

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.

L PAC

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

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

Rosen, Hilary, , ,

Type or Print Name of Treasurer

Signature of Treasurer Rosen, Hilary, , , [Electronically Filed] Date / /

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

L PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="9498.11"/>	<input type="text" value="9498.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9498.11"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="128912.66"/>	<input type="text" value="128912.66"/>
(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="138410.77"/>	<input type="text" value="138410.77"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="123775.27"/>	<input type="text" value="123775.27"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14635.50"/>	<input type="text" value="14635.50"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

L PAC

Report Covering the Period: From: 01 / 01 / 2020 To: 03 / 31 / 2020

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).....	35200.00	35200.00
(ii) Unitemized	1695.00	1695.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	36895.00	36895.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	36895.00	36895.00
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.).....	92017.66	92017.66
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)).....▶	128912.66	128912.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	128912.66	128912.66

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

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	1269.85	1269.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1269.85	1269.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	3500.00
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).....	119005.42	119005.42
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)) ..	123775.27	123775.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	123775.27	123775.27

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)	36895.00	36895.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36895.00	36895.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1269.85	1269.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1269.85	1269.85

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
L PAC

A. Aberly, Naomi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 Derne St
 Apt 5A
 City Boston State MA Zip Code 02114-4212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 06 / 2020
Transaction ID : VNW3HH953J7
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9375.00

Date of Receipt 02 / 09 / 2020
Transaction ID : VNW3HH953J7E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Bernstein, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 Ellery St
 City Cambridge State MA Zip Code 02138-4355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 16 / 2020
Transaction ID : VNW3HHA98E9
 Amount of Each Receipt this Period 350.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9375.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 16 / 2020

Transaction ID : VNW3HHA98E9E

Amount of Each Receipt this Period
350.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Boudreau-Steevs, Lauren, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4 Sanderson Ct

City Gloucester	State MA	Zip Code 01930-1145
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Iron Mountain Program Manager

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
02 / 17 / 2020

Transaction ID : VNW3HHAD8H5

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

C. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9375.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 23 / 2020

Transaction ID : VNW3HHAD8H5E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	250.00
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 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Casella, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Babe Thompson Rd
 City La Selva Beach State CA Zip Code 95076-8527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Netflix Engineering Director
 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
 02 / 06 / 2020
Transaction ID : VNW3HHDTY99
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Conley, Clare, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Rocky Nook Ter
 City Boston State MA Zip Code 02130-2902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Assesst Performance President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2020
Transaction ID : VNW3HHAD8D4
 Amount of Each Receipt this Period
 500.00
 Memo Item
 * Earmarked Contribution: See Below

C. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 9375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2020
Transaction ID : VNW3HHAD8D4E
 Amount of Each Receipt this Period
 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

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 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Cruz, Ana, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1726 E 7Th Ave

City Tampa	State FL	Zip Code 33605-3816
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Ballard Partners	Occupation (for Individual) Govt Affairs
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
01 / 22 / 2020

Transaction ID : VNW3HH8C694

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 616 E 4Th St

City Boston	State MA	Zip Code 02127-3325
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Greater Boston Food Bank	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2020

Transaction ID : VNW3HHAD8E2

Amount of Each Receipt this Period
500.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9375.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2020

Transaction ID : VNW3HHAD8E2E

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 67
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
L PAC

A. Duff, Eileen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Barberry Heights Rd
 City Gloucester State MA Zip Code 01930-1201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Of Massachusetts Occupation (for Individual) Governor's Councillor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 04 / 2020**
Transaction ID : VNW3HH953H9
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9375.00

Date of Receipt **02 / 09 / 2020**
Transaction ID : VNW3HH953H9E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Felicio, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 Westchester Rd Westchester Road
 City Jamaica Plain State MA Zip Code 02130-3451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Community Catalyst Occupation (for Individual) Chief Operating Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 27 / 2020**
Transaction ID : VNW3HHAKG88
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Foy, Lynne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 Church St
 City Newton State MA Zip Code 02458-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 20 / 2020
Transaction ID : VNW3HHAD8N7
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9375.00

Date of Receipt 02 / 23 / 2020
Transaction ID : VNW3HHAD8N7E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Gaines, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 W 13Th St Apt 6C
 City New York State NY Zip Code 10011-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 01 / 2020
Transaction ID : VNW3HHAPK20
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
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 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Gibson, Gayle, , ,			Date of Receipt
Mailing Address 1 Bayberry Close			<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2020"/>
City Newark	State DE	Zip Code 19711-6201	Transaction ID : VNW3HHCVKX0
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Grant, Polly, , ,			Date of Receipt
Mailing Address 205 Walden St Apt 3G			<input type="text" value="02"/> / <input type="text" value="18"/> / <input type="text" value="2020"/>
City Cambridge	State MA	Zip Code 02140-3511	Transaction ID : VNW3HHAD8M9
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) Mass General Hospital		Occupation (for Individual) Social Worker	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ActBlue			Date of Receipt
Mailing Address PO Box 441146			<input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2020"/>
City West Somerville	State MA	Zip Code 02144-0031	Transaction ID : VNW3HHAD8M9E
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual)		Occupation (for Individual) Conduit total listed in Agg. field	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="9375.00"/>		Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="5250.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Guthman, Maureen, , ,		Date of Receipt MM / DD / YYYY 03 / 20 / 2020
Mailing Address 395 Riverside Dr Apt 11F		Transaction ID : VNW3HHCREN1
City New York	State NY	Zip Code 10025-1892
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) BET Networks	Occupation (for Individual) Executive	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hey, Jean, , ,		Date of Receipt MM / DD / YYYY 02 / 21 / 2020
Mailing Address 4 Calvin Rd		Transaction ID : VNW3HHAD8K1
City Jamaica Plain	State MA	Zip Code 02130-3415
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Writer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ActBlue		Date of Receipt MM / DD / YYYY 02 / 23 / 2020
Mailing Address PO Box 441146		Transaction ID : VNW3HHAD8K1E
City West Somerville	State MA	Zip Code 02144-0031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 9375.00	Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Hoover, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 SW 1St Ave
 2919
 City Miami State FL Zip Code 33130-5401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2020
Transaction ID : VNW3HHCVPS4
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Ketner, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3554 Bohicket Rd
 City Johns Island State SC Zip Code 29455-7223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KSI Leadership & Management Occupation (for Individual) President
 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
 01 / 31 / 2020
Transaction ID : VNW3HH8QX59
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. Laguens, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2006 Ashby Ave
 City Austin State TX Zip Code 78704-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Strategic Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 11 / 2020
Transaction ID : VNW3HH7K1J9
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5600.00
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 67
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

A. Laguens, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2006 Ashby Ave
 City Austin State TX Zip Code 78704-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Strategic Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 11 / 2020**
Transaction ID : VNW3HH9JC07
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Laguens, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2006 Ashby Ave
 City Austin State TX Zip Code 78704-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Strategic Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **03 / 11 / 2020**
Transaction ID : VNW3HHBWD00
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Leszczynski, Jeanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 Wellesley Ave
 City Needham State MA Zip Code 02494-1821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 01 / 2020**
Transaction ID : VNW3HH8SFH0
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 67
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9375.00

Date of Receipt
MM / DD / YYYY
02 / 02 / 2020

Transaction ID : VNW3HH8SFH0E

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Reamer, Sue, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 Webster St
Apt 213

City Brookline	State MA	Zip Code 02446-4963
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Not Employed Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 02 / 2020

Transaction ID : VNW3HH8SFJ8

Amount of Each Receipt this Period
1000.00

Memo Item

* Earmarked Contribution: See Below

C. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9375.00

Date of Receipt
MM / DD / YYYY
02 / 02 / 2020

Transaction ID : VNW3HH8SFJ8E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rosen, Hilary, , ,		Date of Receipt MM / DD / YYYY 03 / 18 / 2020
Mailing Address 4835 Hutchins PI NW		Transaction ID : VNW3HHCPP14
City Washington	State DC	Zip Code 20007-1529
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) SKDKnickerbocker	Occupation (for Individual) Public Relations	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Saul, Jean, , ,		Date of Receipt MM / DD / YYYY 03 / 11 / 2020
Mailing Address 1470 S Quebec Way 115		Transaction ID : VNW3HHBWG40
City Denver	State CO	Zip Code 80231-5696
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sexton, Mark, , ,		Date of Receipt MM / DD / YYYY 03 / 03 / 2020
Mailing Address 311 NW 12Th Ave Unit 802		Transaction ID : VNW3HHAX1T6
City Portland	State OR	Zip Code 97209-2995
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	6250.00
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 67
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Slavin, Jeffrey, Z., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5706 Warwick PI
 City Chevy Chase State MD Zip Code 20815-5502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Town Of Somerset, MD Occupation (for Individual) Mayor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 01 / 22 / 2020
Transaction ID : VNW3HH8C6A2
 Amount of Each Receipt this Period 1500.00
 Memo Item

B. Steinwand, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Perkins St Apt 223
 City Jamaica Plain State MA Zip Code 02130-4323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 17 / 2020
Transaction ID : VNW3HHAD8J3
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below

C. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 9375.00

Date of Receipt 02 / 23 / 2020
Transaction ID : VNW3HHAD8J3E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 67
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Stubbs, Rennae, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33A Ellwood St
 City Glen Cove State NY Zip Code 11542-2430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Tennis Professional
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 23 / 2020**
Transaction ID : VNW3HHCSC00
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Weiner, Shari, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 Park Ave Apt 17D
 City New York State NY Zip Code 10075-0280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Murphy McKeon Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **01 / 14 / 2020**
Transaction ID : VNW3HH7Q455
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Weiner, Shari, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 Park Ave Apt 17D
 City New York State NY Zip Code 10075-0280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Murphy McKeon Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 26 / 2020**
Transaction ID : VNW3HHAKCX5
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 20 OF 67
(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)
L PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Witeck, Robert, , ,

Mailing Address **1914 N Johnson St**

City Arlington	State VA	Zip Code 22207-3741
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) Witeck Communications, Inc.	Occupation (for Individual) Public Relations
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 02 / 2020

Transaction ID : VNW3HHAQ596

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	35200.00

**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 21 OF 67
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

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

Date of Receipt 03 / 06 / 2020
Transaction ID : VNW3HHDT1V9
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Non-Contribution Account

B. Bria, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 Calypso Dr
 City Aptos State CA Zip Code 95003-5802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Sales
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 03 / 07 / 2020
Transaction ID : VNW3HHBNX93
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Non-Contribution Account; Earmarked Contribution: See Below

C. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 9375.00

Date of Receipt 03 / 08 / 2020
Transaction ID : VNW3HHBNX93E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 67
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Casella, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Babe Thompson Rd
 City La Selva Beach State CA Zip Code 95076-8527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Netflix Occupation (for Individual) Engineering Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 06 / 2020**
Transaction ID : VNW3HH8V611
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Non-Contribution Account

B. Elkins, Caroline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87 Church St
 City Watertown State MA Zip Code 02472-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Harvard University Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **03 / 03 / 2020**
Transaction ID : VNW3HHBNXC7
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Non-Contribution Account; Earmarked Contribution: See Below

C. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 9375.00

Date of Receipt **03 / 08 / 2020**
Transaction ID : VNW3HHBNXC7E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

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 23 OF 67
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

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

Date of Receipt 03 / 02 / 2020
Transaction ID : VNW3HHBNXE2
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Non-Contribution Account; Earmarked Contribution: See Below

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9375.00

Date of Receipt 03 / 08 / 2020
Transaction ID : VNW3HHBNXE2E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Hood, Victoria, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 Marion St
 City Somerville State MA Zip Code 02143-3913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Marketing Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 01 / 2020
Transaction ID : VNW3HHAQG48
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Non-Contribution Account; Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 67
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2020

Transaction ID : VNW3HHAQG48E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Kaufmann-Paulman, Sunnie, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 70 Everett St

City Arlington	State MA	Zip Code 02474-6904
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Greater Boston PFLAG	Occupation (for Individual) Executive Director
---	---

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
02	/	28	/	2020

Transaction ID : VNW3HHAQG97

Amount of Each Receipt this Period
250.00

Memo Item

* Non-Contribution Account; Earmarked Contribution: See Below

C. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	29	/	2020

Transaction ID : VNW3HHAQG97E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 67
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Ketner, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3554 Bohicket Rd
 City Johns Island State SC Zip Code 29455-7223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KSI Leadership & Management Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt **01 / 31 / 2020**
Transaction ID : VNW3HHA2W56
 Amount of Each Receipt this Period 20000.00
 Memo Item
 Non-Contribution Account

B. Lazares, Katie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 Northern Ave Unit 518
 City Boston State MA Zip Code 02210-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Berkshire Group Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 05 / 2020**
Transaction ID : VNW3HHBNXA1
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Non-Contribution Account; Earmarked Contribution: See Below

C. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 9375.00

Date of Receipt **03 / 08 / 2020**
Transaction ID : VNW3HHBNXA1E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	20250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 67
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Lynch, Barbara, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 42 Grove St
City Winchester State MA Zip Code 01890-3844
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Self Employed Occupation (for Individual) Restaurateur
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 06 / 2020
Transaction ID : VNW3HHDT4C6
Amount of Each Receipt this Period 250.00
 Memo Item
Non-Contribution Account

B. Norton, Giulia DiStefano, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 19 Cranston St
City Jamaica Plain State MA Zip Code 02130-1805
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Optum Occupation (for Individual) Product Research Consultant
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2020
Transaction ID : VNW3HHBNXF0
Amount of Each Receipt this Period 250.00
 Memo Item
* Non-Contribution Account; Earmarked Contribution: See Below

C. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146
City West Somerville State MA Zip Code 02144-0031
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 9375.00

Date of Receipt 03 / 08 / 2020
Transaction ID : VNW3HHBNXF0E
Amount of Each Receipt this Period 250.00
 Memo Item
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 67
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Reamer, Sue, , ,			Date of Receipt
Mailing Address 20 Webster St Apt 213			<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2020"/>
City Brookline	State MA	Zip Code 02446-4963	Transaction ID : VNW3HHDT1T1
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ricketts, Laura, , ,			Date of Receipt
Mailing Address 430 Sheridan Rd			<input type="text" value="01"/> / <input type="text" value="27"/> / <input type="text" value="2020"/>
City Wilmette	State IL	Zip Code 60091-2821	Transaction ID : VNW3HHA2W48
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50167.66"/>
Name of Employer (for Individual) Chicago Cubs		Occupation (for Individual) Co-Owner	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="50167.66"/>		Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Ruthchild, Rochelle, , ,			Date of Receipt
Mailing Address 137 Coolidge St			<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2020"/>
City Brookline	State MA	Zip Code 02446-5807	Transaction ID : VNW3HHAQG64
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		* Non-Contribution Account; Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="55417.66"/>
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 28 OF 67
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9375.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 29 / 2020
Transaction ID : VNW3HHAQG64E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Social Good Fund
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12651 San Pablo Ave
Unit 5473

City Richmond	State CA	Zip Code 94805-4021
------------------	-------------	------------------------

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 ▼
6000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2020
Transaction ID : VNW3HHDTM30

Amount of Each Receipt this Period
6000.00

Memo Item

Non-Contribution Account

C. Splaine, Erin, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 32 Rice Rd

City Wayland	State MA	Zip Code 01778-3813
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
First Unitarian Universalist Society Minister

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 06 / 2020
Transaction ID : VNW3HHDT1Y3

Amount of Each Receipt this Period
500.00

Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	6500.00
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 29 OF 67
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Splaine, Erin, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 Rice Rd

City Wayland	State MA	Zip Code 01778-3813
-----------------	-------------	------------------------

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

Name of Employer (for Individual) First Unitarian Universalist Society	Occupation (for Individual) Minister
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2020

Transaction ID : VNW3HHBNXH6

Amount of Each Receipt this Period
250.00

Memo Item

* Non-Contribution Account; Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2020

Transaction ID : VNW3HHBNXH6E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	90917.66

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
L PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 02 / 02 / 2020
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A0AKF Amount of Each Disbursement this Period 59.25
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Merchant Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 02 / 09 / 2020
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A0B2X Amount of Each Disbursement this Period 19.76
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Merchant Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 02 / 16 / 2020
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VNV49A0CW Amount of Each Disbursement this Period 25.69
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Merchant Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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).....▶	104.70
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
L PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 02 / 23 / 2020
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	
Purpose of Disbursement Merchant Fee	Zip Code 02144-3132	Amount of Each Disbursement this Period 114.57
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Paragon Payment Solutions		Date of Disbursement MM / DD / YYYY 01 / 03 / 2020
Mailing Address 2141 E Broadway Rd		FEC Identification Number C
City Tempe	State AZ	
Purpose of Disbursement Merchant Fee	Zip Code 85282-1892	Amount of Each Disbursement this Period 122.81
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Paragon Payment Solutions		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020
Mailing Address 2141 E Broadway Rd		FEC Identification Number C
City Tempe	State AZ	
Purpose of Disbursement Merchant Fee	Zip Code 85282-1892	Amount of Each Disbursement this Period 224.47
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	461.85
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Paragon Payment Solutions

Full Name (Last, First, Middle Initial)

Mailing Address 2141 E Broadway Rd

City Tempe State AZ Zip Code 85282-1892

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 02 / 2020

FEC Identification Number C

Transaction ID : VNV49A0MZf

Amount of Each Disbursement this Period 631.65

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	631.65
TOTAL This Period (last page this line number only).....▶	1198.20

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 22116

City Eagan State MN Zip Code 55122-0116

Purpose of Disbursement Contribution

Candidate Name **CRAIG, ANGELA DAWN, , ,**

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: MN District: 02

Date of Disbursement: 02 / 26 / 2020

FEC Identification Number: **C00575209**
Transaction ID : **VNV49A0MXf**
Amount of Each Disbursement this Period: 500.00

Memo Item

B. GEORGETTE GOMEZ FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 777 S Figueroa St Ste 4050

City Los Angeles State CA Zip Code 90017-5864

Purpose of Disbursement Contribution

Candidate Name **GOMEZ, GEORGETTE, , ,**

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: CA District: 53

Date of Disbursement: 02 / 19 / 2020

FEC Identification Number: **C00719112**
Transaction ID : **VNV49A0MY9**
Amount of Each Disbursement this Period: 1250.00

Memo Item

C. JANELSSA GOLDBECK FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 16538

City San Diego State CA Zip Code 92176-6538

Purpose of Disbursement Contribution

Candidate Name **GOLDBECK, JANELSSA, , ,**

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: CA District: 53

Date of Disbursement: 02 / 19 / 2020

FEC Identification Number: **C00719898**
Transaction ID : **VNV49A0MY**
Amount of Each Disbursement this Period: 1250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

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NAME OF COMMITTEE (In Full)
L PAC

A. SHARICE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 13851 W 63Rd St
NUM 303

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2020

City Shawnee State KS Zip Code 66216-3800

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00670034
---	-----------

Candidate Name
DAVIDS, SHARICE, , ,

Transaction ID : VNV49A0N05

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: KS District: 03
Disbursement For: 2020
 Primary General
 Other (specify) ▼

500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Amount of Each Disbursement this Period

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

--

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Amount of Each Disbursement this Period

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

--

Memo Item

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

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

500.00

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement MM / DD / YYYY 01 / 31 / 2020
Mailing Address 4333 Amon Carter Blvd # MD5675		FEC Identification Number C Transaction ID : VNV49A0MX1 Amount of Each Disbursement this Period 210.80 non-contribution account <input type="checkbox"/> Memo Item
City Fort Worth	State TX	
Zip Code 76155-2605	Purpose of Disbursement Airfare	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement MM / DD / YYYY 02 / 13 / 2020
Mailing Address 4333 Amon Carter Blvd # MD5675		FEC Identification Number C Transaction ID : VNV49A0MX1 Amount of Each Disbursement this Period 146.40 non-contribution account <input type="checkbox"/> Memo Item
City Fort Worth	State TX	
Zip Code 76155-2605	Purpose of Disbursement Airfare	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement MM / DD / YYYY 03 / 09 / 2020
Mailing Address 4333 Amon Carter Blvd # MD5675		FEC Identification Number C Transaction ID : VNV49A0MX1 Amount of Each Disbursement this Period 75.00 non-contribution account <input type="checkbox"/> Memo Item
City Fort Worth	State TX	
Zip Code 76155-2605	Purpose of Disbursement Airfare	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	432.20
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Ann Johnson For State Rep District 134		Date of Disbursement MM / DD / YYYY 02 / 25 / 2020	
Mailing Address 325 W 18Th St		FEC Identification Number C [REDACTED]	
City Houston	State TX	Zip Code 77008-3903	Transaction ID : VNV49A0MX7 Amount of Each Disbursement this Period [REDACTED] 1000.00
Purpose of Disbursement Non Federal Contribution		Category/Type [REDACTED]	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Blue Wave Political Partners LLC		Date of Disbursement MM / DD / YYYY 03 / 05 / 2020	
Mailing Address 514 Daniels St # 286		FEC Identification Number C [REDACTED]	
City Raleigh	State NC	Zip Code 27605-1317	Transaction ID : VNV49A0MXE Amount of Each Disbursement this Period [REDACTED] 2500.00 non-contribution account
Purpose of Disbursement Compliance Services		Category/Type [REDACTED]	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Care Creative		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020	
Mailing Address 172 Pacific Avenue,		FEC Identification Number C [REDACTED]	
City Toronto ON M6P 2P5 Canada	State ZZ	Zip Code 00000	Transaction ID : VNV49A0MXE Amount of Each Disbursement this Period [REDACTED] 2715.00 non-contribution account
Purpose of Disbursement Graphic Design		Category/Type [REDACTED]	
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶	[REDACTED] 6215.00
TOTAL This Period (last page this line number only)..... ▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Care Creative		Date of Disbursement MM / DD / YYYY 03 / 05 / 2020
Mailing Address 172 Pacific Avenue,		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MXI Amount of Each Disbursement this Period [REDACTED] 1702.50 non-contribution account <input type="checkbox"/> Memo Item
City Toronto ON M6P 2P5 Canada	State ZZ	Zip Code 00000
Purpose of Disbursement Graphic Design	Category/Type [REDACTED]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cervantes For Assembly 2020		Date of Disbursement MM / DD / YYYY 02 / 25 / 2020
Mailing Address 1185 Magnolia Ave Ste E		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MXI Amount of Each Disbursement this Period [REDACTED] 1000.00 non-contribution account <input type="checkbox"/> Memo Item
City Corona	State CA	Zip Code 92879-3218
Purpose of Disbursement Non Federal Contribution	Category/Type [REDACTED]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CNA		Date of Disbursement MM / DD / YYYY 01 / 02 / 2020
Mailing Address 1 Meridian Blvd Ste 3A01		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MXI Amount of Each Disbursement this Period [REDACTED] 269.63 non-contribution account <input type="checkbox"/> Memo Item
City Wyomissing	State PA	Zip Code 19610-3235
Purpose of Disbursement Insurance	Category/Type [REDACTED]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2972.13
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. CNA

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MXI

Amount of Each Disbursement this Period: 269.63

Memo Item

B. CNA

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MXI

Amount of Each Disbursement this Period: 269.47

Memo Item

C. DC Health Link

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MXI

Amount of Each Disbursement this Period: 6768.76

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7307.86

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. DC Health Link		Date of Disbursement MM / DD / YYYY 02 / 19 / 2020
Mailing Address PO Box 97022		FEC Identification Number C Transaction ID : VNV49A0MXI Amount of Each Disbursement this Period 3384.38 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20090-7022	Purpose of Disbursement Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. DC Health Link		Date of Disbursement MM / DD / YYYY 03 / 19 / 2020
Mailing Address PO Box 97022		FEC Identification Number C Transaction ID : VNV49A0MXS Amount of Each Disbursement this Period 240.00 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20090-7022	Purpose of Disbursement Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. DC Health Link		Date of Disbursement MM / DD / YYYY 03 / 27 / 2020
Mailing Address PO Box 97022		FEC Identification Number C Transaction ID : VNV49A0MXS Amount of Each Disbursement this Period 3384.38 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20090-7022	Purpose of Disbursement Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	7008.76
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Erin Zwiener For Texas House

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 184

City Driftwood State TX Zip Code 78619-0184

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 25 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MY2

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. EveryAction

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 392264

City Pittsburgh State PA Zip Code 15251-9264

Purpose of Disbursement Subscription

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MY3

Amount of Each Disbursement this Period: 1425.00

non-contribution account

Memo Item

C. Fouracre, Matthew, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2523 13Th St NW Apt 207

City Washington State DC Zip Code 20009-5200

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 15 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MV

Amount of Each Disbursement this Period: 1119.82

non-contribution account

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3544.82

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 01 / 31 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A0MV Amount of Each Disbursement this Period 1119.84 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Salary	Zip Code 20009-5200	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 02 / 14 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A0MV Amount of Each Disbursement this Period 1119.82 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Salary	Zip Code 20009-5200	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A0MV Amount of Each Disbursement this Period 1119.84 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Salary	Zip Code 20009-5200	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	3359.50
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 03 / 12 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A0MW Amount of Each Disbursement this Period 119.82 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Salary	Zip Code 20009-5200	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Fouracre, Matthew, , ,		Date of Disbursement MM / DD / YYYY 03 / 30 / 2020
Mailing Address 2523 13Th St NW Apt 207		FEC Identification Number C Transaction ID : VNV49A0MW Amount of Each Disbursement this Period 119.84 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Salary	Zip Code 20009-5200	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Friends Of Chelsey Branham 2020		Date of Disbursement MM / DD / YYYY 03 / 13 / 2020
Mailing Address 2020 Sheffield Rd		FEC Identification Number C Transaction ID : VNV49A0MY Amount of Each Disbursement this Period 1000.00 Memo Item
City Oklahoma City	State OK	
Purpose of Disbursement Non Federal Contribution	Zip Code 73120-4926	Category/ Type
Candidate Name	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	3239.66
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Friends Of Kim Jackson		Date of Disbursement MM / DD / YYYY 03 / 13 / 2020
Mailing Address PO Box 1411		FEC Identification Number C Transaction ID : VNV49A0MY Amount of Each Disbursement this Period 1000.00
City Pine Lake	State GA	
Zip Code 30072-1411	Purpose of Disbursement Non Federal Contribution	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Goldenberg, Kira, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2020
Mailing Address 345 W 145Th St Apt 3A6		FEC Identification Number C Transaction ID : VNV49A0MVS Amount of Each Disbursement this Period 3000.00 non-contribution account
City New York	State NY	
Zip Code 10031-5336	Purpose of Disbursement Communications Consulting	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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. Goldenberg, Kira, , ,		Date of Disbursement MM / DD / YYYY 01 / 30 / 2020
Mailing Address 345 W 145Th St Apt 3A6		FEC Identification Number C Transaction ID : VNV49A0MV Amount of Each Disbursement this Period 2000.00 non-contribution account
City New York	State NY	
Zip Code 10031-5336	Purpose of Disbursement Communications Consulting	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Goldenberg, Kira, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 345 W 145Th St
Apt 3A6

City New York State NY Zip Code 10031-5336

Purpose of Disbursement Communications Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 20 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0WS

Amount of Each Disbursement this Period: 5000.00

Memo Item

B. Goldenberg, Kira, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 345 W 145Th St
Apt 3A6

City New York State NY Zip Code 10031-5336

Purpose of Disbursement Communications Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 13 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MV

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. Goody Goody Liquor

Full Name (Last, First, Middle Initial)

Mailing Address 3316 Oak Lawn Ave

City Dallas State TX Zip Code 75219-4212

Purpose of Disbursement Beverages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 10 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MY

Amount of Each Disbursement this Period: 404.64

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7904.64

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement MM / DD / YYYY 01 / 02 / 2020
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C Transaction ID : VNV49A0MYI Amount of Each Disbursement this Period 69.96 non-contribution account <input type="checkbox"/> Memo Item
City Mountain View	State CA	
Zip Code 94043-1351	Purpose of Disbursement Software	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Google		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C Transaction ID : VNV49A0MYC Amount of Each Disbursement this Period 72.82 non-contribution account <input type="checkbox"/> Memo Item
City Mountain View	State CA	
Zip Code 94043-1351	Purpose of Disbursement Software	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. Google		Date of Disbursement MM / DD / YYYY 03 / 02 / 2020
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C Transaction ID : VNV49A0MYI Amount of Each Disbursement this Period 76.32 non-contribution account <input type="checkbox"/> Memo Item
City Mountain View	State CA	
Zip Code 94043-1351	Purpose of Disbursement Software	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	219.10
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Harmon Curran Spielberg + Eisenberg LLP		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C Transaction ID : VNV49A0MY. Amount of Each Disbursement this Period 648.00 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Legal Services	Zip Code 20036-4523	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Harmon Curran Spielberg + Eisenberg LLP		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C Transaction ID : VNV49A0MY. Amount of Each Disbursement this Period 120.50 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Legal Services	Zip Code 20036-4523	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Harmon Curran Spielberg + Eisenberg LLP		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C Transaction ID : VNV49A0MY. Amount of Each Disbursement this Period 2078.00 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Legal Services	Zip Code 20036-4523	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2846.50
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Hotel Tonight		Date of Disbursement MM / DD / YYYY 02 / 12 / 2020
Mailing Address 901 Market St Ste 310		FEC Identification Number C Transaction ID : VNV49A0MYI Amount of Each Disbursement this Period 338.00 non-contribution account <input type="checkbox"/> Memo Item
City San Francisco	State CA Zip Code 94103-1752	
Purpose of Disbursement Lodging	Candidate Name	Category/Type
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. IPFS Corporation		Date of Disbursement MM / DD / YYYY 01 / 09 / 2020
Mailing Address 30 Montgomery St		FEC Identification Number C Transaction ID : VNV49A0MYF Amount of Each Disbursement this Period 45.00 non-contribution account <input type="checkbox"/> Memo Item
City Jersey City	State NJ Zip Code 07302-3829	
Purpose of Disbursement Insurance	Candidate Name	Category/Type
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. IPFS Corporation		Date of Disbursement MM / DD / YYYY 01 / 09 / 2020
Mailing Address 30 Montgomery St		FEC Identification Number C Transaction ID : VNV49A0MYI Amount of Each Disbursement this Period 1384.21 non-contribution account <input type="checkbox"/> Memo Item
City Jersey City	State NJ Zip Code 07302-3829	
Purpose of Disbursement Insurance	Candidate Name	Category/Type
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).....▶	1767.21
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. IPFS Corporation		Date of Disbursement MM / DD / YYYY 02 / 10 / 2020
Mailing Address 30 Montgomery St		FEC Identification Number C Transaction ID : VNV49A0MY1 Amount of Each Disbursement this Period 1344.21 non-contribution account <input type="checkbox"/> Memo Item
City Jersey City	State NJ	
Zip Code 07302-3829	Purpose of Disbursement Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. IPFS Corporation		Date of Disbursement MM / DD / YYYY 03 / 03 / 2020
Mailing Address 30 Montgomery St		FEC Identification Number C Transaction ID : VNV49A0MY1 Amount of Each Disbursement this Period 1275.44 non-contribution account <input type="checkbox"/> Memo Item
City Jersey City	State NJ	
Zip Code 07302-3829	Purpose of Disbursement Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. Julie Johnson For Texas		Date of Disbursement MM / DD / YYYY 02 / 25 / 2020
Mailing Address PO Box 110937		FEC Identification Number C Transaction ID : VNV49A0MY1 Amount of Each Disbursement this Period 1000.00 Memo Item
City Carrllton	State TX	
Zip Code 75011-0937	Purpose of Disbursement Non Federal Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	3619.65
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Marcum, LLP		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 1899 L St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZ3 Amount of Each Disbursement this Period [REDACTED] 1431.82 non-contribution account <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20036-3804
Purpose of Disbursement Accounting Services		Category/ Type [REDACTED]
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. Maria Cadenas For Senate 2020		Date of Disbursement MM / DD / YYYY 02 / 25 / 2020
Mailing Address 325 Soquel Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZ4 Amount of Each Disbursement this Period [REDACTED] 1000.00 Memo Item <input type="checkbox"/> Memo Item
City Santa Cruz	State CA	Zip Code 95062-2305
Purpose of Disbursement Non Federal Contribution		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Medina For State Senate 2020		Date of Disbursement MM / DD / YYYY 02 / 25 / 2020
Mailing Address 7231 Boulder Ave # 211		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZ: Amount of Each Disbursement this Period [REDACTED] 1000.00 Memo Item <input type="checkbox"/> Memo Item
City Highland	State CA	Zip Code 92346-3313
Purpose of Disbursement Non Federal Contribution		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 3431.82
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. NGP VAN, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1101 15Th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement Subscription

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MZ

Amount of Each Disbursement this Period: 1425.00

Memo Item

B. Olive Street Design

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MZ

Amount of Each Disbursement this Period: 34.00

Memo Item

C. Olive Street Design

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 03 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MZ

Amount of Each Disbursement this Period: 34.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1493.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Olive Street Design		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZf Amount of Each Disbursement this Period [REDACTED] 130.00 non-contribution account <input type="checkbox"/> Memo Item
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website Services		Category/ Type [REDACTED]
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. Olive Street Design		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZC Amount of Each Disbursement this Period [REDACTED] 140.00 non-contribution account <input type="checkbox"/> Memo Item
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website Services		Category/ Type [REDACTED]
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. Olive Street Design		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZI Amount of Each Disbursement this Period [REDACTED] 65.00 non-contribution account <input type="checkbox"/> Memo Item
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website Services		Category/ Type [REDACTED]
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).....▶	[REDACTED] 335.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Olive Street Design		Date of Disbursement MM / DD / YYYY 03 / 03 / 2020	
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZJ	
City Villa Park	State IL	Zip Code 60181-5502	Amount of Each Disbursement this Period [REDACTED] 34.00
Purpose of Disbursement Website Services		Category/ Type [REDACTED]	non-contribution account <input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 01 / 15 / 2020	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZC	
City Rochester	State NY	Zip Code 14625-2396	Amount of Each Disbursement this Period [REDACTED] 258.72
Purpose of Disbursement Payroll Fee		Category/ Type [REDACTED]	non-contribution account <input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 01 / 27 / 2020	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MZI	
City Rochester	State NY	Zip Code 14625-2396	Amount of Each Disbursement this Period [REDACTED] 1782.77
Purpose of Disbursement Payroll Taxes		Category/ Type [REDACTED]	non-contribution account <input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

[REDACTED] 2075.49

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement MM / DD / YYYY 01 / 31 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C Transaction ID : VNV49A0MZ5 Amount of Each Disbursement this Period 224.96 non-contribution account <input type="checkbox"/> Memo Item
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 01 / 31 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C Transaction ID : VNV49A0MZT Amount of Each Disbursement this Period 1779.74 non-contribution account <input type="checkbox"/> Memo Item
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 02 / 14 / 2020
Mailing Address 911 Panorama Trl S		FEC Identification Number C Transaction ID : VNV49A0MZ Amount of Each Disbursement this Period 125.96 non-contribution account <input type="checkbox"/> Memo Item
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	2130.66
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 14 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MZI

Amount of Each Disbursement this Period: 1760.27

Memo Item

B. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MZX

Amount of Each Disbursement this Period: 125.96

Memo Item

C. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MZ

Amount of Each Disbursement this Period: 1760.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3646.48

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement
Payroll Fee

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
03		13		2020

FEC Identification Number

C [Redacted]
Transaction ID : VNV49A0MZz
 Amount of Each Disbursement this Period
 [Redacted] 125.96

Memo Item non-contribution account

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement
Payroll Taxes

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		13		2020

FEC Identification Number

C [Redacted]
Transaction ID : VNV49A0N00
 Amount of Each Disbursement this Period
 [Redacted] 1758.51

Memo Item non-contribution account

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement
Payroll Fee

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
03		31		2020

FEC Identification Number

C [Redacted]
Transaction ID : VNV49A0N01
 Amount of Each Disbursement this Period
 [Redacted] 125.96

Memo Item non-contribution account

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

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

[Redacted] 2010.43

[Redacted]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N02

Amount of Each Disbursement this Period: 1751.50

Memo Item

B. People uniting To Elect Mary Washington

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2261

City Baltimore State MD Zip Code 21203-2261

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 13 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N03

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Quickbooks

Full Name (Last, First, Middle Initial)

Mailing Address 2700 Coast Ave

City Mountain View State CA Zip Code 94043-1140

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MY

Amount of Each Disbursement this Period: 455.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3207.30

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Sandberg, Stephanie, , ,			Date of Disbursement MM / DD / YYYY 01 / 15 / 2020	
Mailing Address 32 Vreeland Ct			FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MW Amount of Each Disbursement this Period [REDACTED] 2894.48 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type	
Purpose of Disbursement Salary		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. Sandberg, Stephanie, , ,			Date of Disbursement MM / DD / YYYY 01 / 31 / 2020	
Mailing Address 32 Vreeland Ct			FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MW Amount of Each Disbursement this Period [REDACTED] 2894.49 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type	
Purpose of Disbursement Salary		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. Sandberg, Stephanie, , ,			Date of Disbursement MM / DD / YYYY 02 / 14 / 2020	
Mailing Address 32 Vreeland Ct			FEC Identification Number C [REDACTED] Transaction ID : VNV49A0MW Amount of Each Disbursement this Period [REDACTED] 2894.48 non-contribution account <input type="checkbox"/> Memo Item	
City Princeton	State NJ	Zip Code 08540-6760	Category/ Type	
Purpose of Disbursement Salary		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)..... ▶

8683.45

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MW

Amount of Each Disbursement this Period: 2894.48

Memo Item

B. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MW

Amount of Each Disbursement this Period: 2894.49

Memo Item

C. Sandberg, Stephanie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 30 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0MW

Amount of Each Disbursement this Period: 2894.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8683.45

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Sheraton		Date of Disbursement MM / DD / YYYY 02 / 06 / 2020
Mailing Address 2101 N Stemmons Fwy		FEC Identification Number C
City Dallas	State TX	
Purpose of Disbursement Lodging		Transaction ID : VNV49A0N06
Candidate Name		Amount of Each Disbursement this Period 386.74
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Sheraton		Date of Disbursement MM / DD / YYYY 03 / 11 / 2020
Mailing Address 2101 N Stemmons Fwy		FEC Identification Number C
City Dallas	State TX	
Purpose of Disbursement Lodging		Transaction ID : VNV49A0N07
Candidate Name		Amount of Each Disbursement this Period 76.32
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Silver4Senate 2020		Date of Disbursement MM / DD / YYYY 02 / 25 / 2020
Mailing Address 1775 E Palm Canyon Dr Ste 372		FEC Identification Number C
City Palm Springs	State CA	
Purpose of Disbursement Non Federal Contribution		Transaction ID : VNV49A0N08
Candidate Name		Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1463.06
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Squarespace

Full Name (Last, First, Middle Initial)

Mailing Address 8 Clarkson St

City New York State NY Zip Code 10014-4301

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 20 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0E

Amount of Each Disbursement this Period: 228.96

Memo Item

B. Susan Eggman For Senate 2020

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4587

City Riverside State CA Zip Code 92514-4587

Purpose of Disbursement Non Federal Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 25 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0G

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. The Turner Group

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Political Strategy Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0WR

Amount of Each Disbursement this Period: 8125.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9353.96

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)
A. The Turner Group

Mailing Address **PO Box 5373**

City **Virginia Beach** State **VA** Zip Code **23471-0373**

Purpose of Disbursement
Travel Expenses - See Below if Itemized

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **02 / 10 / 2020**

FEC Identification Number: **C**
Transaction ID : VNV49A0WR
Amount of Each Disbursement this Period: **2595.88**
 non-contribution account
 Memo Item

Full Name (Last, First, Middle Initial)
B. Delta Airlines

Mailing Address **1030 Delta Blvd**

City **Atlanta** State **GA** Zip Code **30354-1989**

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **02 / 10 / 2020**

FEC Identification Number: **C**
Transaction ID : VNV49A0WR
Amount of Each Disbursement this Period: **226.60**
 *
 Memo Item

Full Name (Last, First, Middle Initial)
C. Moxy Hotels

Mailing Address **453 7Th Ave**

City **New York** State **NY** Zip Code **10001-2009**

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **02 / 10 / 2020**

FEC Identification Number: **C**
Transaction ID : VNV49A0WR
Amount of Each Disbursement this Period: **1354.16**
 *
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ **2595.88**

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement MM / DD / YYYY 02 / 10 / 2020
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0WR! Amount of Each Disbursement this Period [REDACTED] 282.36
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Taxi	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement MM / DD / YYYY 02 / 10 / 2020
Mailing Address 233 S Wacker Dr Ste 430		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0WR! Amount of Each Disbursement this Period [REDACTED] 387.60
City Chicago	State IL	Zip Code 60606-6435
Purpose of Disbursement Airfare	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. W Washington DC		Date of Disbursement MM / DD / YYYY 02 / 10 / 2020
Mailing Address 515 15Th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0WR! Amount of Each Disbursement this Period [REDACTED] 319.94
City Washington	State DC	Zip Code 20004-1006
Purpose of Disbursement Lodging	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 0.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. The Turner Group		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address PO Box 5373		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0N0J Amount of Each Disbursement this Period 8125.00 non-contribution account <input type="checkbox"/> Memo Item
City Virginia Beach	State VA	Zip Code 23471-0373
Purpose of Disbursement Political Strategy Consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement MM / DD / YYYY 01 / 31 / 2020
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0N0P Amount of Each Disbursement this Period 9.32 non-contribution account <input type="checkbox"/> Memo Item
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Taxi		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Uber		Date of Disbursement MM / DD / YYYY 03 / 06 / 2020
Mailing Address 182 Howard St		FEC Identification Number C [REDACTED] Transaction ID : VNV49A0N0K Amount of Each Disbursement this Period 67.14 non-contribution account <input type="checkbox"/> Memo Item
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Taxi		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	8201.46
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement MM / DD / YYYY 03 / 09 / 2020
Mailing Address 182 Howard St		FEC Identification Number C Transaction ID : VNV49A0N0R Amount of Each Disbursement this Period 32.31 non-contribution account <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Taxi	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement MM / DD / YYYY 03 / 09 / 2020
Mailing Address 182 Howard St		FEC Identification Number C Transaction ID : VNV49A0N0S Amount of Each Disbursement this Period 10.30 non-contribution account <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Taxi	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. Uber		Date of Disbursement MM / DD / YYYY 03 / 09 / 2020
Mailing Address 182 Howard St		FEC Identification Number C Transaction ID : VNV49A0N01 Amount of Each Disbursement this Period 28.86 non-contribution account <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Taxi	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	71.47
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0V

Amount of Each Disbursement this Period: 57.20

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0V

Amount of Each Disbursement this Period: 23.96

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0V

Amount of Each Disbursement this Period: 58.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 139.22

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 11 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0Y

Amount of Each Disbursement this Period: 35.31

Memo Item

B. United Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 233 S Wacker Dr Ste 430

City Chicago State IL Zip Code 60606-6435

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 30 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N0Z

Amount of Each Disbursement this Period: 206.80

Memo Item

C. United Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 233 S Wacker Dr Ste 430

City Chicago State IL Zip Code 60606-6435

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 05 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N1C

Amount of Each Disbursement this Period: 734.00

Memo Item

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

976.11

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. Witeck Communications

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW
Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 27 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N17

Amount of Each Disbursement this Period: 650.00

Memo Item

B. Witeck Communications

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW
Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 05 / 2020

FEC Identification Number: C

Transaction ID : VNV49A0N18

Amount of Each Disbursement this Period: 650.00

Memo Item

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

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	116235.27