

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

O' Say Can You See 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="2015"/>	<input type="text" value="579330.07"/>	<input type="text" value="579330.07"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="353428.27"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1973.18"/>	<input type="text" value="301394.87"/>
(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="355401.45"/>	<input type="text" value="880724.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="159237.33"/>	<input type="text" value="684560.82"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="196164.12"/>	<input type="text" value="196164.12"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="2229.32"/>	
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

O' Say Can You See PAC

Report Covering the Period: From: 07 / 01 / 2015 To: 12 / 31 / 2015

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	199815.00
(ii) Unitemized	112.00	50626.73
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	112.00	250441.73
(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)	112.00	250441.73
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).....	1597.18	48176.65
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	264.00	2776.49
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))..... ▶	1973.18	301394.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1973.18	301394.87

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	150857.19	443680.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	150857.19	443680.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	11000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	6000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	7000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	13000.00
29. Other Disbursements	5880.14	216880.14
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	159237.33	684560.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	159237.33	684560.82

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	112.00	250441.73
34. Total Contribution Refunds (from Line 28(d))	0.00	13000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	112.00	237441.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	150857.19	443680.68
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1597.18	48176.65
38. Net Operating Expenditures (subtract Line 37 from Line 36)	149260.01	395504.03

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

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

FOR LINE NUMBER: PAGE 6 OF 53
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
O' Say Can You See PAC

A. O'MALLEY FOR PRESIDENT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1501 Saint Paul St
 Ste 114
 City Baltimore State MD Zip Code 21202-2808
 FEC ID number of contributing federal political committee. **C** C00578658
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 48176.65

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2015
Transaction ID : VQCFK9M24V4
 Amount of Each Receipt this Period
 1597.18
 Expense Reimbursement

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1597.18
TOTAL This Period (last page this line number only).....▶	1597.18

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

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

FOR LINE NUMBER: PAGE 7 OF 53
(check only one)

<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)
O' Say Can You See PAC

A. GENERATION FORWARD PAC
Full Name (Last, First, Middle Initial)
Mailing Address 1875 Connecticut Ave NW
FI 10
City Washington State DC Zip Code 20009-6046
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 264.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 10 / 2015
Transaction ID : VQCFK9M24X0
Amount of Each Receipt this Period
264.00
List Rental

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	264.00
TOTAL This Period (last page this line number only).....▶	264.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Business Benefits Group

Mailing Address 4069 Chain Bridge Rd
Top

City Fairfax State VA Zip Code 22030-4113

Purpose of Disbursement
Insurance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2015

Transaction ID : VQBGB9HNM85

Amount of Each Disbursement this Period

969.00

Full Name (Last, First, Middle Initial)

B. Campaign Compliance Solutions

Mailing Address 1170 Cushing Cir
Apt 119

City Saint Paul State MN Zip Code 55108-5000

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2015

Transaction ID : VQBGB9HNJR6

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Campaign Compliance Solutions

Mailing Address 1170 Cushing Cir
Apt 119

City Saint Paul State MN Zip Code 55108-5000

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 19 / 2015

Transaction ID : VQBGB9HNJS3

Amount of Each Disbursement this Period

4000.00

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

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

8969.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Campaign Compliance Solutions

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2015

Mailing Address 1170 Cushing Cir
Apt 119

City State Zip Code
Saint Paul MN 55108-5000

Purpose of Disbursement
Compliance Services

Candidate Name

Category/
Type

Transaction ID : VQBGB9HNJT1

Amount of Each Disbursement this Period

2000.00

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Campaign Compliance Solutions

Date of Disbursement

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

Mailing Address 1170 Cushing Cir
Apt 119

City State Zip Code
Saint Paul MN 55108-5000

Purpose of Disbursement
Compliance Services

Candidate Name

Category/
Type

Transaction ID : VQBGB9HNJV9

Amount of Each Disbursement this Period

1500.00

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Campaign Compliance Solutions

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2015

Mailing Address 1170 Cushing Cir
Apt 119

City State Zip Code
Saint Paul MN 55108-5000

Purpose of Disbursement
Compliance Services

Candidate Name

Category/
Type

Transaction ID : VQBGB9HNJW7

Amount of Each Disbursement this Period

1500.00

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

5000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Campaign Compliance Solutions

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Mailing Address 1170 Cushing Cir
Apt 119

Transaction ID : VQBGB9HNJX5

City Saint Paul State MN Zip Code 55108-5000

Amount of Each Disbursement this Period

3000.00

Purpose of Disbursement
Compliance Services

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Capitol Operations, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		21		2015

Mailing Address 421 M St NW

Transaction ID : VQBGB9HNK66

City Washington State DC Zip Code 20001-4607

Amount of Each Disbursement this Period

10200.00

Purpose of Disbursement
Accounting Services

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Capitol Operations, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2015

Mailing Address 421 M St NW

Transaction ID : VQBGB9HNK74

City Washington State DC Zip Code 20001-4607

Amount of Each Disbursement this Period

10200.00

Purpose of Disbursement
Accounting Services

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

23400.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Capitol Operations, LLC

Mailing Address 421 M St NW

City Washington State DC Zip Code 20001-4607

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HNK82

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Capitol Operations, LLC

Mailing Address 421 M St NW

City Washington State DC Zip Code 20001-4607

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HNKA8

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Capitol Operations, LLC

Mailing Address 421 M St NW

City Washington State DC Zip Code 20001-4607

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HNK90

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Capitol Operations, LLC

Mailing Address 421 M St NW

City Washington State DC Zip Code 20001-4607

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2015

Transaction ID : VQBGB9HNKB6

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

B. Rashan Colbert

Mailing Address 4213 Adrienne Dr

City Alexandria State VA Zip Code 22309-2611

Purpose of Disbursement
Travel Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2015

Transaction ID : VQBGB9HNJB3

Amount of Each Disbursement this Period

337.28

Full Name (Last, First, Middle Initial)

C. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2015

Transaction ID : VQBGB9HNJ30

Amount of Each Disbursement this Period

798.73

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

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

7136.01

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2015

Transaction ID : **VQBGB9HNJ48**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : **VQBGB9HNJ55**

Amount of Each Disbursement this Period

319.82

Full Name (Last, First, Middle Initial)

C. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

Transaction ID : **VQBGB9HNJ63**

Amount of Each Disbursement this Period

90.27

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

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

510.09

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2015

Transaction ID : **VQBGB9HNJ71**

Amount of Each Disbursement this Period

44.95

Full Name (Last, First, Middle Initial)

B. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : **VQBGB9HNJ89**

Amount of Each Disbursement this Period

45.04

Full Name (Last, First, Middle Initial)

C. Cybersource

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2015

Transaction ID : **VQBGB9HNJ97**

Amount of Each Disbursement this Period

44.95

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

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

134.94

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Demo Strategies LLC

Mailing Address 442 M St NW
Apt 3

City Washington State DC Zip Code 20001-4655

Purpose of Disbursement
General Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2015

Transaction ID : VQBGB9HNJZ1

Amount of Each Disbursement this Period

3150.00

Full Name (Last, First, Middle Initial)

B. Demo Strategies LLC

Mailing Address 442 M St NW
Apt 3

City Washington State DC Zip Code 20001-4655

Purpose of Disbursement
General Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2015

Transaction ID : VQBGB9HNK09

Amount of Each Disbursement this Period

3150.00

Full Name (Last, First, Middle Initial)

C. Demo Strategies LLC

Mailing Address 442 M St NW
Apt 3

City Washington State DC Zip Code 20001-4655

Purpose of Disbursement
General Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2015

Transaction ID : VQBGB9HNK17

Amount of Each Disbursement this Period

3150.00

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

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

9450.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Demo Strategies LLC

Mailing Address 442 M St NW
Apt 3

City Washington State DC Zip Code 20001-4655

Purpose of Disbursement
General Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2015

Transaction ID : VQBGB9HMK25

Amount of Each Disbursement this Period

3150.00

Full Name (Last, First, Middle Initial)

B. Demo Strategies LLC

Mailing Address 442 M St NW
Apt 3

City Washington State DC Zip Code 20001-4655

Purpose of Disbursement
General Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 18 / 2015

Transaction ID : VQBGB9HMK32

Amount of Each Disbursement this Period

3150.00

Full Name (Last, First, Middle Initial)

C. Demo Strategies LLC

Mailing Address 442 M St NW
Apt 3

City Washington State DC Zip Code 20001-4655

Purpose of Disbursement
General Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2015

Transaction ID : VQBGB9HMK40

Amount of Each Disbursement this Period

6300.00

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

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

12600.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. LexisNexis

Mailing Address 9443 Springboro Pike

City Dayton State OH Zip Code 45409

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 03 / 2015

Transaction ID : VQBGB9HNJC1

Amount of Each Disbursement this Period

1081.00

Full Name (Last, First, Middle Initial)

B. Mark Heinitz, CPA

Mailing Address 6433 Burwell St

City Springfield State VA Zip Code 22150-1215

Purpose of Disbursement
Tax Preparation Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2015

Transaction ID : VQBGB9HNKC4

Amount of Each Disbursement this Period

3315.00

Full Name (Last, First, Middle Initial)

C. NGP VAN, Inc.

Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
Database

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2015

Transaction ID : VQBGB9HNKD1

Amount of Each Disbursement this Period

300.00

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

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

4696.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. NGP VAN, Inc.

Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
Database

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HNKE9

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. David Niven

Mailing Address PO Box 28

City Worthington State OH Zip Code 43085-0028

Purpose of Disbursement
Communications Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HNM43

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. O'MALLEY FOR PRESIDENT

Mailing Address 1501 Saint Paul St
Ste 114

City Baltimore State MD Zip Code 21202-2808

Purpose of Disbursement
Expense Reimbursement - See Below

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VQBGB9HNJD9

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. BuzzMaker US, LLC

Mailing Address 322 Shepard Street, NW

City Washington State DC Zip Code 20011

Purpose of Disbursement
Digital Ads

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 28 / 2015

Transaction ID : **VQBGB9HNJF4**

Amount of Each Disbursement this Period

15000.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. BuzzMaker US, LLC

Mailing Address 322 Shepard Street, NW

City Washington State DC Zip Code 20011

Purpose of Disbursement
Digital Ads

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2015

Transaction ID : **VQBGB9HNJE7**

Amount of Each Disbursement this Period

9106.27

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Frederick Holl

Mailing Address 1224 Saint Paul St

City Baltimore State MD Zip Code 21202-3025

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : **VQBGB9HNJG2**

Amount of Each Disbursement this Period

1837.50

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Sarah Miller

Mailing Address 1654 Euclid St NW

City Washington State DC Zip Code 20009-5634

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : **VQBGB9HNJK6**

Amount of Each Disbursement this Period

4046.88

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Kalen Pruss

Mailing Address 1724 2nd St NW

City Washington State DC Zip Code 20001-1806

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : **VQBGB9HNJJ8**

Amount of Each Disbursement this Period

2843.75

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Sam Salustro

Mailing Address 101 E Mount Royal Ave
Apt 703

City Baltimore State MD Zip Code 21202-8104

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : **VQBGB9HNJM4**

Amount of Each Disbursement this Period

3062.50

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Kara Alyson Turner

Mailing Address 52 Regatta Bay Ct

City Washington State DC Zip Code 20002

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	1			2	0	1	5		

Transaction ID : VQBGB9HNJN2

Amount of Each Disbursement this Period

3	9	3	7	.	5	0
---	---	---	---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Peake DeLancey Printers, LLC

Mailing Address 2500 Schuster Dr

City Hyattsville State MD Zip Code 20781-1190

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : VQBGB9HNM77

Amount of Each Disbursement this Period

5	3	7	.	4	2
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Prairie Meadows

Mailing Address 1 Prairie Meadows Dr

City Altoona State IA Zip Code 50009-2100

Purpose of Disbursement
Event Expenses

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	9			2	0	1	5		

Transaction ID : VQBGB9HNM35

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

2	0	3	7	.	4	2
---	---	---	---	---	---	---

2	0	3	7	.	4	2
---	---	---	---	---	---	---

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, P.C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		21		2015

Mailing Address 1025 Vermont Ave NW
Ste 300

City Washington State DC Zip Code 20005-6302

Purpose of Disbursement
Legal Services

Candidate Name

Category/
Type

Transaction ID : **VQBGB9HNK58**

Amount of Each Disbursement this Period

7,560.00

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Visa

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2015

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Category/
Type

Transaction ID : **VQBGB9HNK7**

Amount of Each Disbursement this Period

4812.14

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Amtrak

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2015

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
Type

Transaction ID : **VQBGB9HNKZ4**

Amount of Each Disbursement this Period

42.00

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

[MEMO ITEM]

*

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

12372.14

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address PO Box 2971

City Omaha State NE Zip Code 68103-2971

Purpose of Disbursement
Telecom

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2015

Transaction ID : VQBGB9HNKH3

Amount of Each Disbursement this Period

236.79

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO Box 2971

City Omaha State NE Zip Code 68103-2971

Purpose of Disbursement
Telecom

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2015

Transaction ID : VQBGB9HNKJ1

Amount of Each Disbursement this Period

300.07

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Extra Space Storage

Mailing Address 7722 Fenton St

City Silver Spring State MD Zip Code 20910-4942

Purpose of Disbursement
Storage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2015

Transaction ID : VQBGB9HNM02

Amount of Each Disbursement this Period

193.53

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Pen & Quill

Mailing Address 1701 N Charles St

City Baltimore State MD Zip Code 21201-5801

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2015

Transaction ID : VQBGB9HNM19

Amount of Each Disbursement this Period

625.34

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. The Robert Morris Inn

Mailing Address 314 N Morris Street

City Oxford State MD Zip Code 21654-1019

Purpose of Disbursement
Event - Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2015

Transaction ID : VQBGB9HNKG5

Amount of Each Disbursement this Period

2739.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 06 / 2015

Transaction ID : VQBGB9HNKK9

Amount of Each Disbursement this Period

13.71

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 06 / 2015

Transaction ID : **VQBGB9HNKM7**

Amount of Each Disbursement this Period: 6.99

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 06 / 2015

Transaction ID : **VQBGB9HNKN5**

Amount of Each Disbursement this Period: 79.68

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 06 / 2015

Transaction ID : **VQBGB9HNKP3**

Amount of Each Disbursement this Period: 70.68

[MEMO ITEM]
*

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2015

Transaction ID : VQBGB9HNKQ0

Amount of Each Disbursement this Period

11.21

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2015

Transaction ID : VQBGB9HNKS6

Amount of Each Disbursement this Period

32.69

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 11 / 2015

Transaction ID : VQBGB9HNKR8

Amount of Each Disbursement this Period

61.19

[MEMO ITEM]

*

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2015

Transaction ID : **VQBGB9HNKT4**

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2015

Transaction ID : **VQBGB9HNKV2**

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2015

Transaction ID : **VQBGB9HNKW0**

Amount of Each Disbursement this Period

17.00

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2015

Transaction ID : VQBGB9HNKX8

Amount of Each Disbursement this Period

34.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 02 / 2015

Transaction ID : VQBGB9HNKY6

Amount of Each Disbursement this Period

13.20

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2015

Transaction ID : VQBGB9HNN60

Amount of Each Disbursement this Period

1840.95

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

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

1840.95

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address PO Box 2971

City Omaha State NE Zip Code 68103-2971

Purpose of Disbursement
Telecom

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2015

Transaction ID : VQBGB9HNNW4

Amount of Each Disbursement this Period

613.14

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Extra Space Storage

Mailing Address 7722 Fenton St

City Silver Spring State MD Zip Code 20910-4942

Purpose of Disbursement
Storage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2015

Transaction ID : VQBGB9HNP55

Amount of Each Disbursement this Period

198.82

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. GoAir

Mailing Address 1250 N Arlington Heights Rd
Ste 500

City Itasca State IL Zip Code 60143-1216

Purpose of Disbursement
In-Flight Internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2015

Transaction ID : VQBGB9HNN78

Amount of Each Disbursement this Period

11.97

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. GoAir

Mailing Address 1250 N Arlington Heights Rd
Ste 500

City Itasca State IL Zip Code 60143-1216

Purpose of Disbursement
In-flight internet

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2015

Transaction ID : VQBGB9HNNG9

Amount of Each Disbursement this Period

36.95

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. GoAir

Mailing Address 1250 N Arlington Heights Rd
Ste 500

City Itasca State IL Zip Code 60143-1216

Purpose of Disbursement
In-flight Internet

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2015

Transaction ID : VQBGB9HNNM0

Amount of Each Disbursement this Period

4.95

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. GoAir

Mailing Address 1250 N Arlington Heights Rd
Ste 500

City Itasca State IL Zip Code 60143-1216

Purpose of Disbursement
In-flight Internet

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2015

Transaction ID : VQBGB9HNP13

Amount of Each Disbursement this Period

35.90

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. GoAir

Mailing Address 1250 N Arlington Heights Rd
Ste 500

City Itasca State IL Zip Code 60143-1216

Purpose of Disbursement
In-flight Internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2015

Transaction ID : **VQBGB9HNP47**

Amount of Each Disbursement this Period

8.90

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2015

Transaction ID : **VQBGB9HNN86**

Amount of Each Disbursement this Period

23.85

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2015

Transaction ID : **VQBGB9HNN93**

Amount of Each Disbursement this Period

19.39

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Travel expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 11 / 2015

Transaction ID : **VQBGB9HNNC7**

Amount of Each Disbursement this Period: 5.12

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Travel expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 13 / 2015

Transaction ID : **VQBGB9HNNND5**

Amount of Each Disbursement this Period: 11.17

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Travel expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 19 / 2015

Transaction ID : **VQBGB9HNNNE3**

Amount of Each Disbursement this Period: 5.56

[MEMO ITEM]
*

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2015

Transaction ID : **VQBGB9HNNF1**

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2015

Transaction ID : **VQBGB9HNNH7**

Amount of Each Disbursement this Period

18.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2015

Transaction ID : **VQBGB9HNNJ5**

Amount of Each Disbursement this Period

31.55

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Travel expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 21 / 2015

Transaction ID : **VQBGB9HNNK2**

Amount of Each Disbursement this Period: 18.08

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Travel expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 21 / 2015

Transaction ID : **VQBGB9HNNN8**

Amount of Each Disbursement this Period: 11.08

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Travel expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 21 / 2015

Transaction ID : **VQBGB9HNNP6**

Amount of Each Disbursement this Period: 5.00

[MEMO ITEM]
*

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2015

Transaction ID : VQBGB9HNNQ4

Amount of Each Disbursement this Period

15.51

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2015

Transaction ID : VQBGB9HNNR2

Amount of Each Disbursement this Period

24.01

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2015

Transaction ID : VQBGB9HNNR0

Amount of Each Disbursement this Period

28.47

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 21 / 2015

Transaction ID : **VQBGB9HNNT8**

Amount of Each Disbursement this Period: 8.25

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 21 / 2015

Transaction ID : **VQBGB9HNNV6**

Amount of Each Disbursement this Period: 6.07

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 23 / 2015

Transaction ID : **VQBGB9HNNX1**

Amount of Each Disbursement this Period: 20.00

[MEMO ITEM]
*

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2015

Transaction ID : **VQBGB9HNP05**

Amount of Each Disbursement this Period

38.72

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 1001 Aviation Blvd

City Linthicum Heights State MD Zip Code 21090

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		04		2015

Transaction ID : **VQBGB9HNNNA1**

Amount of Each Disbursement this Period

297.61

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 77 W Wacker Dr

City Chicago State IL Zip Code 60601-1712

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2015

Transaction ID : **VQBGB9HNP21**

Amount of Each Disbursement this Period

6.99

[MEMO ITEM]

*

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2015			

Transaction ID : VQBGB9HNP63

Amount of Each Disbursement this Period

2543.79

Category/
Type

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO Box 2971

City Omaha State NE Zip Code 68103-2971

Purpose of Disbursement
Telecom

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			23			2015			

Transaction ID : VQBGB9HNPC0

Amount of Each Disbursement this Period

239.63

Category/
Type

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial)

C. Dropbox

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement
Subscription Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			28			2015			

Transaction ID : VQBGB9HNPB2

Amount of Each Disbursement this Period

795.00

Category/
Type

[MEMO ITEM]
*

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

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

2543.79

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Extra Space Storage

Mailing Address 7722 Fenton St

City Silver Spring State MD Zip Code 20910-4942

Purpose of Disbursement
Storage

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	1	5

Transaction ID : **VQBGB9HNPA4**

Amount of Each Disbursement this Period

1	9	8	2
---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. GoAir

Mailing Address 1250 N Arlington Heights Rd
Ste 500

City Itasca State IL Zip Code 60143-1216

Purpose of Disbursement
In-Flight Internet

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	5

Transaction ID : **VQBGB9HNPA96**

Amount of Each Disbursement this Period

5	9	9	5
---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Strange Brew

Mailing Address 88 Market St

City Manchester State NH Zip Code 03101-1911

Purpose of Disbursement
Food & Beverage

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	5

Transaction ID : **VQBGB9HNPD8**

Amount of Each Disbursement this Period

1	0	2	1	3	0
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[MEMO ITEM]

*

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

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

0	0	0	0
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0	0	0	0
---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2015

Transaction ID : **VQBGB9HNP70**

Amount of Each Disbursement this Period

139.12

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2015

Transaction ID : **VQBGB9HNMA1**

Amount of Each Disbursement this Period

3675.78

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO Box 2971

City Omaha State NE Zip Code 68103-2971

Purpose of Disbursement
Telecom

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2015

Transaction ID : **VQBGB9HNN44**

Amount of Each Disbursement this Period

436.73

[MEMO ITEM]

*

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

3675.78

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address PO Box 2971

City Omaha State NE Zip Code 68103-2971

Purpose of Disbursement
Telecom

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 23 / 2015

Transaction ID : **VQBGB9HNMB8**

Amount of Each Disbursement this Period

161.42

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Extra Space Storage

Mailing Address 7722 Fenton St

City Silver Spring State MD Zip Code 20910-4942

Purpose of Disbursement
Storage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2015

Transaction ID : **VQBGB9HNN10**

Amount of Each Disbursement this Period

198.82

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. GoAir

Mailing Address 1250 N Arlington Heights Rd
Ste 500

City Itasca State IL Zip Code 60143-1216

Purpose of Disbursement
In-flight internet service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2015

Transaction ID : **VQBGB9HNMD4**

Amount of Each Disbursement this Period

59.95

[MEMO ITEM]

*

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Pen & Quill

Mailing Address 1701 N Charles St

City Baltimore State MD Zip Code 21201-5801

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2015

Transaction ID : **VQBGB9HNNC6**

Amount of Each Disbursement this Period

371.35

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. The Owl Bar

Mailing Address 1 E Chase St

City Baltimore State MD Zip Code 21202-2526

Purpose of Disbursement
Food & Beverage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2015

Transaction ID : **VQBGB9HNN28**

Amount of Each Disbursement this Period

1011.25

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2015

Transaction ID : **VQBGB9HNN36**

Amount of Each Disbursement this Period

133.72

[MEMO ITEM]

*

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 26 / 2015

Transaction ID : **VQBGB9HNN52**

Amount of Each Disbursement this Period

63.48

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 05 / 2015

Transaction ID : **VQBGB9HNNMY7**

Amount of Each Disbursement this Period

23.80

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 05 / 2015

Transaction ID : **VQBGB9HNMZ4**

Amount of Each Disbursement this Period

5.72

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 05 / 2015

Transaction ID : VQBGB9HNN02

Amount of Each Disbursement this Period

16.26

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2015

Transaction ID : VQBGB9HNMV3

Amount of Each Disbursement this Period

16.95

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2015

Transaction ID : VQBGB9HNMW1

Amount of Each Disbursement this Period

31.63

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Travel expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
11 / 06 / 2015

Transaction ID : **VQBGB9HNMX9**

Amount of Each Disbursement this Period: 27.08

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Travel expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
11 / 08 / 2015

Transaction ID : **VQBGB9HNMT5**

Amount of Each Disbursement this Period: 224.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement Travel expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
11 / 12 / 2015

Transaction ID : **VQBGB9HNMS7**

Amount of Each Disbursement this Period: 6.69

[MEMO ITEM]

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 13 / 2015

Transaction ID : VQBGB9HNMR9

Amount of Each Disbursement this Period

6.46

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2015

Transaction ID : VQBGB9HNMP3

Amount of Each Disbursement this Period

15.82

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2015

Transaction ID : VQBGB9HNMQ1

Amount of Each Disbursement this Period

11.17

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2015

Transaction ID : VQBGB9HNMH4

Amount of Each Disbursement this Period

10.49

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2015

Transaction ID : VQBGB9HNMJ2

Amount of Each Disbursement this Period

10.81

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2015

Transaction ID : VQBGB9HNMK0

Amount of Each Disbursement this Period

10.09

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2015

Transaction ID : **VQBGB9HNMM8**

Amount of Each Disbursement this Period

7.23

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2015

Transaction ID : **VQBGB9HNMM5**

Amount of Each Disbursement this Period

43.04

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 18 / 2015

Transaction ID : **VQBGB9HNME2**

Amount of Each Disbursement this Period

6.31

[MEMO ITEM]

*

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 405 Howard St

City San Francisco State CA Zip Code 94105-2999

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2015

Transaction ID : **VQBGB9HNMFO**

Amount of Each Disbursement this Period

5	6	0	7
---	---	---	---

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		24		2015

Transaction ID : **VQBGB9HNM27**

Amount of Each Disbursement this Period

5	5	8	1	4
---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. The Owl Bar

Mailing Address 1 E Chase St

City Baltimore State MD Zip Code 21202-2526

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2015

Transaction ID : **VQBGB9HNM93**

Amount of Each Disbursement this Period

5	5	8	1	4
---	---	---	---	---

[MEMO ITEM]

*

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

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

5	5	8	1	4
---	---	---	---	---

5	5	8	1	4
---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Kevin Zeithaml

Mailing Address 4604 Fait Ave

City Baltimore State MD Zip Code 21224-4431

Purpose of Disbursement
Salary -Bonus

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 03 / 2015

Transaction ID : VQBGB9HNJA5

Amount of Each Disbursement this Period

1500.00

Category/
Type

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/
Type

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

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

1500.00

150558.66

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. Manchester Democrats

Mailing Address 91 Alexander Dr

City Manchester State NH Zip Code 03109-4501

Purpose of Disbursement
Contribution

Candidate Name
Manchester Democrats

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 08 / 2015

Transaction ID : VQBGB9HNJQ8

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2500.00

2500.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

Full Name (Last, First, Middle Initial)

A. O' Say Can You See - NonFederal

Mailing Address PO Box 468

City Annapolis State MD Zip Code 21404-0468

Purpose of Disbursement
Transfer to Non-Federal Account

Candidate Name
O' Say Can You See - NonFederal

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

Date of Disbursement

/ /

07 / 03 / 2015

Transaction ID : VQBGB9HNGW4

Amount of Each Disbursement this Period

5880.14

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

5880.14

5880.14

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

NAME OF COMMITTEE (In Full)
O' Say Can You See PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PAT MURPHY FOR IOWA	Nature of Debt (Purpose): Refund of Excessive Contribution
Mailing Address PO Box 692	
City State Zip Code Dubuque IA 52004-0692	

Outstanding Balance Beginning This Period <input type="text" value="2229.32"/>	Transaction ID : VQ9HV9H5M04	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2229.32"/>

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

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

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

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

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="2229.32"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="2229.32"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="2229.32"/>