

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

SYNERGY 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="78578.38"/>	<input type="text" value="78578.38"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="82153.78"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="134000.00"/>	<input type="text" value="241150.00"/>
(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="216153.78"/>	<input type="text" value="319728.38"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="93972.54"/>	<input type="text" value="197547.14"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="122181.24"/>	<input type="text" value="122181.24"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

SYNERGY PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10000.00	27450.00
(ii) Unitemized	0.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10000.00	27650.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	124000.00	213500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	134000.00	241150.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	134000.00	241150.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	134000.00	241150.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	44067.46	121573.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	44067.46	121573.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	49905.08	75973.48
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	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	0.00	0.00
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)) ..	93972.54	197547.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	93972.54	197547.14

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)	134000.00	241150.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	134000.00	241150.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	44067.46	121573.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	44067.46	121573.66

**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 45
(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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)
A. Mohegan Tribal Gaming Authority
 Mailing Address 1 Mohegan Sun Boulevard
 City State Zip Code
 Uncasville CT 06382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2015
Transaction ID : SA11AI.7974
 Amount of Each Receipt this Period
 5000.00
 Contribution

Full Name (Last, First, Middle Initial)
B. Dirk E. Ziff
 Mailing Address 350 Park Avenue
 4th FL
 City State Zip Code
 New York NY 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Investor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2015
Transaction ID : SA11AI.7969
 Amount of Each Receipt this Period
 5000.00
 Contribution

Full Name (Last, First, Middle Initial)
C.
 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 M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ 10000.00
TOTAL This Period (last page this line number only)..... ▶ 10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

Full Name (Last, First, Middle Initial)
A. AMBULATORY SURGERY CENTER ASSOCIATION PAC (ASCAPAC)

Mailing Address 1012 CAMERON ST

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00424788

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 06 / 2015

Transaction ID : SA11C.7960

Amount of Each Receipt this Period
5000.00

Contribution

Full Name (Last, First, Middle Initial)
B. AMERICAN SOCIETY FOR RADIATION ONCOLOGY PAC AKA ASTRO PAC

Mailing Address 8280 WILLOW OAKS CORPORATE DRIVE
SUITE 500

City FAIRFAX State VA Zip Code 22031

FEC ID number of contributing federal political committee. **C** C00384602

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2015

Transaction ID : SA11C.7956

Amount of Each Receipt this Period
2500.00

Contribution

Full Name (Last, First, Middle Initial)
C. ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)

Mailing Address 11921 FREEDOM DRIVE
SUITE 1100

City RESTON State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00447565

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11C.7970

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

Full Name (Last, First, Middle Initial)
A. ASSURANT INC. POLITICAL ACTION COMMITTEE

Mailing Address 501 W. MICHIGAN ST

City State Zip Code
MILWAUKEE WI 53203

FEC ID number of contributing federal political committee. **C** C00185694

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 23 / 2015

Transaction ID : SA11C.7981

Amount of Each Receipt this Period
3500.00

Contribution

Full Name (Last, First, Middle Initial)
B. BANK OF AMERICA CORPORATION FEDERAL PAC

Mailing Address 1455 PENNSYLVANIA AVE, SUITE 950
DC8-455-09-01

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00364778

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 25 / 2015

Transaction ID : SA11C.7972

Amount of Each Receipt this Period
1000.00

Contribution

Full Name (Last, First, Middle Initial)
C. CHICAGO BOARD OPTIONS EXCHANGE PAC

Mailing Address 400 S. LASALLE STREET

City State Zip Code
CHICAGO IL 60605

FEC ID number of contributing federal political committee. **C** C00100693

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 23 / 2015

Transaction ID : SA11C.7980

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

Full Name (Last, First, Middle Initial) A. CIGNA CORPORATION POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 601 PENNSYLVANIA AVENUE NW SOUTH BUILDING SUITE 835		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City WASHINGTON	State DC	Zip Code 20004
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00085316"/>	Transaction ID : SA11C.7965
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
		Contribution

Full Name (Last, First, Middle Initial) B. COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL		Date of Receipt
Mailing Address 1701 JFK BLVD, 49TH FLOOR		<input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2015"/>
City PHILADELPHIA	State PA	Zip Code 19103
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00248716"/>	Transaction ID : SA11C.7968
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
		Contribution

Full Name (Last, First, Middle Initial) C. ERNST & YOUNG POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 1101 NEW YORK AVENUE, NW		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City WASHINGTON	State DC	Zip Code 20005
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00227744"/>	Transaction ID : SA11C.7964
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		Contribution

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

A. FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL (FIDELITY PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 245 SUMMER STREET

City BOSTON	State MA	Zip Code 02210
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FEC ID number of contributing federal political committee. **C** C00380550

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 10 / 19 / 2015
Transaction ID : SA11C.7966
 Amount of Each Receipt this Period: 2000.00
 Contribution

B. GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 2941 FAIRVIEW PARK DR.
SUITE 100

City FALLS CHURCH	State VA	Zip Code 22042
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FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 08 / 2015
Transaction ID : SA11C.7975
 Amount of Each Receipt this Period: 5000.00
 Contribution

C. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Full Name (Last, First, Middle Initial)
Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City WASHINGTON	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt: 09 / 22 / 2015
Transaction ID : SA11C.7955
 Amount of Each Receipt this Period: 3500.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	10500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

A. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 CONSTITUTION AVE. NW
 SUITE 500 WEST
 City WASHINGTON State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C00096156
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 11 / 2015
Transaction ID : SA11C.7976
 Amount of Each Receipt this Period 5000.00
 Contribution

B. INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1750 NEW YORK AVENUE, NW
 City WASHINGTON State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C** C00029447
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 31 / 2015
Transaction ID : SA11C.7984
 Amount of Each Receipt this Period 5000.00
 Contribution

C. INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 SEVENTH ST, NW
 City WASHINGTON State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C00027342
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 16 / 2015
Transaction ID : SA11C.7978
 Amount of Each Receipt this Period 5000.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

Full Name (Last, First, Middle Initial)
A. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2015

Transaction ID : SA11C.7952

Amount of Each Receipt this Period
5000.00

Contribution

Full Name (Last, First, Middle Initial)
B. METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A

Mailing Address 1095 AVENUE OF THE AMERICAS

City NEW YORK	State NY	Zip Code 10036
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FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2015

Transaction ID : SA11C.7971

Amount of Each Receipt this Period
5000.00

Contribution

Full Name (Last, First, Middle Initial)
C. NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M STREET, NW
SUITE 540

City WASHINGTON	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID : SA11C.7957

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

A. NATIONAL RURAL LETTER CARRIERS' ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1630 DUKE STREET
2ND FLOOR

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00072025

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 23 / 2015
Transaction ID : SA11C.7959

Amount of Each Receipt this Period
5000.00

Contribution

B. NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 51 MADISON AVENUE
ROOM 1109

City NEW YORK State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 14 / 2015
Transaction ID : SA11C.7954

Amount of Each Receipt this Period
5000.00

Contribution

C. OPPENHEIMERFUNDS, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1295 STATE STREET

City SPRINGFIELD State MA Zip Code 01111

FEC ID number of contributing federal political committee. **C** C00367920

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
10 / 06 / 2015
Transaction ID : SA11C.7961

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

A. PFIZER INC. PAC
Full Name (Last, First, Middle Initial)
Mailing Address 235 EAST 42ND STREET
City NEW YORK State NY Zip Code 10017
FEC ID number of contributing federal political committee. **C** C00016683
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2015
Transaction ID : SA11C.7979
Amount of Each Receipt this Period
3000.00
Contribution

B. PFIZER INC. PAC
Full Name (Last, First, Middle Initial)
Mailing Address 235 EAST 42ND STREET
City NEW YORK State NY Zip Code 10017
FEC ID number of contributing federal political committee. **C** C00016683
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2015
Transaction ID : SA11C.7985
Amount of Each Receipt this Period
2000.00
Contribution

C. POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS
Full Name (Last, First, Middle Initial)
Mailing Address 317 MASSACHUSETTS AVENUE, NE
1ST FLOOR
City WASHINGTON State DC Zip Code 20002
FEC ID number of contributing federal political committee. **C** C00343137
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2015
Transaction ID : SA11C.7982
Amount of Each Receipt this Period
5000.00
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

A. Full Name (Last, First, Middle Initial)
PRUDENTIAL FINANCIAL INC STATE AND FEDERAL POLITICAL ACTION COMMITTEE AKA PRUDENTIAL STAT

Mailing Address 751 BROAD STREET
14TH FLOOR

City NEWARK State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C** C00493304

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2015

Transaction ID : SA11C.7951

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
QUICKEN LOANS INC PAC

Mailing Address 101 S. WASHINGTON SQ.
SUITE 620

City LANSING State MI Zip Code 48933

FEC ID number of contributing federal political committee. **C** C00388827

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2015

Transaction ID : SA11C.7983

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE

Mailing Address 1750 NEW YORK AVENUE, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
10 / 06 / 2015

Transaction ID : SA11C.7962

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

Full Name (Last, First, Middle Initial)
A. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

Mailing Address 1155 F STREET, NW
SUITE 400

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2015

Transaction ID : SA11C.7953

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. UBS AMERICAS INC. POLITICAL ACTION COMMITTEE (UBS PAC)

Mailing Address 677 WASHINGTON BOULEVARD
C/O PER DYRVIK

City STAMFORD State CT Zip Code 06901

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
12 / 14 / 2015

Transaction ID : SA11C.7977

Amount of Each Receipt this Period
5000.00

Contribution

Full Name (Last, First, Middle Initial)
C. UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Mailing Address 9900 BREN ROAD EAST

City MINNETONKA State MN Zip Code 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
10 / 06 / 2015

Transaction ID : SA11C.7963

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

A. UNITED TECHNOLOGIES CORPORATION POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 PENNSYLVANIA AVE, NW
 10TH FLOOR
 City WASHINGTON State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C** C00035683
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2015
Transaction ID : SA11C.7950
 Amount of Each Receipt this Period
 5000.00
 Contribution

B. VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 I ST NW, STE 400 WEST
 ATTN: TAYLOR CRAIG
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00186288
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : SA11C.7986
 Amount of Each Receipt this Period
 1000.00
 Contribution

C. VOYA FINANCIAL, INC., POLITICAL ACTION COMMITTEE (VOYA FINANCIAL PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 230 PARK AVENUE
 C/O CHIEF LEGAL OFFICER
 City NEW YORK State NY Zip Code 10169
 FEC ID number of contributing federal political committee. **C** C00184028
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2015
Transaction ID : SA11C.7958
 Amount of Each Receipt this Period
 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

A. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW
SUITE 430

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 10 / 2015
Transaction ID : SA11C.7967

Amount of Each Receipt this Period
5000.00

Contribution

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	124000.00

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Fundraising: Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 20 / 2015

Transaction ID : **SB21B.7891**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Fundraising: Fees

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 : **SB21B.8012**

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

C. Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Fundraising: Fees & 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 / 21 / 2015

Transaction ID : **SB21B.7897**

Amount of Each Disbursement this Period

4236.00

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

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

9486.00

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Fundraising: Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2015

Transaction ID : SB21B.7899

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Fundraising: Fees/Bonus

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2015

Transaction ID : SB21B.7902

Amount of Each Disbursement this Period

4750.00

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 36001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
PAC Travel Expenses (Over \$200 Itemized 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 / 15 / 2015

Transaction ID : SB21B.7989

Amount of Each Disbursement this Period

1522.22

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

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

9772.22

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Napa Valley Lodge

Mailing Address 2230 Madison Street

City Yountville State CA Zip Code 94599

Purpose of Disbursement
PAC Travel Expense: Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2015

Transaction ID : SB21B.7989.0

Amount of Each Disbursement this Period

1083.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. The Westin St. Francis

Mailing Address Union Square
335 Powell Street

City San Francisco State CA Zip Code 94012

Purpose of Disbursement
PAC Travel Expense: Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2015

Transaction ID : SB21B.7989.1

Amount of Each Disbursement this Period

439.22

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 36001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Credit Card Charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 11 / 2015

Transaction ID : SB21B.8043

Amount of Each Disbursement this Period

101.17

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

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

101.17

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 36001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Credit Card Charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2015

Transaction ID : **SB21B.7901**

Amount of Each Disbursement this Period

153.81

Category/
Type

Full Name (Last, First, Middle Initial)

B. Chase Card Services

Mailing Address PO Box 15163

City State Zip Code
Wilmington DE 19885

Purpose of Disbursement
PAC Travel Expenses (Over \$200 Itemized Below)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2015

Transaction ID : **SB21B.7995**

Amount of Each Disbursement this Period

755.28

Category/
Type

Full Name (Last, First, Middle Initial)

C. Virgin America

Mailing Address 555 Airport Boulevard

City State Zip Code
Burlingame CA 94010

Purpose of Disbursement
PAC Travel Expense: Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2015

Transaction ID : **SB21B.7995.0**

Amount of Each Disbursement this Period

653.20

Category/
Type

[MEMO ITEM]

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

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

909.09

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Bottega Ristorante

Mailing Address 6525 Washington Street
A9

City Yountville State CA Zip Code 94599

Purpose of Disbursement
PAC Travel Expense: Meal

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.7995.1**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Robert Trent Jones Golf Club

Mailing Address One Turtle Point Drive

City Gainesville State VA Zip Code 20155-2800

Purpose of Disbursement
Fundraising Event: Food, Beverages, Golfing Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.7895**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. The Waverly Group, Inc.

Mailing Address 6849 Old Dominion Dr.
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement
PAC Mngmt/Compliance: Fees & Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.7890**

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)
SYNERGY PAC

Full Name (Last, First, Middle Initial) A. The Waverly Group, Inc.		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 6849 Old Dominion Dr. Suite 222		Transaction ID : SB21B.7892
City McLean	State VA	
Purpose of Disbursement PAC Mngmt/Compliance: Fees & Expenses		Amount of Each Disbursement this Period 2025.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. The Waverly Group, Inc.		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 6849 Old Dominion Dr. Suite 222		Transaction ID : SB21B.7893
City McLean	State VA	
Purpose of Disbursement PAC Mngmt/Compliance: Fees & Expenses		Amount of Each Disbursement this Period 2025.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. The Waverly Group, Inc.		Date of Disbursement MM / DD / YYYY 10 / 01 / 2015
Mailing Address 6849 Old Dominion Dr. Suite 222		Transaction ID : SB21B.7894
City McLean	State VA	
Purpose of Disbursement PAC Mngmt/Compliance: Fees & Expenses		Amount of Each Disbursement this Period 2058.53
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	6108.53
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)
SYNERGY PAC

A. The Waverly Group, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 6849 Old Dominion Dr.
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement PAC Mngmt/Compliance: Fees & Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 03 / 2015

Transaction ID : **SB21B.7898**

Amount of Each Disbursement this Period: 2025.00

Category/Type

B. The Waverly Group, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 6849 Old Dominion Dr.
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement PAC Mngmt/Compliance: Fees & Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 08 / 2015

Transaction ID : **SB21B.7900**

Amount of Each Disbursement this Period: 2025.00

Category/Type

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: MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional).....	4050.00
TOTAL This Period (last page this line number only).....	43943.41

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
In-Kind Contribution: Reimbursement: Airfare (Itemized Below)

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 20 / 2015

Transaction ID : **SB23.8014**

Amount of Each Disbursement this Period

716.02

Full Name (Last, First, Middle Initial)

B. Cape Air

Mailing Address 660 Barnstable Road

City Hyannis State MA Zip Code 02601

Purpose of Disbursement
In-Kind Contribution: Reimbursement: Airfare

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 20 / 2015

Transaction ID : **SB23.8014.0**

Amount of Each Disbursement this Period

716.02

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
In-Kind Contributions: Reimbursements: Transp/Meals/Lodging/Airfare (Itemized Below)

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) ▼
State: District: Other

Date of Disbursement

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

Transaction ID : **SB23.8018**

Amount of Each Disbursement this Period

3573.21

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

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

4289.23

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Royal Coach Limousine and Bus Company

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2015

Mailing Address 988 Enterprise Way

Transaction ID : SB23.8018.0

City Napa State CA Zip Code 94558

Amount of Each Disbursement this Period

245.00

Purpose of Disbursement
In-Kind Contribution: Reimbursement: Transportation

Category/Type

[MEMO ITEM]

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) Other

Full Name (Last, First, Middle Initial)

B. The Westin St. Francis

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2015

Mailing Address Union Square
335 Powell Street

Transaction ID : SB23.8018.1

City San Francisco State CA Zip Code 94012

Amount of Each Disbursement this Period

426.51

Purpose of Disbursement
In-Kind Contribution: Reimbursement: Meals & Lodging

Category/Type

[MEMO ITEM]

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) Other

Full Name (Last, First, Middle Initial)

C. Five Emerald Limousine

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2015

Mailing Address 1310 Turk Street
Suite 204

Transaction ID : SB23.8018.2

City San Francisco State CA Zip Code 94115

Amount of Each Disbursement this Period

110.50

Purpose of Disbursement
In-Kind Contribution: Reimbursement: Transportation

Category/Type

[MEMO ITEM]

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) Other

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

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

0.00

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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 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Virgin America

Mailing Address 555 Airport Boulevard

City Burlingame State CA Zip Code 94010

Purpose of Disbursement
In-Kind Contribution: Reimbursement: Airfare

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 13 / 2015

Transaction ID : SB23.8018.3

Amount of Each Disbursement this Period

2446.20

[MEMO ITEM]

B. Royal Coach Limousine and Bus Company

Mailing Address 988 Enterprise Way

City Napa State CA Zip Code 94558

Purpose of Disbursement
In-Kind Contribution: Reimbursement: Transportation

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 16 / 2015

Transaction ID : SB23.8018.4

Amount of Each Disbursement this Period

345.00

[MEMO ITEM]

C. American Express

Mailing Address P.O. Box 36001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
In-Kind Contributions: Lodging (Itemized Below)

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) Other

State: MA District: 09

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2015

Transaction ID : SB23.8016

Amount of Each Disbursement this Period

1156.08

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

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

1156.08

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. The Summer House

Mailing Address 17 Ocean Avenue

City Siasconset State MA Zip Code 02564

Purpose of Disbursement
In-Kind Contribution: Lodging

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

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

Transaction ID : **SB23.8016.0**

Amount of Each Disbursement this Period

1	1	5	6	.	0	8
---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 36001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
In-Kind Contribution: Lodging/Transp/Meals/Beverages (Itemized Below)

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) ▼
State: District: Other

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	5	

Transaction ID : **SB23.8027**

Amount of Each Disbursement this Period

1	4	2	2	.	2	1
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
In-Kind Contribution: Transportation

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) ▼
State: District: Other

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	4			2	0	1	5	

Transaction ID : **SB23.8027.0**

Amount of Each Disbursement this Period

2	4	.	5	6
---	---	---	---	---

[MEMO ITEM]

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

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

1	4	2	2	.	2	1
---	---	---	---	---	---	---

1	4	2	2	.	2	1
---	---	---	---	---	---	---

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. National Taxi

Mailing Address 2270 McKinnon

City San Francisco State CA Zip Code 94124

Purpose of Disbursement
In-Kind Contribution: Transportation

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) Other
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2015

Transaction ID : SB23.8027.1

Amount of Each Disbursement this Period

20.04

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. The Westin St. Francis

Mailing Address Union Square
335 Powell Street

City San Francisco State CA Zip Code 94012

Purpose of Disbursement
In-Kind Contribution: Lodging

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) Other
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2015

Transaction ID : SB23.8027.2

Amount of Each Disbursement this Period

121.14

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Bouchon

Mailing Address 6534 Washington Street

City Yountville State CA Zip Code 94599

Purpose of Disbursement
In-Kind Contribution: Meal

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) Other
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2015

Transaction ID : SB23.8027.3

Amount of Each Disbursement this Period

75.32

[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 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. News Express

Mailing Address Terminal 2
S.F.O.

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
In-Kind Contribution: Beverages

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 16 / 2015

Transaction ID : SB23.8027.4

Amount of Each Disbursement this Period

11.68

[MEMO ITEM]

B. Vintage Inn

Mailing Address 6541 Washington Street

City Yountville-Napa Valley State CA Zip Code 94599

Purpose of Disbursement
In-Kind Contribution: Lodging

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2015

Transaction ID : SB23.8027.5

Amount of Each Disbursement this Period

597.25

[MEMO ITEM]

C. Uber

Mailing Address 1455 Market Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
In-Kind Contribution: Transportation

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2015

Transaction ID : SB23.8027.6

Amount of Each Disbursement this Period

7.92

[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 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Vintage Inn

Mailing Address 6541 Washington Street

City Yountville-Napa Valley State CA Zip Code 94599

Purpose of Disbursement
In-Kind Contribution: Lodging

Candidate Name
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (DCCC)

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) Other

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 36001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
In-Kind Contribution: Lodging (Itemized Below)

Candidate Name
JOBS, OPPORTUNITIES AND EDUCATION PAC (JOE-PAC)

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) Other

Full Name (Last, First, Middle Initial)

C. Embassy Suites

Mailing Address 86 Congress Street

City Saratoga Springs State NY Zip Code 12866

Purpose of Disbursement
In-Kind Contribution: Lodging

Candidate Name
JOBS, OPPORTUNITIES AND EDUCATION PAC (JOE-PAC)

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) Other

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2015

Transaction ID : **SB23.8027.7**

Amount of Each Disbursement this Period

564.30

[MEMO ITEM]

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2015

Transaction ID : **SB23.8037**

Amount of Each Disbursement this Period

12.00

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2015

Transaction ID : **SB23.8037.0**

Amount of Each Disbursement this Period

12.00

[MEMO ITEM]

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

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

12.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 36001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
In-Kind Contributions: Transp/Lodging/Food/Beverages/Parking (Itemized Below)

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

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

Transaction ID : **SB23.8041**

Amount of Each Disbursement this Period

525.56

Full Name (Last, First, Middle Initial)

B. Taxi Service

Mailing Address 19 Newtown Road

City State Zip Code
Nantucket MA 02554

Purpose of Disbursement
In-Kind Contribution: Transportation

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
08			20			2015			

Transaction ID : **SB23.8041.0**

Amount of Each Disbursement this Period

20.02

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. The Summer House

Mailing Address 17 Ocean Avenue

City State Zip Code
Siasconset MA 02564

Purpose of Disbursement
In-Kind Contribution: Lodging

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
08			20			2015			

Transaction ID : **SB23.8041.1**

Amount of Each Disbursement this Period

183.15

[MEMO ITEM]

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

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

525.56

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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 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Starbucks

Mailing Address 2000 Post Road

City Warwick State RI Zip Code 02886

Purpose of Disbursement
In-Kind Contribution: Beverage

Candidate Name

WILLIAM RICHARD KEATING

Office Sought: House
 Senate
 President
State: MA District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB23.8041.2

Amount of Each Disbursement this Period

4	.	9	1
---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. The Hub of Nantucket

Mailing Address 31 Main Street

City Nantucket State MA Zip Code 02554

Purpose of Disbursement
In-Kind Contribution: Food/Beverages

Candidate Name

WILLIAM RICHARD KEATING

Office Sought: House
 Senate
 President
State: MA District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB23.8041.3

Amount of Each Disbursement this Period

3	0	.	0	9
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CRU

Mailing Address 1 Straight Wharf

City Nantucket State MA Zip Code 02554

Purpose of Disbursement
In-Kind Contribution: Meal

Candidate Name

WILLIAM RICHARD KEATING

Office Sought: House
 Senate
 President
State: MA District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB23.8041.4

Amount of Each Disbursement this Period

1	2	9	.	0	8
---	---	---	---	---	---

[MEMO ITEM]

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

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

0	.	0	0
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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 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Dave's Taxi

Mailing Address 15 Helens Drive

City Nantucket State MA Zip Code 02554

Purpose of Disbursement
In-Kind Contribution: Transportation

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

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

Transaction ID : SB23.8041.5

Amount of Each Disbursement this Period

1	3	.	2	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. The Hub of Nantucket

Mailing Address 31 Main Street

City Nantucket State MA Zip Code 02554

Purpose of Disbursement
In-Kind Contributions: Food/Beverages

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

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

Transaction ID : SB23.8041.6

Amount of Each Disbursement this Period

1	0	.	7	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Jetties

Mailing Address 4 Bathing Beach Road

City Nantucket State MA Zip Code 02554

Purpose of Disbursement
In-Kind Contribution: Meal

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

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

Transaction ID : SB23.8041.7

Amount of Each Disbursement this Period

6	9	.	7	5
---	---	---	---	---

[MEMO ITEM]

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

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

0	0	0	0	0
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0	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 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Petticoat Row Bakery

Mailing Address 35 Centre Street

City Nantucket State MA Zip Code 02554

Purpose of Disbursement
In-Kind Contribution: Food/Beverages

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

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

Transaction ID : SB23.8041.8

Amount of Each Disbursement this Period

2	8	.	4	6
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Double Decker Taxi

Mailing Address 16 Hummock Pond Road

City Nantucket State MA Zip Code 02554

Purpose of Disbursement
In-Kind Contribution: Transportation

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	3			2	0	1	5	

Transaction ID : SB23.8041.9

Amount of Each Disbursement this Period

1	9	.	4	5
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Providence Airport

Mailing Address 2000 Post Road

City Warwick State RI Zip Code 02886

Purpose of Disbursement
In-Kind Contribution: Parking

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	3			2	0	1	5	

Transaction ID : SB23.8041.10

Amount of Each Disbursement this Period

1	2	.	0	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 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Crosswinds Restaurant

Mailing Address 14 Airport Road

City Nantucket State MA Zip Code 02554

Purpose of Disbursement
In-Kind Contribution: Food/Beverage

Candidate Name
WILLIAM RICHARD KEATING

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2015

Transaction ID : **SB23.8041.11**

Amount of Each Disbursement this Period

4.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BARRAGAN FOR CONGRESS

Mailing Address 1840 SOUTH GAFFEY STREET #421

City SAN PEDRO State CA Zip Code 90731

Purpose of Disbursement
Contribution

Candidate Name
NANETTE BARRAGAN

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CA District: 44

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2015

Transaction ID : **SB23.7918**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. BLUMENTHAL FOR CONNECTICUT

Mailing Address 777 SUMMER STREET STE 103
C/O CACACE TUSCH & SANTAGATA

City STAMFORD State CT Zip Code 06901

Purpose of Disbursement
Contribution

Candidate Name
RICHARD BLUMENTHAL

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CT District: 00

Date of Disbursement

MM / DD / YYYY
12 / 28 / 2015

Transaction ID : **SB23.7919**

Amount of Each Disbursement this Period

5000.00

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

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

6000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF CHERI BUSTOS

Mailing Address 1050 17TH ST NW STE 590

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Contribution

Candidate Name
CHERI BUSTOS

Office Sought: House
 Senate
 President
State: IL District: 17

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : **SB23.7921**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ELIZABETH ESTY

Mailing Address PO BOX 61

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement
Contribution

Candidate Name
ELIZABETH ESTY

Office Sought: House
 Senate
 President
State: CT District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Convention

Date of Disbursement

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

Transaction ID : **SB23.7924**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ELIZABETH ESTY

Mailing Address PO BOX 61

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement
Contribution

Candidate Name
ELIZABETH ESTY

Office Sought: House
 Senate
 President
State: CT District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Convention

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : **SB23.7925**

Amount of Each Disbursement this Period

1000.00

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

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

3500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. KYRSTEN SINEMA FOR CONGRESS

Mailing Address PO BOX 25879

City TEMPE State AZ Zip Code 85285

Purpose of Disbursement
Contribution

Candidate Name

KYRSTEN SINEMA

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: AZ District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2015			

Transaction ID : SB23.7934

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LOUISE SLAUGHTER RE-ELECTION COMMITTEE

Mailing Address P.O. BOX 30632

City ROCHESTER State NY Zip Code 14603

Purpose of Disbursement
Contribution

Candidate Name

LOUISE M SLAUGHTER

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 25

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2015			

Transaction ID : SB23.7935

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MARCIA FUDGE FOR CONGRESS

Mailing Address 3729 SILSBY RD

City UNIVERSITY HEIGHTS State OH Zip Code 44118

Purpose of Disbursement
Contribution

Candidate Name

MARCIA L FUDGE

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			28			2015			

Transaction ID : SB23.7926

Amount of Each Disbursement this Period

5000.00

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

7000.00

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 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. MOULTON FOR CONGRESS

Mailing Address PO BOX 2013

City SALEM State MA Zip Code 01970

Purpose of Disbursement
Contribution

Candidate Name
SETH MOULTON

Office Sought: House
 Senate
 President
State: MA District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	5		

Transaction ID : SB23.7932

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. PEOPLE FOR DEREK KILMER

Mailing Address PO BOX 1381

City TACOMA State WA Zip Code 98402

Purpose of Disbursement
Contribution

Candidate Name
DEREK KILMER

Office Sought: House
 Senate
 President
State: WA District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB23.7929

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. PETE AGUILAR FOR CONGRESS

Mailing Address PO BOX 10954

City SAN BERNARDINO State CA Zip Code 92423

Purpose of Disbursement
Contribution

Candidate Name
PETE AGUILAR

Office Sought: House
 Senate
 President
State: CA District: 31

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	5		

Transaction ID : SB23.7915

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

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

6	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

6	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 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. PETE AGUILAR FOR CONGRESS

Mailing Address PO BOX 10954

City State Zip Code
SAN BERNARDINO CA 92423

Purpose of Disbursement
Contribution

Candidate Name

PETE AGUILAR

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 31

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2015

Transaction ID : SB23.7916

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. SEAN PATRICK MALONEY FOR CONGRESS

Mailing Address PO BOX 270

City State Zip Code
NEWBURGH NY 12550

Purpose of Disbursement
Contribution

Candidate Name

SEAN PATRICK MALONEY

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 18

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SB23.7931

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. VAN HOLLEN FOR SENATE

Mailing Address 10605 CONCORD ST SUITE 202

City State Zip Code
KENSINGTON MD 20895

Purpose of Disbursement
Contribution

Candidate Name

CHRIS VAN HOLLEN

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MD District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SB23.7936

Amount of Each Disbursement this Period

2500.00

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. VICTORY IN NOVEMBER ELECTION PAC (VINEPAC)

Mailing Address 700 13TH STREET, NW SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2015 Primary General Other (specify) Other

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 26 / 2015

Transaction ID : **SB23.7937**

Amount of Each Disbursement this Period: 1000.00

Category/Type

Full Name (Last, First, Middle Initial)

B. VICTORY IN NOVEMBER ELECTION PAC (VINEPAC)

Mailing Address 700 13TH STREET, NW SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2015 Primary General Other (specify) Other

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 26 / 2015

Transaction ID : **SB23.7938**

Amount of Each Disbursement this Period: 500.00

Category/Type

Full Name (Last, First, Middle Initial)

C. VICTORY IN NOVEMBER ELECTION PAC (VINEPAC)

Mailing Address 700 13TH STREET, NW SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2015 Primary General Other (specify) Other

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 26 / 2015

Transaction ID : **SB23.7939**

Amount of Each Disbursement this Period: 500.00

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. VICTORY IN NOVEMBER ELECTION PAC (VINEPAC)

Mailing Address 700 13TH STREET, NW SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2015 Primary General Other (specify) Other

State: District:

Date of Disbursement: 09 / 29 / 2015

Transaction ID : SB23.7940

Amount of Each Disbursement this Period: 500.00

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

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement:

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

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement:

Amount of Each Disbursement this Period:

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 500.00

TOTAL This Period (last page this line number only)..... ▶ 49905.08