

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

L PAC

ADDRESS (number and street) 2120 L Street NW
Suite 850
 Check if different than previously reported. (ACC) Washington DC 20037

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

C C00519413

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2022 through M M / D D / Y Y Y Y Y Y 09 / 30 / 2022

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

Rosen, Hilary, , ,

Type or Print Name of Treasurer

Signature of Treasurer Rosen, Hilary, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 13 / 2022

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)

Page 2

Write or Type Committee Name

L PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value=""/>	<input type="text" value="65918.40"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="20100.98"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="47602.36"/>	<input type="text" value="346108.84"/>
(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="67703.34"/>	<input type="text" value="412027.24"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="46924.84"/>	<input type="text" value="391248.74"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="20778.50"/>	<input type="text" value="20778.50"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

L PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2022 To: M M / D D / Y Y Y Y 09 / 30 / 2022

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).....	10350.00	46600.00
(ii) Unitemized	1787.00	7793.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12137.00	54393.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	4500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	14137.00	58893.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	19953.36	39990.74
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	13512.00	247225.10
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)).....▶	47602.36	346108.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	47602.36	346108.84

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	25424.84	151998.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	25424.84	151998.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	57500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1500.00	181750.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	46924.84	391248.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46924.84	391248.74

DETAILED SUMMARY PAGE
of Disbursements

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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)	14137.00	58893.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14137.00	58893.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	25424.84	151998.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	19953.36	39990.74
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5471.48	112008.00

**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 36
<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)
L PAC

A. Cress, Ronda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 367 Auden Ave
 Apt 204
 City Columbus State OH Zip Code 43215-1972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Of Ohio Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 28 / 2022
Transaction ID : VNW3HMEGD00
 Amount of Each Receipt this Period 200.00
 Memo Item

B. Shanks, Denise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 Clinton Ave
 Apt 9G
 City Brooklyn State NY Zip Code 11205-3510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W.W. Norton Occupation (for Individual) Designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 02 / 2022
Transaction ID : VNW3HMEKA20
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Sbrana, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 Myrtle Ave
 Apt 2706
 City Brooklyn State NY Zip Code 11201-2920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) New York State Department Of Health Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 06 / 2022
Transaction ID : VNW3HMENHC0
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Hoover, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 Brickell Plz
 2912
 City Miami State FL Zip Code 33131-3833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 28 / 2022
Transaction ID : VNW3HMNVCEO
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Rosen, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 Central Park W
 Apt 3C
 City New York State NY Zip Code 10025-7659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 16 / 2022
Transaction ID : VNW3HMNEE91
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below

C. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2502.00

Date of Receipt 09 / 18 / 2022
Transaction ID : VNW3HMNEE91E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Sbrana, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 Myrtle Ave
 Apt 2706
 City Brooklyn State NY Zip Code 11201-2920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) New York State Department Of Health Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2022
Transaction ID : VNW3HMJ3QC1
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Hoover, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 Brickell Plz
 2912
 City Miami State FL Zip Code 33131-3833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 08 / 28 / 2022
Transaction ID : VNW3HMHYZK1
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Sandberg, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 Vreeland Ct
 City Princeton State NJ Zip Code 08540-6760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Accordant Advisors Occupation (for Individual) Management Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2022
Transaction ID : VNW3HMRRH02
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ▶ 625.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2502.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2022

Transaction ID : VNW3HMRRH02E

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Hammell, Emily, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3900 16Th St NW Apt 504

City Washington	State DC	Zip Code 20011-8311
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Quorum	Occupation (for Individual) Field Marketing Manager
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : VNW3HMKY612

Amount of Each Receipt this Period
25.00

Memo Item

C. Haycox, Karen, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 111 John St FI 23

City New York	State NY	Zip Code 10038-3109
------------------	-------------	------------------------

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

Name of Employer (for Individual) Habitat For Humanity NYC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2022

Transaction ID : VNW3HMNEE83

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2502.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2022
Transaction ID : VNW3HMNEE83E
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

B. Ogg, Katharine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Monroe Pl
 City Brooklyn State NY Zip Code 11201-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Not Employed Not Employed
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2022
Transaction ID : VNW3HMJ13N3
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Long, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8802 Bailey Rd
 City Wyndmoor State PA Zip Code 19038-7406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Guardian Nurses President/CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2022
Transaction ID : VNW3HMRRHD4
 Amount of Each Receipt this Period
 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Fox-Davis, Kendra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 Camino Del Diablo
 City Orinda State CA Zip Code 94563-2003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rosenberg Foundation Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2022
Transaction ID : VNW3HMMB0F4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Garrity, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11920 Latigo Ln
 City Oakton State VA Zip Code 22124-2313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2022
Transaction ID : VNW3HMPTF66
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Beaver, Sean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2213 129Th PI SE
 City Everett State WA Zip Code 98208-7129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRPH Occupation (for Individual) Marketing Coordinator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 20 / 2022
Transaction ID : VNW3HMEBHF6
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Saez, Mirian, , ,			Date of Receipt
Mailing Address 243 Caselli Ave			<input type="text" value="07"/> / <input type="text" value="06"/> / <input type="text" value="2022"/>
City San Francisco	State CA	Zip Code 94114-2322	Transaction ID : VNW3HMBZBK6
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Retired	<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="750.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Milbratz, Erika, , ,			Date of Receipt
Mailing Address 723 Sheridan Rd			<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2022"/>
City Wilmette	State IL	Zip Code 60091-1959	Transaction ID : VNW3HMRRHC7
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="3000.00"/>
Name of Employer (for Individual) Self Employed		Occupation (for Individual) Consultant	<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="3000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Monast, John, , ,			Date of Receipt
Mailing Address 14 Blanchard Pl			<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2022"/>
City Wakefield	State RI	Zip Code 02879-3543	Transaction ID : VNW3HME23E7
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	<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="250.00"/>		* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3750.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 13 OF 36
<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)
L PAC

A. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2502.00

Date of Receipt
MM / DD / YYYY
07 / 03 / 2022
Transaction ID : VNW3HME23E7E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Hoover, Kimberly, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1000 Brickell Plz 2912

City Miami	State FL	Zip Code 33131-3833
---------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Red Multifamily CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2200.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2022
Transaction ID : VNW3HMEGGW7

Amount of Each Receipt this Period
1000.00

Memo Item

C. Hoover, Kimberly, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1000 Brickell Plz 2912

City Miami	State FL	Zip Code 33131-3833
---------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Red Multifamily CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2022
Transaction ID : VNW3HMEGE68

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 14 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Friedman, Sieglinde, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3922 Highwood Ct NW
 City Washington State DC Zip Code 20007-2132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2022
Transaction ID : VNW3HMNVDM8
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Beaver, Sean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2213 129Th PI SE
 City Everett State WA Zip Code 98208-7129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRPH Occupation (for Individual) Marketing Coordinator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 20 / 2022
Transaction ID : VNW3MHMF09
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Hoover, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 Brickell Plz 2912
 City Miami State FL Zip Code 33131-3833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3400.00

Date of Receipt 09 / 30 / 2022
Transaction ID : VNW3HMPTF09
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
L PAC

A. Love, Kaleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8205 Mount Vernon Hwy
 City Alexandria State VA Zip Code 22309-1915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Phillip Morris Occupation (for Individual) Global Head Of Strategy & Planning
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2022
Transaction ID : VNW3HMRRHB9
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2502.00

Date of Receipt 09 / 30 / 2022
Transaction ID : VNW3HMRRHB9E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Perez, Sandra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 Pelham Rd Apt C-D
 City New Rochelle State NY Zip Code 10805-1325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Heritage Of Pride Occupation (for Individual) Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 03 / 2022
Transaction ID : VNW3HMJ2AK9
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	10350.00

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

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

FOR LINE NUMBER: PAGE 16 OF 36
(check only one)

<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)
L PAC

A. EQUALITY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 15337

City Washington	State DC	Zip Code 20003-0337
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00550970

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2022

Transaction ID : VNW3HMRRGY6

Amount of Each Receipt this Period
2000.00

Memo Item

B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

**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 17 OF 36
<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)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Sandberg, Stephanie, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 19 / 2022
Mailing Address 32 Vreeland Ct		Transaction ID : VNW3HMRRHE2
City Princeton	State NJ	Zip Code 08540-6760
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19953.36
Name of Employer (for Individual) Accordant Advisors	Occupation (for Individual) Management Consultant	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 19953.36	Non-Contribution Account; Cobra Insurance

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer (for Individual)	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 ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer (for Individual)	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 ▼	

SUBTOTAL of Receipts This Page (optional).....▶	19953.36
TOTAL This Period (last page this line number only).....▶	19953.36

**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 18 OF 36
<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)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Pritzker, Jennifer, N, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 05 / 2022
Mailing Address 104 S Michigan Ave Ste 1120		Transaction ID : VNW3HMBYXA3
City Chicago	State IL	Zip Code 60603-6135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Tawani Enterprises Inc.	Occupation (for Individual) President & CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Barua, Nandini, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 03 / 2022
Mailing Address 20 E 66Th St Apt 2A		Transaction ID : VNW3HME23B3
City New York	State NY	Zip Code 10065-6531
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Beyond Barriers Labs Inc.	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pritzker, Jennifer, N, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 17 / 2022
Mailing Address 104 S Michigan Ave Ste 1120		Transaction ID : VNW3HME23S4
City Chicago	State IL	Zip Code 60603-6135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2012.00
Name of Employer (for Individual) Tawani Enterprises Inc.	Occupation (for Individual) President & CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 17012.00	Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	12012.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 36
<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)
L PAC

A. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 030220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 15 / 2022**
Transaction ID : VNW3HMGXYJ5
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non-Contribution Account

B. Weiner, Shari, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 Park Ave Apt 17D
 City New York State NY Zip Code 10075-0280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Murphy Mckeon PC Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt **07 / 21 / 2022**
Transaction ID : VNW3HMEC347
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Non-Contribution Account

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
 Amount of Each Receipt this Period
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	13512.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. DC Health Link		Date of Disbursement MM / DD / YYYY 08 / 11 / 2022
Mailing Address PO Box 97022		FEC Identification Number C [REDACTED] Transaction ID : VNV49A3AK1 Amount of Each Disbursement this Period 4463.39
City Washington	State DC	Zip Code 20090-7022
Purpose of Disbursement Health Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CNA		Date of Disbursement MM / DD / YYYY 09 / 01 / 2022
Mailing Address 1 Meridian Blvd Ste 3A01		FEC Identification Number C [REDACTED] Transaction ID : VNV49A3AKF Amount of Each Disbursement this Period 420.68
City Wyomissing	State PA	Zip Code 19610-3235
Purpose of Disbursement Workers Compensation Insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 18 / 2022
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] Transaction ID : VNV49A3AKI Amount of Each Disbursement this Period 29.63
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Merchant Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	4913.70
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)
L PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 11 / 2022
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	
Purpose of Disbursement Merchant Fee		Transaction ID : VNV49A36WC
Candidate Name		Amount of Each Disbursement this Period 0.20
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. LPAC Equality Initiative		Date of Disbursement MM / DD / YYYY 09 / 16 / 2022
Mailing Address 2120 L St NW Ste 850		FEC Identification Number C
City Washington	State DC	
Purpose of Disbursement Salary		Transaction ID : VNV49A3AJW
Candidate Name		Amount of Each Disbursement this Period 500.00
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) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 07 / 31 / 2022
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	
Purpose of Disbursement Merchant Fee		Transaction ID : VNV49A34J1
Candidate Name		Amount of Each Disbursement this Period 0.04
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).....▶	500.24
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)
L PAC

A. LPAC Action Network

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW
Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 16 / 2022

FEC Identification Number: C

Transaction ID : VNV49A3AK5

Amount of Each Disbursement this Period: 500.00

Memo Item

B. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 24 / 2022

FEC Identification Number: C

Transaction ID : VNV49A33871

Amount of Each Disbursement this Period: 0.99

Memo Item

C. Olive Street Design

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 05 / 2022

FEC Identification Number: C

Transaction ID : VNV49A3AK.

Amount of Each Disbursement this Period: 34.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 534.99

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)
L PAC

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 366 Summer St

M M M	/	D D D	/	Y Y Y Y Y
07		10		2022

City
Somerville

State
MA

Zip Code
02144-3132

FEC Identification Number

Purpose of Disbursement
Merchant Fee

C

Transaction ID : VNV49A32NE
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

0.20

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

B. Blue Wave Political Partners LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 514 Daniels St
286

M M M	/	D D D	/	Y Y Y Y Y
07		21		2022

City
Raleigh

State
NC

Zip Code
27605-1317

FEC Identification Number

Purpose of Disbursement
Compliance Services

C

Transaction ID : VNV49A3AK0
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1500.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

C. CNA

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1 Meridian Blvd
Ste 3A01

M M M	/	D D D	/	Y Y Y Y Y
08		03		2022

City
Wyomissing

State
PA

Zip Code
19610-3235

FEC Identification Number

Purpose of Disbursement
Workers Compensation Insurance

C

Transaction ID : VNV49A3AKI
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

249.68

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

1749.88

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)
L PAC

Full Name (Last, First, Middle Initial) A. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 08 / 26 / 2022
Mailing Address 1825 K St NW Frnt 1		FEC Identification Number C Transaction ID : VNV49A3AJE Amount of Each Disbursement this Period 10.88
City Washington	State DC	
Purpose of Disbursement Bank Fee	Zip Code 20006-1245	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 30 / 2022
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A3AKH Amount of Each Disbursement this Period 46.87
City Somerville	State MA	
Purpose of Disbursement Merchant Fee	Zip Code 02144-3132	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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. LPAC Action Network		Date of Disbursement MM / DD / YYYY 08 / 29 / 2022
Mailing Address 2120 L St NW Ste 850		FEC Identification Number C Transaction ID : VNV49A3AJJ Amount of Each Disbursement this Period 1500.00
City Washington	State DC	
Purpose of Disbursement Salary	Zip Code 20037-1550	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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).....▶	1557.75
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)
L PAC

A. DC Department Of Employment Services

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 4058 Minnesota Ave NE

M M M	/	D D D	/	Y Y Y Y Y
09		30		2022

City
Washington

State
DC

Zip Code
20019-3540

FEC Identification Number

Purpose of Disbursement
Payroll Taxes

C

Transaction ID : VNV49A3AK4
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

97.70

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

B. Grasshopper.Com

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 197 1st Ave
Ste 200

M M M	/	D D D	/	Y Y Y Y Y
09		06		2022

City
Needham

State
MA

Zip Code
02494-2873

FEC Identification Number

Purpose of Disbursement
Software

C

Transaction ID : VNV49A3AK9
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

35.06

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

C. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 366 Summer St

M M M	/	D D D	/	Y Y Y Y Y
08		07		2022

City
Somerville

State
MA

Zip Code
02144-3132

FEC Identification Number

Purpose of Disbursement
Merchant Fee

C

Transaction ID : VNV49A34R1
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2.58

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

135.34

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)
L PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 07 / 03 / 2022
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A32NA Amount of Each Disbursement this Period 214.68
City Somerville	State MA	
Zip Code 02144-3132		Memo Item <input type="checkbox"/>
Purpose of Disbursement Merchant Fee		
Candidate Name		Category/Type <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. CNA		Date of Disbursement MM / DD / YYYY 07 / 01 / 2022
Mailing Address 1 Meridian Blvd Ste 3A01		FEC Identification Number C Transaction ID : VNV49A3AKC Amount of Each Disbursement this Period 249.68
City Wyomissing	State PA	
Zip Code 19610-3235		Memo Item <input type="checkbox"/>
Purpose of Disbursement Workers Compensation Insurance		
Candidate Name		Category/Type <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. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 07 / 26 / 2022
Mailing Address 1825 K St NW Frnt 1		FEC Identification Number C Transaction ID : VNV49A3AJI Amount of Each Disbursement this Period 12.51
City Washington	State DC	
Zip Code 20006-1245		Memo Item <input type="checkbox"/>
Purpose of Disbursement Bank Fee		
Candidate Name		Category/Type <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)..... ▶

476.87

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)
L PAC

A. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW
Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 29 / 2022

FEC Identification Number: **C**

Transaction ID : **VNV49A3AK**

Amount of Each Disbursement this Period: 10.00

Memo Item

B. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW
Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 29 / 2022

FEC Identification Number: **C**

Transaction ID : **VNV49A3AJZ**

Amount of Each Disbursement this Period: 10.25

Memo Item

C. Harmon Curran Spielberg + Eisenberg LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1726 M St NW
Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement Legal Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 22 / 2022

FEC Identification Number: **C**

Transaction ID : **VNV49A3AK**

Amount of Each Disbursement this Period: 3554.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3574.75

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)
L PAC

Full Name (Last, First, Middle Initial) A. Grasshopper.Com		Date of Disbursement MM / DD / YYYY 08 / 04 / 2022
Mailing Address 197 1St Ave Ste 200		FEC Identification Number C [REDACTED] Transaction ID : VNV49A3AKI Amount of Each Disbursement this Period [REDACTED] 35.06
City Needham	State MA	Zip Code 02494-2873
Purpose of Disbursement Software		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 04 / 2022
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] Transaction ID : VNV49A36RP Amount of Each Disbursement this Period [REDACTED] 0.04
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Merchant Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 07 / 05 / 2022
Mailing Address 1825 K St NW Frnt 1		FEC Identification Number C [REDACTED] Transaction ID : VNV49A3AJI Amount of Each Disbursement this Period [REDACTED] 660.62
City Washington	State DC	Zip Code 20006-1245
Purpose of Disbursement Bank Fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 695.72
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)
L PAC

A. Grasshopper.Com

Full Name (Last, First, Middle Initial)

Mailing Address 197 1St Ave
Ste 200

City Needham State MA Zip Code 02494-2873

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 05 / 2022

FEC Identification Number: C [REDACTED]
Transaction ID : VNV49A3AK7
Amount of Each Disbursement this Period: 35.06

Memo Item

B. Olive Street Design

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 02 / 2022

FEC Identification Number: C [REDACTED]
Transaction ID : VNV49A3AKC
Amount of Each Disbursement this Period: 34.00

Memo Item

C. DC Health Link

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Health Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 23 / 2022

FEC Identification Number: C [REDACTED]
Transaction ID : VNV49A3AK
Amount of Each Disbursement this Period: 8002.62

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8071.68

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)
L PAC

A. Kight, Kate, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
09 / 09 / 2022

Mailing Address: 1629 L St NE
Unit 303

City: Washington State: DC Zip Code: 20002-3055

Purpose of Disbursement: Communication Consulting

Candidate Name:

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

State: District:

FEC Identification Number: C
Transaction ID : VNV49A3AJE
Amount of Each Disbursement this Period: 1250.00

Memo Item

B. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
07 / 26 / 2022

Mailing Address: 1825 K St NW
Frnt 1

City: Washington State: DC Zip Code: 20006-1245

Purpose of Disbursement: Bank Fee

Candidate Name:

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

State: District:

FEC Identification Number: C
Transaction ID : VNV49A3AKC
Amount of Each Disbursement this Period: 10.00

Memo Item

C. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
07 / 26 / 2022

Mailing Address: 1825 K St NW
Frnt 1

City: Washington State: DC Zip Code: 20006-1245

Purpose of Disbursement: Bank Fee

Candidate Name:

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

State: District:

FEC Identification Number: C
Transaction ID : VNV49A3AJJ
Amount of Each Disbursement this Period: 50.71

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1310.71

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)
L PAC

A. LPAC Action Network

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW
Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 29 / 2022

FEC Identification Number: C

Transaction ID : VNV49A3AK6

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Olive Street Design

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 02 / 2022

FEC Identification Number: C

Transaction ID : VNV49A3AKE

Amount of Each Disbursement this Period: 34.00

Memo Item

C. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 17 / 2022

FEC Identification Number: C

Transaction ID : VNV49A32NC

Amount of Each Disbursement this Period: 80.68

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1114.68

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)
L PAC

Full Name (Last, First, Middle Initial) A. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 09 / 29 / 2022
Mailing Address 1825 K St NW Frnt 1		FEC Identification Number C Transaction ID : VNV49A3AJF Amount of Each Disbursement this Period 31.55
City Washington	State DC	
Purpose of Disbursement Bank Fee	Zip Code 20006-1245	Memo Item <input type="checkbox"/>
Candidate Name	Category/ Type	
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. Paragon Payment Solutions		Date of Disbursement MM / DD / YYYY 08 / 01 / 2022
Mailing Address 2141 E Broadway Rd		FEC Identification Number C Transaction ID : VNV49A3AJR Amount of Each Disbursement this Period 456.91
City Tempe	State AZ	
Purpose of Disbursement Merchant Fee	Zip Code 85282-1892	Memo Item <input type="checkbox"/>
Candidate Name	Category/ Type	
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 Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement	Zip Code	Memo Item <input type="checkbox"/>
Candidate Name	Category/ Type	
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).....▶	488.46
TOTAL This Period (last page this line number only).....▶	25276.13

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)
L PAC

A. SHARICE DAVIDS VICTORY FUND 2022

Full Name (Last, First, Middle Initial)

Mailing Address 13851 W 63Rd St
303

City Shawnee State KS Zip Code 66216-3800

Purpose of Disbursement Contribution - Federal

Candidate Name **SHARICE DAVIDS VICTORY FUND 2022**

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

State: District:

Date of Disbursement: 08 / 02 / 2022

FEC Identification Number: **C** C00724237
Transaction ID : VNV49A3AJC

Amount of Each Disbursement this Period: 5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement:

FEC Identification Number: **C**

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement:

FEC Identification Number: **C**

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	20000.00

**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)
L PAC

Full Name (Last, First, Middle Initial) A. Kaegan For New York		Date of Disbursement MM / DD / YYYY 08 / 03 / 2022
Mailing Address PO Box 300839		FEC Identification Number C [REDACTED] Transaction ID : VNV49A3AJP Amount of Each Disbursement this Period 500.00
City Brooklyn	State NY	Zip Code 11230-0839
Purpose of Disbursement Contribution - Non-Federal		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Shannon Baldwin 4 Judge		Date of Disbursement MM / DD / YYYY 08 / 03 / 2022
Mailing Address 4830 Wilson Rd Ste 300		FEC Identification Number C [REDACTED] Transaction ID : VNV49A3AJP Amount of Each Disbursement this Period 500.00
City Humble	State TX	Zip Code 77396-1972
Purpose of Disbursement Contribution - Non-Federal		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Citizens For Maggie Trevor		Date of Disbursement MM / DD / YYYY 08 / 03 / 2022
Mailing Address PO Box 1424		FEC Identification Number C [REDACTED] Transaction ID : VNV49A3AJP Amount of Each Disbursement this Period 500.00
City Arlington Heights	State IL	Zip Code 60006-1424
Purpose of Disbursement Contribution - Non-Federal		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	1500.00