

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

UP PAC

ADDRESS (number and street)

45 POWERS AVE.

Check if different
than previously
reported. (ACC)

SAN FRANCISCO

CA

94110

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00630699

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☒ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2017

through

M M M / D D D / Y Y Y Y Y Y
12 31 2017

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

Bond, Rebecca, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Bond, Rebecca, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 24 2018

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

UP PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2017		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	16112.52	
(c) Total Receipts (from Line 19)	6443.00	62618.70
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	22555.52	62618.70
7. Total Disbursements (from Line 31).....	12270.94	52334.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	10284.58	10284.58
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

UP PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	01	/	2017

To:

M M	/	D D	/	Y Y Y Y Y Y
12	/	31	/	2017

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).....

3939.00

24866.00

(ii) Unitemized

2504.00

27702.70

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

6443.00

52568.70

(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)

6443.00

52568.70

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

10050.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

6443.00

62618.70

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

6443.00

62618.70

DETAILED SUMMARY PAGE of Disbursements

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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	12270.94	52314.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	12270.94	52314.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	20.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12270.94	52334.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12270.94	52334.12

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6443.00	52568.70
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6443.00	52568.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	12270.94	52314.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	12270.94	52314.12

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 16

(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)

UP PAC

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

A. Coto, Leonard, , ,

Mailing Address 13 Jefferson Avenue

City

North Brunswick Township

State

NJ

Zip Code

08902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

DeVry Education Group

Occupation (for Individual)

Network Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2017

Transaction ID : SA11AI.5290

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Hazel, Steven, , ,

Mailing Address 2125 Hayes Street #5

City

San Francisco

State

CA

Zip Code

94117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sauce Labs Inc

Occupation (for Individual)

CTO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 24 / 2017

Transaction ID : SA11AI.5295

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Hazel, Steven, , ,

Mailing Address 2125 Hayes Street #5

City

San Francisco

State

CA

Zip Code

94117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sauce Labs Inc

Occupation (for Individual)

CTO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2017

Transaction ID : SA11AI.5296

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

200.00

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 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UP PAC

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

A. Hazel, Steven, , ,

Mailing Address 2125 Hayes Street #5

City

San Francisco

State

CA

Zip Code

94117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sauce Labs Inc

Occupation (for Individual)

CTO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2017

Transaction ID : SA11AI.5299

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Hazel, Steven, , ,

Mailing Address 2125 Hayes Street #5

City

San Francisco

State

CA

Zip Code

94117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sauce Labs Inc

Occupation (for Individual)

CTO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2017

Transaction ID : SA11AI.5300

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Hughes, Susan, , ,

Mailing Address PO Box 5356

City

Incline Village

State

NV

Zip Code

89450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

United Airlines

Occupation (for Individual)

Airline Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 12 / 2017

Transaction ID : SA11AI.5329

Amount of Each Receipt this Period

27.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

127.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 16

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UP PAC

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

A. Hughes, Susan, , ,

Mailing Address PO Box 5356

City

Incline Village

State

NV

Zip Code

89450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

United Airlines

Occupation (for Individual)

Airline Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2017

Transaction ID : SA11AI.5334

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Hughes, Susan, , ,

Mailing Address PO Box 5356

City

Incline Village

State

NV

Zip Code

89450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

United Airlines

Occupation (for Individual)

Airline Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 12 / 2017

Transaction ID : SA11AI.5339

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

C. Hughes, Susan, , ,

Mailing Address PO Box 5356

City

Incline Village

State

NV

Zip Code

89450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

United Airlines

Occupation (for Individual)

Airline Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 12 / 2017

Transaction ID : SA11AI.5342

Amount of Each Receipt this Period

27.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

81.00

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

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

FOR LINE NUMBER: PAGE 9 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UP PAC

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

A. Hughes, Susan, , ,

Mailing Address PO Box 5356

City

Incline Village

State

NV

Zip Code

89450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

United Airlines

Occupation (for Individual)

Airline Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 12 / 2017

Transaction ID : SA11AI.5348

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Meyer, Michele, , ,

Mailing Address 58 Odiorne Lane

City

Eliot

State

ME

Zip Code

03903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Windham Group

Occupation (for Individual)

RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2017

Transaction ID : SA11AI.5341

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

C. Nuessle, Will, , ,

Mailing Address 1516 Oregon st.

City

Ashland

State

OR

Zip Code

97520

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2017

Transaction ID : SA11AI.5354

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

79.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UP PAC

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

A. Nuessle, Will, , ,

Mailing Address 1516 Oregon st.

City
Ashland

State
OR

Zip Code
97520

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2017

Transaction ID : SA11AI.5355

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Nuessle, Will, , ,

Mailing Address 1516 Oregon st.

City
Ashland

State
OR

Zip Code
97520

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2017

Transaction ID : SA11AI.5356

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Nuessle, Will, , ,

Mailing Address 1516 Oregon st.

City
Ashland

State
OR

Zip Code
97520

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 19 / 2017

Transaction ID : SA11AI.5357

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

75.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 16

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UP PAC

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

A. Puri, Deepak, , ,

Mailing Address 3022 Buchanan St

City

San Francisco

State

CA

Zip Code

94123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

VMWare

Occupation (for Individual)

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2017

Transaction ID : SA11AI.5389

Amount of Each Receipt this Period

3000.00

☐ Memo Item

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

B. Strambio, Caterina, , ,

Mailing Address 46 Blake Street

City

Newton

State

MA

Zip Code

02460

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

UMass

Occupation (for Individual)

Assistant Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2017

Transaction ID : SA11AI.5305

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

C. Sullivan, Blakely, , ,

Mailing Address 44 Wilmington Ave.

City

Dorchester

State

MA

Zip Code

02124

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

IHRSA

Occupation (for Individual)

Sr. Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2017

Transaction ID : SA11AI.5289

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

3127.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 16

(check only one)

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

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NAME OF COMMITTEE (In Full)

UP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Townsend, Burke, , ,

Mailing Address 1450 Pattee Canyon Rd

City
Missoula

State
MT

Zip Code
59803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
none

Occupation (for Individual)
not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	25	/	2017

Transaction ID : SA11AI.5288

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

250.00

3939.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 16

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

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NAME OF COMMITTEE (In Full)

UP PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer Street

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				31				2017					

FEC Identification Number

C**Transaction ID : SB21B.5372**

Amount of Each Disbursement this Period

136.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Evans & Katz

Mailing Address PO Box 75357

City
WashingtonState
DCZip Code
20013Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	1			2	0	1	7		
07				01				2017					

FEC Identification Number

C**Transaction ID : SB21B.5376**

Amount of Each Disbursement this Period

67.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Evans & Katz

Mailing Address PO Box 75357

City
WashingtonState
DCZip Code
20013Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	1	7		
08				05				2017					

FEC Identification Number

C**Transaction ID : SB21B.5379**

Amount of Each Disbursement this Period

54.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

258.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 16

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

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NAME OF COMMITTEE (In Full)

UP PAC

Full Name (Last, First, Middle Initial)

A. Evans & Katz

Mailing Address PO Box 75357

City
WashingtonState
DCZip Code
20013Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	1	7		

FEC Identification Number

C**Transaction ID : SB21B.5382**

Amount of Each Disbursement this Period

40.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Evans & Katz

Mailing Address PO Box 75357

City
WashingtonState
DCZip Code
20013Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	1			2	0	1	7		

FEC Identification Number

C**Transaction ID : SB21B.5384**

Amount of Each Disbursement this Period

54.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Evans & Katz

Mailing Address PO Box 75357

City
WashingtonState
DCZip Code
20013Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	7		

FEC Identification Number

C**Transaction ID : SB21B.5386**

Amount of Each Disbursement this Period

54.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

148.50

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 16

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

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NAME OF COMMITTEE (In Full)

UP PAC

Full Name (Last, First, Middle Initial)

A. Evans & Katz

Mailing Address PO Box 75357

City
WashingtonState
DCZip Code
20013Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				01				2017					

FEC Identification Number

C**Transaction ID : SB21B.5387**

Amount of Each Disbursement this Period

54.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MiddleSeat Consulting

Mailing Address PO Box 21600

City
WashingtonState
DCZip Code
20009Purpose of Disbursement
Development Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				01				2017					

FEC Identification Number

C**Transaction ID : SB21B.5375**

Amount of Each Disbursement this Period

3750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MiddleSeat Consulting

Mailing Address PO Box 21600

City
WashingtonState
DCZip Code
20009Purpose of Disbursement
Development Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
08				05				2017					

FEC Identification Number

C**Transaction ID : SB21B.5378**

Amount of Each Disbursement this Period

3750.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7554.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 16

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

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NAME OF COMMITTEE (In Full)

UP PAC

Full Name (Last, First, Middle Initial)

A. MiddleSeat Consulting

Mailing Address PO Box 21600

City
WashingtonState
DCZip Code
20009Purpose of Disbursement
Development Consulting

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	Y
0	9			1	8			2	0	1	7		

FEC Identification Number

C**Transaction ID : SB21B.5383**

Amount of Each Disbursement this Period

3750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PCMailing Address 1090 Vermont Ave, NW
Suite 750City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Legal Services

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	Y
0	9			0	2			2	0	1	7		

FEC Identification Number

C**Transaction ID : SB21B.5381**

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PCMailing Address 1090 Vermont Ave, NW
Suite 750City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Legal Services

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	Y
1	2			1	4			2	0	1	7		

FEC Identification Number

C**Transaction ID : SB21B.5388**

Amount of Each Disbursement this Period

82.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4132.50

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

12093.34