this Period 1633.74
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Pearson, Glenn, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address 1392 Haines Ave		FEC Identification Number C [REDACTED]
City Columbus	State OH	Zip Code 43212-3419
Purpose of Disbursement Reimbursement - Travel, Mileage		Category/Type 002
Candidate Name		Transaction ID : VSG8M9VMV' Amount of Each Disbursement this Period 796.41
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Radisson Hotel Madison		Date of Disbursement MM / DD / YYYY 12 / 19 / 2016
Mailing Address 517 Grand Canyon Dr		FEC Identification Number C [REDACTED]
City Madison	State WI	Zip Code 53719-1032
Purpose of Disbursement Lodging		Category/Type 002
Candidate Name		Transaction ID : VSG8M9VYE' Amount of Each Disbursement this Period 187.78
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

2617.93

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)

For Our Future

Full Name (Last, First, Middle Initial)

A. Radisson Hotel Madison

Mailing Address 517 Grand Canyon Dr

City
Madison

State
WI

Zip Code
53719-1032

Purpose of Disbursement
Lodging

002

Category/
Type

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
12			19			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9VYE
Amount of Each Disbursement this Period

[REDACTED] 93.89

Memo Item

Full Name (Last, First, Middle Initial)

B. Radisson Hotel Madison

Mailing Address 517 Grand Canyon Dr

City
Madison

State
WI

Zip Code
53719-1032

Purpose of Disbursement
Lodging

002

Category/
Type

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
12			19			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9VYE
Amount of Each Disbursement this Period

[REDACTED] 93.89

Memo Item

Full Name (Last, First, Middle Initial)

C. ReadyRefresh By Nestle

Mailing Address 900 Long Ridge Rd
Bldg 2

City
Stamford

State
CT

Zip Code
06902-1140

Purpose of Disbursement
Water for Office

001

Category/
Type

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
12			05			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9VYE
Amount of Each Disbursement this Period

[REDACTED] 35.44

Memo Item

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

[REDACTED] 223.22

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

[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)
For Our Future

A. Shapland, Pearl, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3518 Golf Rd

City Eau Claire State WI Zip Code 54701-8018

Purpose of Disbursement Reimbursement - Travel, Lodging, Food/Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VN1

Amount of Each Disbursement this Period: 568.27

Memo Item

B. Smoot Tewes Group

Full Name (Last, First, Middle Initial)

Mailing Address 818 Connecticut Ave NW Ste 200

City Washington State DC Zip Code 20006-2742

Purpose of Disbursement PAC Management Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 07 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYEI

Amount of Each Disbursement this Period: 25016.92

Memo Item

C. Smoot Tewes Group

Full Name (Last, First, Middle Initial)

Mailing Address 818 Connecticut Ave NW Ste 200

City Washington State DC Zip Code 20006-2742

Purpose of Disbursement PAC Management Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 29 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYE

Amount of Each Disbursement this Period: 35129.27

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60714.46

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)
For Our Future

Full Name (Last, First, Middle Initial)

A. TDS

Mailing Address PO Box 94510

City
Palatine

State
IL

Zip Code
60094-4510

Purpose of Disbursement
Telecommunications Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : VSG8M9VYEI
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. The Hatcher Group

Mailing Address 4340 E West Hwy
Ste 912

City
Bethesda

State
MD

Zip Code
20814-4447

Purpose of Disbursement
Design and Editing Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : VSG8M9VYEI
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Time Warner Cable

Mailing Address 60 Columbus Cir

City
New York

State
NY

Zip Code
10023-5802

Purpose of Disbursement
Telecommunications Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : VSG8M9VKR
Amount of Each Disbursement this Period

Memo Item

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

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)
For Our Future

A. Trister, Ross, Schadler & Gold, PLLC

Full Name (Last, First, Middle Initial)

Mailing Address 1666 Connecticut Ave NW
Ste 5

City Washington State DC Zip Code 20009-1039

Purpose of Disbursement Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 19 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYEI

Amount of Each Disbursement this Period: 50309.41

Memo Item

B. Trister, Ross, Schadler & Gold, PLLC

Full Name (Last, First, Middle Initial)

Mailing Address 1666 Connecticut Ave NW
Ste 5

City Washington State DC Zip Code 20009-1039

Purpose of Disbursement Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 21 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYEI

Amount of Each Disbursement this Period: 22634.90

Memo Item

C. Utrecht, Kleinfeld, Fiori, Partners

Full Name (Last, First, Middle Initial)

Mailing Address 1900 M St NW
NW Ste. 500

City Washington State DC Zip Code 20036-3508

Purpose of Disbursement Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 19 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VYEI

Amount of Each Disbursement this Period: 175.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 73119.31

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)
For Our Future

Full Name (Last, First, Middle Initial) A. Webb, Antonia, , ,		Date of Disbursement MM / DD / YYYY 12 / 21 / 2016
Mailing Address 64 E Kelso Rd		FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VYC. Amount of Each Disbursement this Period [REDACTED] 102.19
City Columbus	State OH	Zip Code 43202-2312
Purpose of Disbursement Reimbursement - Food/Beverage		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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:		

Full Name (Last, First, Middle Initial) B. Zepecki Communications, LLC		Date of Disbursement MM / DD / YYYY 12 / 02 / 2016
Mailing Address 1141 N Old World 3Rd St Apt 1810		FEC Identification Number C [REDACTED] Transaction ID : VSG8M9VYEI Amount of Each Disbursement this Period [REDACTED] 4000.00
City Milwaukee	State WI	Zip Code 53203-1136
Purpose of Disbursement Communications Consulting Services		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [REDACTED] Amount of Each Disbursement this Period [REDACTED]
City	State	Zip Code
Purpose of Disbursement		Category/Type
Candidate Name		Memo Item <input type="checkbox"/>
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:		

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

[REDACTED] 4102.19

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

[REDACTED] 1432922.14

**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)
For Our Future

Full Name (Last, First, Middle Initial) A. NCLR Action PAC		Date of Disbursement MM / DD / YYYY 12 / 15 / 2016
Mailing Address 1126 16Th St NW Ste 600		FEC Identification Number C 00626390 Transaction ID : VSG8M9VYD
City Washington	State DC	Zip Code 20036-4845
Purpose of Disbursement Contribution		Category/Type 011
Candidate Name NCLR Action PAC		Amount of Each Disbursement this Period 4153.00
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/Type
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/Type
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4153.00
TOTAL This Period (last page this line number only).....▶	4153.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
For Our Future

A. Institute For Asian Pacific American Leadership & Advancement

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 815 16Th St NW
NW

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		3	0		2	0	1	6		

City Washington State DC Zip Code 20006-4101

FEC Identification Number

Purpose of Disbursement
Donation

C

Candidate Name

012
Category/
Type

Transaction ID : VSG8M9VMV

Amount of Each Disbursement this Period

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

125.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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

Memo Item

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

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

125.00

125.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 40 OF 53
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
For Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AFSCME Council 32			Nature of Debt (Purpose): Postage
Mailing Address 8033 Excelsior Dr			
City Madison	State WI	Zip Code 53717-2900	

Outstanding Balance Beginning This Period <input type="text" value="1795.88"/>	Transaction ID : VSEA49H8MR8	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1795.88"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AFSCME Special Account			Nature of Debt (Purpose): Robocalls
Mailing Address 1625 L St NW			
City Washington	State DC	Zip Code 20036-5665	

Outstanding Balance Beginning This Period <input type="text" value="25000.00"/>	Transaction ID : VSEA49H8MS6	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="25000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Centaur North Strategies			Nature of Debt (Purpose): Printing - Canvassing Literature
Mailing Address PO Box 1474			
City Whittier	State CA	Zip Code 90609-1474	

Outstanding Balance Beginning This Period <input type="text" value="9500.00"/>	Transaction ID : VSEA49H8MT4	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9500.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="36295.88"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 41 OF 53
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
For Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fedex Office			Nature of Debt (Purpose): Printing - Canvassing Literature
Mailing Address 1612 K St NW			
City Washington	State DC	Zip Code 20006-2802	

Outstanding Balance Beginning This Period 44.66	Transaction ID : VSEA49H8MV2	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 44.66

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fieldworks LLC			Nature of Debt (Purpose): Printing - Canvassing Literature
Mailing Address PO Box 9897			
City Washington	State DC	Zip Code 20016-8897	

Outstanding Balance Beginning This Period 388.18	Transaction ID : VSEA49H8GJ2	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 388.18

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor For Our Future Action Fund			Nature of Debt (Purpose): Canvassing Services
Mailing Address 888 16Th St NW Ste 650			
City Washington	State DC	Zip Code 20006-4112	

Outstanding Balance Beginning This Period 197011.57	Transaction ID : VSEA49H7E98	
Amount Incurred This Period 0.00	Payment This Period 197011.57	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	432.84
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 42 OF 53
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
For Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HSG Campaigns			Nature of Debt (Purpose): Advertising Production and Design
Mailing Address 1201 W 5Th St Ste F105			
City Los Angeles	State CA	Zip Code 90017-5120	

Outstanding Balance Beginning This Period 10400.00	Transaction ID : VSEA49H8GK0	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Image Plus Graphics, Inc.			Nature of Debt (Purpose): Printing - Stickers
Mailing Address 1440 NE 131St St			
City North Miami	State FL	Zip Code 33161-4424	

Outstanding Balance Beginning This Period 3462.00	Transaction ID : VSEA49H8GM8	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3462.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Las Vegas Chinese Daily News			Nature of Debt (Purpose): Newspaper Advertisement
Mailing Address 4215 Spring Mountain Rd Ste B206A			
City Las Vegas	State NV	Zip Code 89102-8747	

Outstanding Balance Beginning This Period 2700.00	Transaction ID : VSEA49H8MX6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2700.00

1) SUBTOTALS This Period This Page (optional)..... ▶	16562.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 43 OF 53
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
For Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lee, Mark, , ,			Nature of Debt (Purpose): Advertising Production and Design
Mailing Address 8253 Rush St			
City Rosemead	State CA	Zip Code 91770-3614	

Outstanding Balance Beginning This Period	Transaction ID : VSEA49H8GN5	
<input type="text" value="3000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="3000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mack-Sumner Communications, LLC			Nature of Debt (Purpose): Printing - Stickers
Mailing Address 2001 N Beauregard St Ste 420			
City Alexandria	State VA	Zip Code 22311-1750	

Outstanding Balance Beginning This Period	Transaction ID : VSEA49H8MY4	
<input type="text" value="56289.96"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="56289.96"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor New Partners Teleservices			Nature of Debt (Purpose): Voter Outreach Calls
Mailing Address PO Box 5021			
City Saint Cloud	State MN	Zip Code 56302-5021	

Outstanding Balance Beginning This Period	Transaction ID : VSEA49H8MC4	
<input type="text" value="84000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="84000.00"/>	<input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="59289.96"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 44 OF 53
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
For Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Redfern, Jacob, , ,			Nature of Debt (Purpose): Postage
Mailing Address 935 Craig St			
City McKeesport	State PA	Zip Code 15132-1827	

Outstanding Balance Beginning This Period <input type="text" value="160.00"/>	Transaction ID : VSEA49H8MW8	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="160.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Waterfront Strategies			Nature of Debt (Purpose): Advertising and Mail Production and Design
Mailing Address 3050 K St NW NW Ste. 100			
City Washington	State DC	Zip Code 20007-5108	

Outstanding Balance Beginning This Period <input type="text" value="76358.60"/>	Transaction ID : VSEA49H8GR9	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="76358.60"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Transaction ID :	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="76518.60"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="189099.28"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="189099.28"/>

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) For Our Future	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620971 </div>
--	--

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item For Our Future Action Fund		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 888 16Th St NW Ste 650		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8863.56</div>
City Washington State DC Zip Code 20006-4112		
Purpose of Expenditure Payment for Canvassing Services from 10/31-11/6 as Disclosed on Post-General Report		Transaction ID : VSG8M9VYEP1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 05 / 2016
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: PA
Calendar Year-To-Date Per Election for Office Sought 930676.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item For Our Future Action Fund		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2016
Mailing Address 888 16Th St NW Ste 650		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8863.56</div>
City Washington State DC Zip Code 20006-4112		
Purpose of Expenditure Payment for Canvassing Services from 10/31-11/6 as Disclosed on Post-General Report		Transaction ID : VSG8M9VYEQ9 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 05 / 2016
Name of Federal Candidate: McGinty, Kathleen Alana, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: PA
Calendar Year-To-Date Per Election for Office Sought 930676.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">17727.12</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
01 / 31 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Payment for Canvassing Services from 10/31-11/6 as Disclosed on Post-General Report
Category/Type 004
Date of Public Distribution/Dissemination 10/31/2016
Amount 1503.36
Transaction ID : VSG8M9VYER7
Date of Disbursement or Obligation 12/05/2016

Name of Federal Candidate: STRICKLAND, TED, ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Payment for Canvassing Services from 10/31-11/6 as Disclosed on Post-General Report
Category/Type 004
Date of Public Distribution/Dissemination 10/31/2016
Amount 5061.31
Transaction ID : VSG8M9VYES5
Date of Disbursement or Obligation 12/05/2016

Name of Federal Candidate: Rubio, Marco, ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 6564.67
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , [Electronically Filed] Date 01/31/2017
Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) For Our Future	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620971 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item For Our Future Action Fund	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> 10 / 31 / 2016 </div>
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15183.94</div> Transaction ID : VSG8M9VYET3 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> 12 / 05 / 2016 </div>
City Washington State DC Zip Code 20006-4112	
Purpose of Expenditure Payment for Canvassing Services from 10/31-11/6 as Disclosed on Post-General Report Category/Type 004	
Name of Federal Candidate: MURPHY, PATRICK E, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1135147.12</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item For Our Future Action Fund	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> 10 / 31 / 2016 </div>
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50857.42</div> Transaction ID : VSG8M9VYEV0 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> 12 / 05 / 2016 </div>
City Washington State DC Zip Code 20006-4112	
Purpose of Expenditure Payment for Canvassing Services from 10/31-11/6 as Disclosed on Post-General Report Category/Type 004	
Name of Federal Candidate: TRUMP, DONALD J., , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5721092.10</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">66041.36</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , ,

[Electronically Filed]

Date

 / /
01 / 31 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Payment for Canvassing Services from 10/31-11/6 as Disclosed on Post-General Report
Category/Type 004
Date of Public Distribution/Dissemination 10/31/2016
Amount 50857.42
Transaction ID : VSG8M9VYEW8
Date of Disbursement or Obligation 12/05/2016

Name of Federal Candidate: CLINTON, HILLARY RODHAM, ,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Payment for Canvassing Services from 10/31-11/6 as Disclosed on Post-General Report
Category/Type 004
Date of Public Distribution/Dissemination 10/31/2016
Amount 1503.36
Transaction ID : VSG8M9VYEX6
Date of Disbursement or Obligation 12/05/2016

Name of Federal Candidate: PORTMAN, ROB, ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 52360.78
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01/31/2017

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) For Our Future	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620971 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item For Our Future Action Fund		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 11 / 07 / 2016 </div>	
Mailing Address 888 16Th St NW Ste 650		Amount <div style="border: 1px solid black; padding: 2px;"> 1691.28 </div>	
City Washington	State DC	Zip Code 20006-4112	
Purpose of Expenditure Payment for Canvassing Services from 11/7-11/8 as Disclosed on Post General Report		Category/Type 004	
Name of Federal Candidate: Rubio, Marco, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px;"> 1135147.12 </div>			

Full Name of Payee <input type="checkbox"/> Memo Item For Our Future Action Fund		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 11 / 07 / 2016 </div>	
Mailing Address 888 16Th St NW Ste 650		Amount <div style="border: 1px solid black; padding: 2px;"> 908.28 </div>	
City Washington	State DC	Zip Code 20006-4112	
Purpose of Expenditure Payment for Canvassing Services from 11/7-11/8 as Disclosed on Post General Report		Category/Type 004	
Name of Federal Candidate: PORTMAN, ROB, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px;"> 192443.85 </div>			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> 2599.56 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Bidel-Niyat, Shirin, , , **[Electronically Filed]** Date MM / DD / YYYY
01 / 31 / 2017

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) For Our Future	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620971 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item For Our Future Action Fund	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 11 / 07 / 2016 </div>
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 4214.73 </div>
City Washington State DC Zip Code 20006-4112	Transaction ID : VSG8M9VYF00 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 12 / 05 / 2016 </div>
Purpose of Expenditure Payment for Canvassing Services from 11/7-11/8 as Disclosed on Post General Report	Category/Type 004
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: PA
Calendar Year-To-Date Per Election for Office Sought 930676.78	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item For Our Future Action Fund	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 11 / 07 / 2016 </div>
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 5073.84 </div>
City Washington State DC Zip Code 20006-4112	Transaction ID : VSG8M9VYF18 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 12 / 05 / 2016 </div>
Purpose of Expenditure Payment for Canvassing Services from 11/7-11/8 as Disclosed on Post General Report	Category/Type 004
Name of Federal Candidate: MURPHY, PATRICK E, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: FL
Calendar Year-To-Date Per Election for Office Sought 1135147.12	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">9288.57</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , ,

[Electronically Filed]

Date

MM / DD / YYYY
01 / 31 / 2017

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) For Our Future	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00620971 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item For Our Future Action Fund	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 07 / 2016 </div>
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 908.28 </div> Transaction ID : VSG8M9VYF26 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 12 / 05 / 2016 </div>
City Washington State DC Zip Code 20006-4112	
Purpose of Expenditure Payment for Canvassing Services from 11/7-11/8 as Disclosed on Post General Report Category/Type 004	
Name of Federal Candidate: STRICKLAND, TED, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 192443.85 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item For Our Future Action Fund	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 07 / 2016 </div>
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 4214.73 </div> Transaction ID : VSG8M9VYF34 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 12 / 05 / 2016 </div>
City Washington State DC Zip Code 20006-4112	
Purpose of Expenditure Payment for Canvassing Services from 11/7-11/8 as Disclosed on Post General Report Category/Type 004	
Name of Federal Candidate: McGinty, Kathleen Alana, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 930676.78 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 5123.01 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 01 / 31 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future	FEC IDENTIFICATION NUMBER ▼ C C00620971
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item For Our Future Action Fund		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 888 16Th St NW Ste 650		Amount <input type="text"/> 18653.25
City Washington	State DC	
Zip Code 20006-4112	Category/ Type <input type="text"/> 004	Transaction ID : VSG8M9VYF42 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Payment for Canvassing Services from 11/7-11/8 as Disclosed on Post General Report		Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD J., , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Name of Federal Candidate: TRUMP, DONALD J., , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 5721092.10		

Full Name of Payee <input type="checkbox"/> Memo Item For Our Future Action Fund		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 888 16Th St NW Ste 650		Amount <input type="text"/> 18653.25
City Washington	State DC	
Zip Code 20006-4112	Category/ Type <input type="text"/> 004	Transaction ID : VSG8M9VYF59 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Payment for Canvassing Services from 11/7-11/8 as Disclosed on Post General Report		Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY RODHAM, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 5721092.10		

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 37306.50
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) For Our Future	FEC IDENTIFICATION NUMBER ▼ C C00620971
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item New Partners Teleservices	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 5021	Amount <input type="text"/>
City State Zip Code Saint Cloud MN 56302-5021	Transaction ID : VSG8M9VMYJ7 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Payment for Voter Outreach Calls as Disclosed on Post General Report	Category/Type <input type="text"/>
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MURPHY, PATRICK E, ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1135147.12	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item New Partners Teleservices	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 5021	Amount <input type="text"/>
City State Zip Code Saint Cloud MN 56302-5021	Transaction ID : VSG8M9VMYK5 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Payment for Voter Outreach Calls as Disclosed on Post General Report	Category/Type <input type="text"/>
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY RODHAM, ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 5721092.10	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 84000.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/> 281011.57

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , , [Electronically Filed]
Signature Date / /