

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) **PO Box 76940**
 Check if different than previously reported. (ACC) **Washington DC 20013**

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:
 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 / / 2018 through / / 2018

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

Signature of Treasurer *Robasciotti, Rachel, , ,* [Electronically Filed] Date / / 2018

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**

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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="2018"/>	<input type="text" value="85991.45"/>	<input type="text" value="85991.45"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="85991.45"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="288228.33"/>	<input type="text" value="288228.33"/>
(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="374219.78"/>	<input type="text" value="374219.78"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="181734.92"/>	<input type="text" value="181734.92"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="192484.86"/>	<input type="text" value="192484.86"/>
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: / / To: / /

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).....	32100.00	32100.00
(ii) Unitemized	4800.00	4800.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	36900.00	36900.00
(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)	36900.00	36900.00
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.).....	251328.33	251328.33
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)).....▶	288228.33	288228.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	288228.33	288228.33

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	170.10	170.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	170.10	170.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	7500.00
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).....	174064.82	174064.82
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)) ..	181734.92	181734.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	181734.92	181734.92

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)	36900.00	36900.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36900.00	36900.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	170.10	170.10
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	170.10	170.10

**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 52
	<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	

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. Aberly, Naomi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Mount Vernon Pl
 City Boston State MA Zip Code 02108-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Volunteer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 11 / 2018
Transaction ID : VNW3HFKJJ46
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Bernstein, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 Ellery St
 City Cambridge State MA Zip Code 02138-4355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 01 / 2018
Transaction ID : VNW3HFP5M52
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Bettano, Carla, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 Prince St
 City Jamaica Plain State MA Zip Code 02130-4005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 10 / 2018
Transaction ID : VNW3HFN7CK0
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1700.00
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 52
	<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. Bettano, Carla, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 Prince St
 City Jamaica Plain State MA Zip Code 02130-4005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **700.00**

Date of Receipt **02 / 21 / 2018**
Transaction ID : VNW3HFNQAK1
 Amount of Each Receipt this Period **500.00**
 Memo Item

B. Burns, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1165 Monument St
 City Concord State MA Zip Code 01742-5300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 30 / 2018**
Transaction ID : VNW3HFMB1A4
 Amount of Each Receipt this Period **250.00**
 Memo Item

C. Cadwell, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 Temple Rd
 City Concord State MA Zip Code 01742-1514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Psychotherapist/Educator/Performer/Fil
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **01 / 14 / 2018**
Transaction ID : VNW3HFKKVW2
 Amount of Each Receipt this Period **500.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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 52
	<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. Carey, Kate, , ,			Date of Receipt MM / DD / YYYY 03 / 01 / 2018
Mailing Address 288 Green St			Transaction ID : VNW3HFP5C71
City Northborough	State MA	Zip Code 01532-1014	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Waters Corp		Occupation (for Individual) Strategic Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cull, Rhian, , ,			Date of Receipt MM / DD / YYYY 02 / 08 / 2018
Mailing Address 100 Westminster St Ste 1500			Transaction ID : VNW3HFNDQ09
City Providence	State RI	Zip Code 02903-2395	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Hinckley Allen		Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Dumas, Nannette, , ,			Date of Receipt MM / DD / YYYY 02 / 17 / 2018
Mailing Address PO Box 250			Transaction ID : VNW3HFNH554
City Marblehead	State MA	Zip Code 01945-0250	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Fenway Health		Occupation (for Individual) Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 9 OF 52
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Fein-Zachary, Valerie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 Marlborough St
 City Boston State MA Zip Code 02116-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Harvard Medical Faculty Physicians Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 13 / 2018
Transaction ID : VNW3HFNC233
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Fein-Zachary, Valerie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 Marlborough St
 City Boston State MA Zip Code 02116-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Harvard Medical Faculty Physicians Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 20 / 2018
Transaction ID : VNW3HFNA35
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Goodridge, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 Saint John St
 City Boston State MA Zip Code 02130-2534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NorthStar Asset Management, Inc. Occupation (for Individual) Investment Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 19 / 2018
Transaction ID : VNW3HFKXF87
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
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 52
	<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. Gray, Mary, , ,			Date of Receipt
Mailing Address 48 Hawthorne St			<input type="text" value="01"/> / <input type="text" value="16"/> / <input type="text" value="2018"/>
City Somerville	State MA	Zip Code 02144-2907	Transaction ID : VNW3HFKQZC7
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) Microsoft Research		Occupation (for Individual) Senior Researcher	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Huth, Thomas, , ,			Date of Receipt
Mailing Address 294 Walnut St Apt 2			<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2018"/>
City Brookline	State MA	Zip Code 02445-7570	Transaction ID : VNW3HFM0MB6
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) Huth Architects		Occupation (for Individual) Architect	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Larkin, Patty, , ,			Date of Receipt
Mailing Address PO Box 663			<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2018"/>
City Wellfleet	State MA	Zip Code 02667-0663	Transaction ID : VNW3HFP3W3
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer (for Individual) Self		Occupation (for Individual) Musician	<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="1000.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="2000.00"/>
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: PAGE 11 OF 52
(check only one)
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Lewis, Ruth, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 17 Seymour St
Unit 3
City Roslindale State MA Zip Code 02131-4326
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Ruth E Lewis PhD LLC Occupation (for Individual) Psychologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2018
Transaction ID : VNW3HFNQA01
Amount of Each Receipt this Period
500.00
Memo Item

B. Liljestrand, Petra, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1712 Vine St
City Berkeley State CA Zip Code 94703-1130
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 1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 17 / 2018
Transaction ID : VNW3HFPY2S8
Amount of Each Receipt this Period
1000.00
Memo Item

C. Minahan, Neal, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 17 Pond St
Unit 1
City Boston State MA Zip Code 02125-1725
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) American Renal Associates Occupation (for Individual) CCO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2018
Transaction ID : VNW3HFN9S05
Amount of Each Receipt this Period
500.00
Memo Item

SUBTOTAL of Receipts This Page (optional)..... 2000.00
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 52
	<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. Minahan, Neal, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Pond St
 Unit 1
 City Boston State MA Zip Code 02125-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Renal Associates Occupation (for Individual) CCO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 15 / 2018
Transaction ID : VNW3HFNFCN8
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Nelson, Teresa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 Gainsborough St
 Apt 406
 City Boston State MA Zip Code 02115-6539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Simmons College Occupation (for Individual) Professor
 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
 01 / 21 / 2018
Transaction ID : VNW3HFKXXX3
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Newstat, Joyce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 California St
 Unit 27C
 City San Francisco State CA Zip Code 94109-0004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Policy Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2018
Transaction ID : VNW3HFQRM54
 Amount of Each Receipt this Period
 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2750.00
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 13 OF 52
<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Nussbaum, Jane, , ,		Date of Receipt MM / DD / YYYY 02 / 01 / 2018
Mailing Address 140 Elm St Apt 6		Transaction ID : VNW3HFMKX3
City Marblehead	State MA	Zip Code 01945-3364
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Retired	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 ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ritchie, Alix, L, ,		Date of Receipt MM / DD / YYYY 02 / 14 / 2018
Mailing Address PO Box 30220		Transaction ID : VNW3HFNDQ25
City Fort Lauderdale	State FL	Zip Code 33303-0220
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) None	Occupation (for Individual) Media 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 ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Robasciotti, Rachel, , ,		Date of Receipt MM / DD / YYYY 01 / 29 / 2018
Mailing Address 870 Market St Ste 1275		Transaction ID : VNW3HFMAWD8
City San Francisco	State CA	Zip Code 94102-2918
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer (for Individual) Robasciotti & Philipson	Occupation (for Individual) Principal & Wealth Manager	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 200.00	

SUBTOTAL of Receipts This Page (optional).....▶	5700.00
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 52
(check only one)
 11a 11b 11c 12
 13 14 15 16 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. Robasciotti, Rachel, , ,			Date of Receipt <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align:center;">M M M 02</td> <td style="width:33%; text-align:center;">D D D 28</td> <td style="width:33%; text-align:center;">Y Y Y Y Y 2018</td> </tr> </table>			M M M 02	D D D 28	Y Y Y Y Y 2018
M M M 02	D D D 28	Y Y Y Y Y 2018						
Mailing Address 870 Market St Ste 1275			Transaction ID : VNW3HFP4R86					
City San Francisco	State CA	Zip Code 94102-2918	Amount of Each Receipt this Period <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align:right;">200.00</td> </tr> </table>				200.00	
	200.00							
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item					
Name of Employer (for Individual) Robasciotti & Philipson		Occupation (for Individual) Principal & Wealth Manager						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align:right;">400.00</td> </tr> </table>					400.00	
	400.00							

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Robasciotti, Rachel, , ,			Date of Receipt <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align:center;">M M M 03</td> <td style="width:33%; text-align:center;">D D D 28</td> <td style="width:33%; text-align:center;">Y Y Y Y Y 2018</td> </tr> </table>			M M M 03	D D D 28	Y Y Y Y Y 2018
M M M 03	D D D 28	Y Y Y Y Y 2018						
Mailing Address 870 Market St Ste 1275			Transaction ID : VNW3HFR0TV4					
City San Francisco	State CA	Zip Code 94102-2918	Amount of Each Receipt this Period <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align:right;">200.00</td> </tr> </table>				200.00	
	200.00							
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item					
Name of Employer (for Individual) Robasciotti & Philipson		Occupation (for Individual) Principal & Wealth Manager						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align:right;">600.00</td> </tr> </table>					600.00	
	600.00							

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Robasciotti, Rachel, , ,			Date of Receipt <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align:center;">M M M 03</td> <td style="width:33%; text-align:center;">D D D 29</td> <td style="width:33%; text-align:center;">Y Y Y Y Y 2018</td> </tr> </table>			M M M 03	D D D 29	Y Y Y Y Y 2018
M M M 03	D D D 29	Y Y Y Y Y 2018						
Mailing Address 870 Market St Ste 1275			Transaction ID : VNW3HFR0YD2					
City San Francisco	State CA	Zip Code 94102-2918	Amount of Each Receipt this Period <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align:right;">2000.00</td> </tr> </table>				2000.00	
	2000.00							
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item					
Name of Employer (for Individual) Robasciotti & Philipson		Occupation (for Individual) Principal & Wealth Manager						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align:right;">2600.00</td> </tr> </table>					2600.00	
	2600.00							

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align:right;">2400.00</td> </tr> </table>		2400.00
	2400.00		
TOTAL This Period (last page this line number only).....▶	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:20%;"></td> </tr> </table>		

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

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

FOR LINE NUMBER: PAGE 15 OF 52
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Rosen, Hilary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4835 Hutchins PI NW
 City Washington State DC Zip Code 20007-1529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKDKnickerbocker Occupation (for Individual) Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 25 / 2018
Transaction ID : VNW3HFQRMCO
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Slavin, Jeffrey, Z., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5706 Warwick PI
 City Chevy Chase State MD Zip Code 20815-5502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Town Of Somerset, MD Occupation (for Individual) Mayor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 06 / 2018
Transaction ID : VNW3HFKE2J1
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Smith, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 Webster St
 City Newport State RI Zip Code 02840-4031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 17 / 2018
Transaction ID : VNW3HFKV5S6
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00
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 16 OF 52
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Solomon, Cindy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 Elsie St
 City San Francisco State CA Zip Code 94110-5149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSA, Inc. Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 07 / 2018
Transaction ID : VNW3HFP7X0
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Sparks, A, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 Collingwood St
 City San Francisco State CA Zip Code 94114-1907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Masto Foundation Occupation (for Individual) Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 13 / 2018
Transaction ID : VNW3HFPRJ41
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Steinwand, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Perkins St Apt 223
 City Jamaica Plain State MA Zip Code 02130-4323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Social Work
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 02 / 15 / 2018
Transaction ID : VNW3HFNDQ17
 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: (check only one)	PAGE 17 OF 52
	<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. Steinwand, Chris, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2018
Mailing Address 111 Perkins St Apt 223		Transaction ID : VNW3HFPMB10
City Jamaica Plain	State MA	Zip Code 02130-4323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Social Work	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Stern, Diane, S, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 21 / 2018
Mailing Address 90 Gainsborough St Apt 406		Transaction ID : VNW3HFNQAF9
City Boston	State MA	Zip Code 02115-6539
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Occupational Therapist	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Thayer, Susannah, L, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 20 / 2018
Mailing Address 398 Columbus Ave # 37		Transaction ID : VNW3HFNQA19
City Boston	State MA	Zip Code 02116-6008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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 18 OF 52
	<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

A. Vaid, Urvashi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 W End Ave
 Apt 10C
 City New York State NY Zip Code 10023-3664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2018
Transaction ID : VNW3HFKTQE8
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Vaid, Urvashi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 W End Ave
 Apt 10C
 City New York State NY Zip Code 10023-3664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2018
Transaction ID : VNW3HFQS1Y0
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Walsh, Charlie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Monmouth Ct
 City Brookline State MA Zip Code 02446-5634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pathstone Federal Street Occupation (for Individual) Wealth Advisor
 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
 01 / 24 / 2018
Transaction ID : VNW3HFM5KX6
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	850.00
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 19 OF 52
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Weiner, Shari, , ,

Mailing Address 30 E 81St St
Apt 3E

City New York State NY Zip Code 10028-0247

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 ▼
1100.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2018

Transaction ID : VNW3HFN9SW4

Amount of Each Receipt this Period
1100.00

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	32100.00

**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 20 OF 52
<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. Belot, Jana, , ,		Date of Receipt MM / DD / YYYY 03 / 25 / 2018
Mailing Address 201 Alexandria Way Apt 711		Transaction ID : VNW3HFQRK55
City Basking Ridge	State NJ	Zip Code 07920-2772
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Gotta Dance	Occupation (for Individual) Director	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	non-contribution account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gund, Agnes, , ,		Date of Receipt MM / DD / YYYY 03 / 30 / 2018
Mailing Address 765 Park Ave Apt 14B		Transaction ID : VNW3HFRA7P3
City New York	State NY	Zip Code 10021-4271
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) Museum Of Modern Art	Occupation (for Individual) President Emerita, Art Historian	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	non-contribution account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Millman, Debbie, , ,		Date of Receipt MM / DD / YYYY 03 / 26 / 2018
Mailing Address 441 W 24Th St		Transaction ID : VNW3HFQS7Q8
City New York	State NY	Zip Code 10011-1253
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) School Of Visual Arts	Occupation (for Individual) Designer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	non-contribution account

SUBTOTAL of Receipts This Page (optional).....	12000.00
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 21 OF 52
<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. Mondini, Elena, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1326 Laurel Ave
 City Ocean State NJ Zip Code 07712-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spectortel Ind Occupation (for Individual) VP Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt **01 / 04 / 2018**
Transaction ID : VNW3HFK6RA3
 Amount of Each Receipt this Period 100.00
 Memo Item
 non-contribution account

B. Mondini, Elena, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1326 Laurel Ave
 City Ocean State NJ Zip Code 07712-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spectortel Ind Occupation (for Individual) VP Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt **02 / 04 / 2018**
Transaction ID : VNW3HFMZ6P8
 Amount of Each Receipt this Period 100.00
 Memo Item
 non-contribution account

C. Mondini, Elena, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1326 Laurel Ave
 City Ocean State NJ Zip Code 07712-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spectortel Ind Occupation (for Individual) VP Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 04 / 2018**
Transaction ID : VNW3HFP9YK6
 Amount of Each Receipt this Period 100.00
 Memo Item
 non-contribution account

SUBTOTAL of Receipts This Page (optional).....	300.00
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 22 OF 52
<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. Preferred Group Management Account Db a Carr Workplace

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

Mailing Address 1455 Pennsylvania Ave NW
FI 8

City Washington State DC Zip Code 20004-1008

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 ▼
4890.00

Date of Receipt
MM / DD / YYYY
01 / 03 / 2018

Transaction ID : VNW3HFKE2H3

Amount of Each Receipt this Period
4890.00

Memo Item

Refund of Security Deposit - non-contribution account

B. Ricketts, Laura, , ,

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

Mailing Address 430 Sheridan Rd

City Wilmette State IL Zip Code 60091-2821

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

Name of Employer (for Individual) Occupation (for Individual)
Chicago Cubs Co-Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150000.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2018

Transaction ID : VNW3HFRRWV7

Amount of Each Receipt this Period
150000.00

Memo Item

non-contribution account

C. Ritchie, Alix, L, ,

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

Mailing Address PO Box 30220

City Fort Lauderdale State FL Zip Code 33303-0220

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

Name of Employer (for Individual) Occupation (for Individual)
None Media Consultant

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
MM / DD / YYYY
01 / 04 / 2018

Transaction ID : VNW3HFKE2E9

Amount of Each Receipt this Period
3500.00

Memo Item

non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ▶ 158390.00

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 23 OF 52
<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 30220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 63500.00

Date of Receipt 02 / 14 / 2018
Transaction ID : VNW3HFNDQ33
 Amount of Each Receipt this Period 50000.00
 Memo Item
 non-contribution account

B. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 30220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 63500.00

Date of Receipt 02 / 14 / 2018
Transaction ID : VNW3HFNDQ41
 Amount of Each Receipt this Period 10000.00
 Memo Item
 non-contribution account

C. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 30220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 64500.00

Date of Receipt 03 / 26 / 2018
Transaction ID : VNW3HFQV488
 Amount of Each Receipt this Period 1000.00
 Memo Item
 non-contribution account

SUBTOTAL of Receipts This Page (optional).....▶	61000.00
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 24 OF 52
<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. Rosen, Hilary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4835 Hutchins PI NW
 City Washington State DC Zip Code 20007-1529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKDKnickerbocker Occupation (for Individual) Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 11 / 2018
Transaction ID : VNW3HFKJCY8
 Amount of Each Receipt this Period 1000.00
 Memo Item
 non-contribution account

B. Rosen, Hilary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4835 Hutchins PI NW
 City Washington State DC Zip Code 20007-1529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKDKnickerbocker Occupation (for Individual) Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 02 / 11 / 2018
Transaction ID : VNW3HFN7F14
 Amount of Each Receipt this Period 1000.00
 Memo Item
 non-contribution account

C. Rosen, Hilary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4835 Hutchins PI NW
 City Washington State DC Zip Code 20007-1529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKDKnickerbocker Occupation (for Individual) Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 11 / 2018
Transaction ID : VNW3HFPM5G6
 Amount of Each Receipt this Period 1000.00
 Memo Item
 non-contribution account

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 25 OF 52
<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. Sullivan, Betty, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 358 Noe St
 City San Francisco State CA Zip Code 94114-1619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2950.00

Date of Receipt **03 / 29 / 2018**
Transaction ID : VNW3HFR0Z28
 Amount of Each Receipt this Period 2950.00
 Memo Item
 * In-Kind: Inkind - event expenses - non-contribution account

B. Tobias, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 Central Park W
 City New York State NY Zip Code 10023-6297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 22 / 2018**
Transaction ID : VNW3HFQPRS4
 Amount of Each Receipt this Period 1000.00
 Memo Item
 non-contribution account

C. Vaid, Urvashi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 W End Ave Apt 10C
 City New York State NY Zip Code 10023-3664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 870.00

Date of Receipt **02 / 15 / 2018**
Transaction ID : VNW3HFQPV94
 Amount of Each Receipt this Period 870.00
 Memo Item
 * In-Kind: Inkind - food and beverage for fundraising event -non-contribution account

SUBTOTAL of Receipts This Page (optional).....	4820.00
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 26 OF 52
<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. Vaid, Urvashi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 W End Ave
 Apt 10C
 City New York State NY Zip Code 10023-3664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10870.00

Date of Receipt **03 / 22 / 2018**
Transaction ID : VNW3HFQPV87
 Amount of Each Receipt this Period 10000.00
 Memo Item
 * In-Kind: In kind donation for work hours -non-contribution account

B. Vogel, Erin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1616 W Montrose Ave
 Apt 2F
 City Chicago State IL Zip Code 60613-1796
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Publicis Media Occupation (for Individual) Content Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt **01 / 22 / 2018**
Transaction ID : VNW3HFKY161
 Amount of Each Receipt this Period 100.00
 Memo Item
 non-contribution account

C. Vogel, Erin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1616 W Montrose Ave
 Apt 2F
 City Chicago State IL Zip Code 60613-1796
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Publicis Media Occupation (for Individual) Content Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt **02 / 22 / 2018**
Transaction ID : VNW3HFNQMD6
 Amount of Each Receipt this Period 100.00
 Memo Item
 non-contribution account

SUBTOTAL of Receipts This Page (optional).....▶ 10200.00
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 27 OF 52
<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. Vogel, Erin, , ,		Date of Receipt MM / DD / YYYY 03 / 22 / 2018
Mailing Address 1616 W Montrose Ave Apt 2F		Transaction ID : VNW3HFQNW P1
City Chicago	State IL Zip Code 60613-1796	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Publicis Media	Occupation (for Individual) Content Marketing	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	non-contribution account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
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 MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
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).....▶	100.00
TOTAL This Period (last page this line number only).....▶	249810.00

**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 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. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)
ANGIE CRAIG FOR CONGRESS

Date of Disbursement: 01 / 18 / 2018

Mailing Address: PO Box 22116

City: Eagan, State: MN, Zip Code: 55122-0116

Purpose of Disbursement: Campaign Contribution

Candidate Name: CRAIG, ANGELA DAWN, , ,

Office Sought: House, Senate, President

Disbursement For: 2018, Primary, General, Other (specify) ▼

State: MN, District: 02

FEC Identification Number: C00575209
Transaction ID: VNV499WT1J
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. KYRSTEN SINEMA FOR CONGRESS

Full Name (Last, First, Middle Initial)
KYRSTEN SINEMA FOR CONGRESS

Date of Disbursement: 02 / 06 / 2018

Mailing Address: PO Box 25879

City: Tempe, State: AZ, Zip Code: 85285-5879

Purpose of Disbursement: Campaign Contribution

Candidate Name:

Office Sought: House, Senate, President

Disbursement For: 2018, Primary, General, Other (specify) ▼

State: AZ, District: 09

FEC Identification Number: C00508804
Transaction ID: VNV499WT1Z
Amount of Each Disbursement this Period: 2500.00

Memo Item

C. Lauren Baer For Congress

Full Name (Last, First, Middle Initial)
Lauren Baer For Congress

Date of Disbursement: 02 / 12 / 2018

Mailing Address: 6231 Pga Blvd

City: West Palm Beach, State: FL, Zip Code: 33418-4033

Purpose of Disbursement: Camp

Candidate Name: Baer, Lauren, , ,

Office Sought: House, Senate, President

Disbursement For: 2018, Primary, General, Other (specify) ▼

State: FL, District: 18

FEC Identification Number: C00652594
Transaction ID: VNV499WT2I
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	7500.00

**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

A. American Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 4333 Amon Carter Blvd
MD5675

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 16 / 2018

FEC Identification Number: C

Transaction ID : VNV499WSZ

Amount of Each Disbursement this Period: 165.00

Memo Item

B. American Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 4333 Amon Carter Blvd
MD5675

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 16 / 2018

FEC Identification Number: C

Transaction ID : VNV499WSZ

Amount of Each Disbursement this Period: 192.30

Memo Item

C. Authorize.Net

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 8999

City San Francisco State CA Zip Code 94128-8999

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 02 / 2018

FEC Identification Number: C

Transaction ID : VNV499WSZ

Amount of Each Disbursement this Period: 40.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 397.30

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 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. Authorize.Net		Date of Disbursement MM / DD / YYYY 01 / 08 / 2018
Mailing Address PO Box 8999		FEC Identification Number C Transaction ID : VNV499WSZI Amount of Each Disbursement this Period 908.00 Non Contribution Account <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94128-8999	Purpose of Disbursement Bank 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:	

Full Name (Last, First, Middle Initial) B. Authorize.Net		Date of Disbursement MM / DD / YYYY 02 / 02 / 2018
Mailing Address PO Box 8999		FEC Identification Number C Transaction ID : VNV499WSZE Amount of Each Disbursement this Period 40.00 Non Contribution Account <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94128-8999	Purpose of Disbursement Contribution Processing Fees	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:	

Full Name (Last, First, Middle Initial) C. Authorize.Net		Date of Disbursement MM / DD / YYYY 03 / 02 / 2018
Mailing Address PO Box 8999		FEC Identification Number C Transaction ID : VNV499WSZ Amount of Each Disbursement this Period 40.00 Non Contribution Account <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94128-8999	Purpose of Disbursement Contribution Processing Fees	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:	

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

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

988.00

**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

A. Bank Of America

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2018

FEC Identification Number: C

Transaction ID : VNV499WSZ7

Amount of Each Disbursement this Period: 276.43

Memo Item

B. Bank Of America

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2018

FEC Identification Number: C

Transaction ID : VNV499WSZ8

Amount of Each Disbursement this Period: 30.00

Memo Item

C. Bank Of America

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 08 / 2018

FEC Identification Number: C

Transaction ID : VNV499WSZ

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 321.43

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 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. Bank Of America		Date of Disbursement MM / DD / YYYY 02 / 27 / 2018	
Mailing Address 700 13Th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499WSZ/ Amount of Each Disbursement this Period [REDACTED] 30.00	
City Washington	State DC	Zip Code 20005-3950	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Bank Of America		Date of Disbursement MM / DD / YYYY 02 / 28 / 2018	
Mailing Address 700 13Th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499WSZE Amount of Each Disbursement this Period [REDACTED] 15.00	
City Washington	State DC	Zip Code 20005-3950	Category/ Type [REDACTED]
Purpose of Disbursement Bank Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Bankcard		Date of Disbursement MM / DD / YYYY 01 / 02 / 2018	
Mailing Address 28720 Roadside Dr Ste 299		FEC Identification Number C [REDACTED] Transaction ID : VNV499WT0* Amount of Each Disbursement this Period [REDACTED] 11.74	
City Agoura Hills	State CA	Zip Code 91301-4574	Category/ Type [REDACTED]
Purpose of Disbursement Contribution Processing Fees -		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 56.74
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 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. Bankcard		Date of Disbursement MM / DD / YYYY 01 / 02 / 2018
Mailing Address 28720 Roadside Dr Ste 299		FEC Identification Number C Transaction ID : VNV499WT0V Amount of Each Disbursement this Period 1057.23 Non Contribution Account <input type="checkbox"/> Memo Item
City Agoura Hills	State CA Zip Code 91301-4574	
Purpose of Disbursement Contribution Processing Fees		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:		

Full Name (Last, First, Middle Initial) B. Bankcard		Date of Disbursement MM / DD / YYYY 02 / 02 / 2018
Mailing Address 28720 Roadside Dr Ste 299		FEC Identification Number C Transaction ID : VNV499WT0V Amount of Each Disbursement this Period 375.27 Non Contribution Account <input type="checkbox"/> Memo Item
City Agoura Hills	State CA Zip Code 91301-4574	
Purpose of Disbursement Contribution Processing Fees		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:		

Full Name (Last, First, Middle Initial) C. Bankcard		Date of Disbursement MM / DD / YYYY 02 / 02 / 2018
Mailing Address 28720 Roadside Dr Ste 299		FEC Identification Number C Transaction ID : VNV499WT0V Amount of Each Disbursement this Period 107.20 Non Contribution Account <input type="checkbox"/> Memo Item
City Agoura Hills	State CA Zip Code 91301-4574	
Purpose of Disbursement Contribution Processing Fees		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:		

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

1539.70

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 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

A. Bankcard

Full Name (Last, First, Middle Initial)

Mailing Address 28720 Roadside Dr
Ste 299

City Agoura Hills State CA Zip Code 91301-4574

Purpose of Disbursement Contribution Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 02 / 2018

FEC Identification Number **C**

Transaction ID : VNV499WT01

Amount of Each Disbursement this Period 95.27

Memo Item

B. Bankcard

Full Name (Last, First, Middle Initial)

Mailing Address 28720 Roadside Dr
Ste 299

City Agoura Hills State CA Zip Code 91301-4574

Purpose of Disbursement Contribution Processing Fees -

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 02 / 2018

FEC Identification Number **C**

Transaction ID : VNV499WT02

Amount of Each Disbursement this Period 301.55

Memo Item

C. Benjamin, Erica, J, ,

Full Name (Last, First, Middle Initial)

Mailing Address 551 24Th St NE
Apt B

City Washington State DC Zip Code 20002-4817

Purpose of Disbursement Staff Bonus

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 04 / 2018

FEC Identification Number **C**

Transaction ID : VNV499WT11

Amount of Each Disbursement this Period 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2896.82

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 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. Benjamin, Erica, J, ,			Date of Disbursement MM / DD / YYYY 01 / 12 / 2018	
Mailing Address 551 24Th St NE Apt B			FEC Identification Number C [REDACTED] Transaction ID : VNV499WT15 Amount of Each Disbursement this Period 1485.79	
City Washington	State DC	Zip Code 20002-4817	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Salary		Candidate Name	Non Contribution Account <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Memo Item <input type="checkbox"/>	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Benjamin, Erica, J, ,			Date of Disbursement MM / DD / YYYY 01 / 31 / 2018	
Mailing Address 551 24Th St NE Apt B			FEC Identification Number C [REDACTED] Transaction ID : VNV499WT19 Amount of Each Disbursement this Period 1791.61	
City Washington	State DC	Zip Code 20002-4817	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Salary		Candidate Name	Non Contribution Account <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Memo Item <input type="checkbox"/>	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Benjamin, Erica, J, ,			Date of Disbursement MM / DD / YYYY 02 / 15 / 2018	
Mailing Address 551 24Th St NE Apt B			FEC Identification Number C [REDACTED] Transaction ID : VNV499WT1, Amount of Each Disbursement this Period 1601.09	
City Washington	State DC	Zip Code 20002-4817	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Salary		Candidate Name	Non Contribution Account <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Memo Item <input type="checkbox"/>	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional).....▶	4878.49
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 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. Benjamin, Erica, J, ,		Date of Disbursement MM / DD / YYYY 02 / 28 / 2018	
Mailing Address 551 24Th St NE Apt B		FEC Identification Number C [REDACTED] Transaction ID : VNV499WT1E Amount of Each Disbursement this Period 1601.09	
City Washington	State DC	Zip Code 20002-4817	Category/ Type
Purpose of Disbursement Salary		Memo Item <input type="checkbox"/>	
Candidate Name			Non Contribution Account <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. Benjamin, Erica, J, ,		Date of Disbursement MM / DD / YYYY 03 / 14 / 2018	
Mailing Address 551 24Th St NE Apt B		FEC Identification Number C [REDACTED] Transaction ID : VNV499WT1C Amount of Each Disbursement this Period 1601.09	
City Washington	State DC	Zip Code 20002-4817	Category/ Type
Purpose of Disbursement Salary		Memo Item <input type="checkbox"/>	
Candidate Name			Non Contribution Account <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. Benjamin, Erica, J, ,		Date of Disbursement MM / DD / YYYY 03 / 29 / 2018	
Mailing Address 551 24Th St NE Apt B		FEC Identification Number C [REDACTED] Transaction ID : VNV499WT1I Amount of Each Disbursement this Period 1601.09	
City Washington	State DC	Zip Code 20002-4817	Category/ Type
Purpose of Disbursement Salary		Memo Item <input type="checkbox"/>	
Candidate Name			Non Contribution Account <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).....▶	4803.27
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 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

A. Beverage Events Inc

Full Name (Last, First, Middle Initial)

Mailing Address 225 Franklin St

City Boston State MA Zip Code 02110-2804

Purpose of Disbursement Fundraising Event Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT22

Amount of Each Disbursement this Period: 794.50

Memo Item

B. Beverage Events Inc

Full Name (Last, First, Middle Initial)

Mailing Address 225 Franklin St

City Boston State MA Zip Code 02110-2804

Purpose of Disbursement Fundraising Event Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 14 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT2E

Amount of Each Disbursement this Period: 1008.34

Memo Item

C. Cater2Me

Full Name (Last, First, Middle Initial)

Mailing Address 220 Montgomery St

City San Francisco State CA Zip Code 94104-3402

Purpose of Disbursement Event Food/Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT11

Amount of Each Disbursement this Period: 540.44

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2343.28

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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. CNA		Date of Disbursement MM / DD / YYYY 02 / 01 / 2018
Mailing Address 1 Meridian Blvd Ste 3A01		FEC Identification Number C Transaction ID : VNV499WT2C Amount of Each Disbursement this Period 276.43 Non Contribution Account <input type="checkbox"/> Memo Item
City Wyomissing	State PA	
Zip Code 19610-3235		FEC Identification Number C Transaction ID : VNV499WT1T Amount of Each Disbursement this Period 1000.00 Non Contribution Account <input type="checkbox"/> Memo Item
Purpose of Disbursement Insurance		
Candidate Name		FEC Identification Number C Transaction ID : VNV499WT11 Amount of Each Disbursement this Period 5000.00 Non Contribution Account <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. Dana Nessell For MI Attorney General		Date of Disbursement MM / DD / YYYY 01 / 18 / 2018
Mailing Address 724 Sunset St		FEC Identification Number C Transaction ID : VNV499WT1T Amount of Each Disbursement this Period 1000.00 Non Contribution Account <input type="checkbox"/> Memo Item
City Plymouth	State MI	
Zip Code 48170-1077		FEC Identification Number C Transaction ID : VNV499WT11 Amount of Each Disbursement this Period 5000.00 Non Contribution Account <input type="checkbox"/> Memo Item
Purpose of Disbursement Political Contribution		
Candidate Name		FEC Identification Number C Transaction ID : VNV499WT11 Amount of Each Disbursement this Period 5000.00 Non Contribution Account <input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Gaines, Barbara, , ,		Date of Disbursement MM / DD / YYYY 03 / 23 / 2018
Mailing Address 105 W 13Th St Apt 6C		FEC Identification Number C Transaction ID : VNV499WT11 Amount of Each Disbursement this Period 5000.00 Non Contribution Account <input type="checkbox"/> Memo Item
City New York	State NY	
Zip Code 10011-7841		FEC Identification Number C Transaction ID : VNV499WT11 Amount of Each Disbursement this Period 5000.00 Non Contribution Account <input type="checkbox"/> Memo Item
Purpose of Disbursement Fundraising Event Consulting		
Candidate Name		FEC Identification Number C Transaction ID : VNV499WT11 Amount of Each Disbursement this Period 5000.00 Non Contribution Account <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:		

SUBTOTAL of Disbursements This Page (optional).....▶	6276.43
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 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. Gumbs, Lauren, , ,		Date of Disbursement MM / DD / YYYY 01 / 11 / 2018
Mailing Address 129 Cambridge Pl		FEC Identification Number C Transaction ID : VNV499WT1E Amount of Each Disbursement this Period 16666.67 Non Contribution Account <input type="checkbox"/> Memo Item
City Brooklyn	State NY	
Zip Code 11238-2401	Purpose of Disbursement HR Consulting Services	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:	

Full Name (Last, First, Middle Initial) B. Gumbs, Lauren, , ,		Date of Disbursement MM / DD / YYYY 03 / 14 / 2018
Mailing Address 129 Cambridge Pl		FEC Identification Number C Transaction ID : VNV499WT1F Amount of Each Disbursement this Period 16666.60 Non Contribution Account <input type="checkbox"/> Memo Item
City Brooklyn	State NY	
Zip Code 11238-2401	Purpose of Disbursement HR Consulting Services	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:	

Full Name (Last, First, Middle Initial) C. Harmon, Curran, Spielberg & Eisenberg, LLC		Date of Disbursement MM / DD / YYYY 03 / 13 / 2018
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C Transaction ID : VNV499WSZ Amount of Each Disbursement this Period 950.00 Non Contribution Account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20036-4523	Purpose of Disbursement Legal Fees	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:	

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

34283.27

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 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

A. Kate Brown Committee

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 8069

City Portland State OR Zip Code 97207-8069

Purpose of Disbursement Campaign Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 18 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT11

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. Linton Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 68 Jay St Ste 409

City Brooklyn State NY Zip Code 11201-8361

Purpose of Disbursement Media Production

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT1C

Amount of Each Disbursement this Period: 275.00

Non Contribution Account

Memo Item

C. NGP VAN, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1101 15Th St NW Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement Software Subscription

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 02 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT01

Amount of Each Disbursement this Period: 150.00

Non Contribution Account

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2925.00

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 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. NGP VAN, Inc.		Date of Disbursement MM / DD / YYYY 03 / 02 / 2018	
Mailing Address 1101 15Th St NW Ste 500		FEC Identification Number C	
City Washington	State DC	Zip Code 20005-5006	Transaction ID : VNV499WT04
Purpose of Disbursement Software Subscription		Category/ Type	Amount of Each Disbursement this Period 900.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 02 / 01 / 2018	
Mailing Address 911 Panorama Trl S		FEC Identification Number C	
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : VNV499WT0E
Purpose of Disbursement Payroll Processing Fee		Category/ Type	Amount of Each Disbursement this Period 111.43
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 02 / 01 / 2018	
Mailing Address 911 Panorama Trl S		FEC Identification Number C	
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : VNV499WT0I
Purpose of Disbursement Payroll Taxes		Category/ Type	Amount of Each Disbursement this Period 852.85
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	1864.28
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input 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. Paychex		Date of Disbursement MM / DD / YYYY 02 / 01 / 2018
Mailing Address 911 Panorama Trl S		FEC Identification Number C
City Rochester	State NY	
Purpose of Disbursement Payroll Taxes		Transaction ID : VNV499WT2f
Candidate Name		Amount of Each Disbursement this Period 318.94
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"/> Non Contribution Account <input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 02 / 15 / 2018
Mailing Address 911 Panorama Trl S		FEC Identification Number C
City Rochester	State NY	
Purpose of Disbursement Payroll Taxes		Transaction ID : VNV499WT0D
Candidate Name		Amount of Each Disbursement this Period 709.92
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"/> Non Contribution Account <input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 02 / 16 / 2018
Mailing Address 911 Panorama Trl S		FEC Identification Number C
City Rochester	State NY	
Purpose of Disbursement Payroll Processing Fee		Transaction ID : VNV499WT0l
Candidate Name		Amount of Each Disbursement this Period 174.88
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"/> Non Contribution Account <input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	1203.74
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT0F

Amount of Each Disbursement this Period: 111.43

Memo Item

B. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT0C

Amount of Each Disbursement this Period: 700.81

Memo Item

C. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT0I

Amount of Each Disbursement this Period: 651.17

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1463.41

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 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. Paychex		Date of Disbursement MM / DD / YYYY 03 / 15 / 2018
Mailing Address 911 Panorama Trl S		FEC Identification Number C Transaction ID : VNV499WT0J Amount of Each Disbursement this Period 111.43 Non Contribution Account <input type="checkbox"/> Memo Item
City Rochester	State NY	
Zip Code 14625-2396		FEC Identification Number C Transaction ID : VNV499WT0K Amount of Each Disbursement this Period 111.43 Non Contribution Account <input type="checkbox"/> Memo Item
Purpose of Disbursement Payroll Processing Fee	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	FEC Identification Number C Transaction ID : VNV499WT0L Amount of Each Disbursement this Period 637.25 Non Contribution Account <input type="checkbox"/> Memo Item
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 03 / 30 / 2018
Mailing Address 911 Panorama Trl S		FEC Identification Number C Transaction ID : VNV499WT0K Amount of Each Disbursement this Period 111.43 Non Contribution Account <input type="checkbox"/> Memo Item
City Rochester	State NY	
Zip Code 14625-2396		FEC Identification Number C Transaction ID : VNV499WT0L Amount of Each Disbursement this Period 637.25 Non Contribution Account <input type="checkbox"/> Memo Item
Purpose of Disbursement Payroll Processing Fee	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	FEC Identification Number C Transaction ID : VNV499WT0M Amount of Each Disbursement this Period 860.11 Non Contribution Account <input type="checkbox"/> Memo Item
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 03 / 30 / 2018
Mailing Address 911 Panorama Trl S		FEC Identification Number C Transaction ID : VNV499WT0M Amount of Each Disbursement this Period 860.11 Non Contribution Account <input type="checkbox"/> Memo Item
City Rochester	State NY	
Zip Code 14625-2396		FEC Identification Number C Transaction ID : VNV499WT0N Amount of Each Disbursement this Period 860.11 Non Contribution Account <input type="checkbox"/> Memo Item
Purpose of Disbursement Payroll Taxes	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	FEC Identification Number C Transaction ID : VNV499WT0O Amount of Each Disbursement this Period 860.11 Non Contribution Account <input type="checkbox"/> Memo Item
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	860.11
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 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. PoliOps, LLC		Date of Disbursement MM / DD / YYYY 01 / 11 / 2018
Mailing Address PO Box 1572		FEC Identification Number C Transaction ID : VNV499WT10 Amount of Each Disbursement this Period 2100.00 Non Contribution Account <input type="checkbox"/> Memo Item
City Glen Allen	State VA	
Zip Code 23060-1572	Purpose of Disbursement Compliance Consulting	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:	

Full Name (Last, First, Middle Initial) B. PoliOps, LLC		Date of Disbursement MM / DD / YYYY 02 / 06 / 2018
Mailing Address PO Box 1572		FEC Identification Number C Transaction ID : VNV499WT11 Amount of Each Disbursement this Period 3000.00 Non Contribution Account <input type="checkbox"/> Memo Item
City Glen Allen	State VA	
Zip Code 23060-1572	Purpose of Disbursement Compliance Consulting	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:	

Full Name (Last, First, Middle Initial) C. PoliOps, LLC		Date of Disbursement MM / DD / YYYY 03 / 26 / 2018
Mailing Address PO Box 1572		FEC Identification Number C Transaction ID : VNV499WT1; Amount of Each Disbursement this Period 3000.00 Non Contribution Account <input type="checkbox"/> Memo Item
City Glen Allen	State VA	
Zip Code 23060-1572	Purpose of Disbursement Compliance Consulting	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:	

SUBTOTAL of Disbursements This Page (optional).....▶	8100.00
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 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

A. Preferred Insurance Services Inc

Full Name (Last, First, Middle Initial)

Mailing Address 26 Fairfax St SE
Ste G

City Leesburg State VA Zip Code 20175-3621

Purpose of Disbursement Insurance

Candidate Name

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

State: District:

Date of Disbursement: 02 / 01 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT2I

Amount of Each Disbursement this Period: 1126.93

Memo Item

B. Preferred Insurance Services Inc

Full Name (Last, First, Middle Initial)

Mailing Address 26 Fairfax St SE
Ste G

City Leesburg State VA Zip Code 20175-3621

Purpose of Disbursement Insurance

Candidate Name

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

State: District:

Date of Disbursement: 03 / 01 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT2I

Amount of Each Disbursement this Period: 1126.93

Memo Item

C. Preferred Insurance Services Inc

Full Name (Last, First, Middle Initial)

Mailing Address 26 Fairfax St SE
Ste G

City Leesburg State VA Zip Code 20175-3621

Purpose of Disbursement Insurance

Candidate Name

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

State: District:

Date of Disbursement: 03 / 30 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT2I

Amount of Each Disbursement this Period: 1126.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3380.79

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 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. Save The Date

Mailing Address 299 Broadway
Ste 203

City
New York

State
NY

Zip Code
10007-4106

Purpose of Disbursement
Fundraising Event Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : VNV499WT21

Amount of Each Disbursement this Period

Non Contribution Account

Memo Item

Full Name (Last, First, Middle Initial)

B. Save The Date

Mailing Address 299 Broadway
Ste 203

City
New York

State
NY

Zip Code
10007-4106

Purpose of Disbursement
Fundraising Event Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : VNV499WT24

Amount of Each Disbursement this Period

Non Contribution Account

Memo Item

Full Name (Last, First, Middle Initial)

C. Sullivan Communications

Mailing Address 1358 Noe St

City
San Francisco

State
CA

Zip Code
94131-1951

Purpose of Disbursement
Fundraising Promotion Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : VNV499WT2.

Amount of Each Disbursement this Period

Non Contribution Account

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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

A. Sullivan, Betty, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 358 Noe St

City San Francisco State CA Zip Code 94114-1619

Purpose of Disbursement
Inkind - event expenses - non-contribution account

Candidate Name

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

State: District:

Date of Disbursement: 03 / 29 / 2018

FEC Identification Number: C
Transaction ID : VNW3HFR0Z
Amount of Each Disbursement this Period: 2950.00
* In-Kind Received
 Memo Item

B. TargetCue

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 451

City Montclair State NJ Zip Code 07042-0451

Purpose of Disbursement
Communications Consulting

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 03 / 2018

FEC Identification Number: C
Transaction ID : VNV499WT1R
Amount of Each Disbursement this Period: 2000.00
Non Contribution Account
 Memo Item

C. The Turner Group

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement
Political/Strategic Consulting

Candidate Name

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

State: District:

Date of Disbursement: 02 / 16 / 2018

FEC Identification Number: C
Transaction ID : VNV499WT11
Amount of Each Disbursement this Period: 5000.00
Non Contribution Account
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9950.00

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 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

A. The Turner Group

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Political//Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 26 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT2C

Amount of Each Disbursement this Period: 11000.00

Memo Item

B. The Vaid Group LLC

Full Name (Last, First, Middle Initial)

Mailing Address 230 W End Ave Apt 10C

City New York State NY Zip Code 10023-3664

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 06 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT15

Amount of Each Disbursement this Period: 4425.63

Memo Item

C. Best Buy

Full Name (Last, First, Middle Initial)

Mailing Address 7601 Penn Ave S

City Richfield State MN Zip Code 55423-8500

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 06 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT6I

Amount of Each Disbursement this Period: 1533.35

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15425.63

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 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

A. Millenium Broadway

Full Name (Last, First, Middle Initial)

Mailing Address 145 W 44Th St

City New York State NY Zip Code 10036-4012

Purpose of Disbursement Event Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 06 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT6t

Amount of Each Disbursement this Period: 2892.28

* Non Contribution Account

Memo Item

B. The Vaid Group LLC

Full Name (Last, First, Middle Initial)

Mailing Address 230 W End Ave Apt 10C

City New York State NY Zip Code 10023-3664

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT16

Amount of Each Disbursement this Period: 40000.00

Non Contribution Account

Memo Item

C. Tiger Mama

Full Name (Last, First, Middle Initial)

Mailing Address 1363 Boylston St

City Boston State MA Zip Code 02215-3941

Purpose of Disbursement Food - Fundraising Event

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT2:

Amount of Each Disbursement this Period: 1070.00

Non Contribution Account

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 41070.00

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 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. Town Hall Foundation Inc		Date of Disbursement MM / DD / YYYY 02 / 06 / 2018
Mailing Address 123 W 43Rd St		FEC Identification Number C [REDACTED] Transaction ID : VNV499WT1 Amount of Each Disbursement this Period 4000.00
City New York	State NY	Zip Code 10036-6586
Purpose of Disbursement Event Venue Rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" 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. Vaid, Urvashi, , ,		Date of Disbursement MM / DD / YYYY 02 / 15 / 2018
Mailing Address 230 W End Ave Apt 10C		FEC Identification Number C [REDACTED] Transaction ID : VNW3HFQPV Amount of Each Disbursement this Period 870.00
City New York	State NY	Zip Code 10023-3664
Purpose of Disbursement Inkind - food and beverage for fundraising event -non-contribution account		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. Vaid, Urvashi, , ,		Date of Disbursement MM / DD / YYYY 03 / 22 / 2018
Mailing Address 230 W End Ave Apt 10C		FEC Identification Number C [REDACTED] Transaction ID : VNW3HFQPV Amount of Each Disbursement this Period 10000.00
City New York	State NY	Zip Code 10023-3664
Purpose of Disbursement In kind donation for work hours -non-contribution account		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).....▶	14870.00
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 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

A. WeWork Apollo

Full Name (Last, First, Middle Initial)

Mailing Address 810 7Th St NE

City Washington State DC Zip Code 20002-3610

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT1F

Amount of Each Disbursement this Period: 850.00

Memo Item

B. WeWork Apollo

Full Name (Last, First, Middle Initial)

Mailing Address 810 7Th St NE

City Washington State DC Zip Code 20002-3610

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 02 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT13

Amount of Each Disbursement this Period: 450.00

Memo Item

C. WeWork Apollo

Full Name (Last, First, Middle Initial)

Mailing Address 810 7Th St NE

City Washington State DC Zip Code 20002-3610

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2018

FEC Identification Number: C

Transaction ID : VNV499WT1

Amount of Each Disbursement this Period: 450.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	173247.69