

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**
CARLY FOR AMERICA

ADDRESS (number and street) **PO BOX 25647**
 Check if different than previously reported. (ACC) **ALEXANDRIA VA 22313**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00610568 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 / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Hankins, Brenda, , ,
Type or Print Name of Treasurer

Signature of Treasurer *Hankins, Brenda, , ,* [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

CARLY FOR AMERICA

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="2018"/>		127186.88
(b) Cash on Hand at Beginning of Reporting Period.....	28030.15	
(c) Total Receipts (from Line 19)	0.00	0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	28030.15	127186.88
7. Total Disbursements (from Line 31).....	1023.43	100180.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	27006.72	27006.72
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

CARLY FOR AMERICA

Report Covering the Period: From: 11 / 27 / 2018 To: 12 / 31 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	0.00

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	1023.43	95160.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1023.43	95160.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	20.00
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)) ..	1023.43	100180.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1023.43	100180.16

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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1023.43	95160.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1023.43	95160.16

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)

Form with checkboxes for line numbers 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b.

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

NAME OF COMMITTEE (In Full)
CARLY FOR AMERICA

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address World Financial Center
200 Vesey St

City New York State NY Zip Code 10285

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought: House, Senate, President
State: District:

Disbursement For: Primary, General, Other (specify)

Date of Disbursement

Date of Disbursement: 12 / 07 / 2018

FEC Identification Number

FEC Identification Number: C

Transaction ID : SB21B.4469
Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 963.43

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House, Senate, President
State: District:

Disbursement For: Primary, General, Other (specify)

Date of Disbursement

Date of Disbursement: 10 / 24 / 2018

FEC Identification Number

FEC Identification Number: C

Transaction ID : SB21B.4469.C
Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 22.34

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House, Senate, President
State: District:

Disbursement For: Primary, General, Other (specify)

Date of Disbursement

Date of Disbursement: 10 / 24 / 2018

FEC Identification Number

FEC Identification Number: C

Transaction ID : SB21B.4469.
Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 1.03

Memo Item

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SUBTOTAL: 963.43

TOTAL: 963.43

**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)
CARLY FOR AMERICA

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.3

Amount of Each Disbursement this Period: 19.03

Memo Item

B. Style Me Bar LLC

Full Name (Last, First, Middle Initial)

Mailing Address 23014 Weybridge Square

City Broadlands State VA Zip Code 20148

Purpose of Disbursement Styling Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 25 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.3

Amount of Each Disbursement this Period: 170.00

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.3

Amount of Each Disbursement this Period: 1.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
CARLY FOR AMERICA

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.!

Amount of Each Disbursement this Period: 16.95

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.€

Amount of Each Disbursement this Period: 58.02

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.

Amount of Each Disbursement this Period: 1.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
CARLY FOR AMERICA

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 27 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.1

Amount of Each Disbursement this Period: 3.00

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 27 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.9

Amount of Each Disbursement this Period: 15.00

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 29 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.

Amount of Each Disbursement this Period: 1.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
CARLY FOR AMERICA

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 29 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.1

Amount of Each Disbursement this Period: 53.58

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.1

Amount of Each Disbursement this Period: 47.71

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.1

Amount of Each Disbursement this Period: 3.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
CARLY FOR AMERICA

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.1

Amount of Each Disbursement this Period: 3.00

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.1

Amount of Each Disbursement this Period: 85.80

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 01 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.1

Amount of Each Disbursement this Period: 8.58

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
CARLY FOR AMERICA

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 01 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.1

Amount of Each Disbursement this Period: 84.08

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 01 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.1

Amount of Each Disbursement this Period: 8.40

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 01 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.1

Amount of Each Disbursement this Period: 31.65

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
CARLY FOR AMERICA

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.2

Amount of Each Disbursement this Period: 3.00

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.2

Amount of Each Disbursement this Period: 16.12

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 09 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.2

Amount of Each Disbursement this Period: 1.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
CARLY FOR AMERICA

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 09 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.2

Amount of Each Disbursement this Period: 48.46

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 09 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.2

Amount of Each Disbursement this Period: 48.18

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 09 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.2

Amount of Each Disbursement this Period: 3.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
CARLY FOR AMERICA

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 12 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.2

Amount of Each Disbursement this Period: 20.78

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 12 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.2

Amount of Each Disbursement this Period: 3.00

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.2

Amount of Each Disbursement this Period: 1.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
CARLY FOR AMERICA

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.3

Amount of Each Disbursement this Period: 18.14

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.3

Amount of Each Disbursement this Period: 24.92

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.3

Amount of Each Disbursement this Period: 50.73

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
CARLY FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4469.3
Amount of Each Disbursement this Period
1.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4469.3
Amount of Each Disbursement this Period
3.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4469.3
Amount of Each Disbursement this Period
1.00

Memo Item

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

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

0.00

**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)
CARLY FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Uber

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	9		2	0	1	8		

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

FEC Identification Number

C

Transaction ID : SB21B.4469.3
Amount of Each Disbursement this Period

23.71

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	9		2	0	1	8		

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

FEC Identification Number

C

Transaction ID : SB21B.4469.3
Amount of Each Disbursement this Period

1.00

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	9		2	0	1	8		

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

FEC Identification Number

C

Transaction ID : SB21B.4469.3
Amount of Each Disbursement this Period

1.00

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

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

0.00

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)
CARLY FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C []
Transaction ID : SB21B.4469.3
 Amount of Each Disbursement this Period
 [] 1.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C []
Transaction ID : SB21B.4469.3
 Amount of Each Disbursement this Period
 [] 20.75

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C []
Transaction ID : SB21B.4469.3
 Amount of Each Disbursement this Period
 [] 19.67

Memo Item

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

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

[]	0.00
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[]	
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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)
CARLY FOR AMERICA

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 20 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.4

Amount of Each Disbursement this Period: 1.00

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.4

Amount of Each Disbursement this Period: 1.00

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4469.4

Amount of Each Disbursement this Period: 16.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
CARLY FOR AMERICA

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement MM / DD / YYYY 12 / 06 / 2018	
Mailing Address 1600 Amphitheater Pkwy		FEC Identification Number C []	
City Mountain View	State CA	Zip Code 94043	Transaction ID : SB21B.4468
Purpose of Disbursement Online Services		Category/ Type []	Amount of Each Disbursement this Period [] 50.00
Candidate Name			<input type="checkbox"/> Memo Item
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.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period []
Purpose of Disbursement		Category/ Type []	<input type="checkbox"/> Memo Item
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:			

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

SUBTOTAL of Disbursements This Page (optional).....▶	[] 50.00
TOTAL This Period (last page this line number only).....▶	[] 1013.43