Image# 14978405575 PAGE 1 / 106

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

FORWARD MASSACHUSETS ADDRESS (number and street) 1 Emerson Place 16C				Office Use Only
ADDRESS (number and street) Check if different than previously reported. (ACC) Check if different than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER C C00563981 3. IS THIS REPORT (Choose One) (a) Cuarterly Reports: (b) Monthly Report (choose One) (a) Cuarterly Report (21) July 15 Cuarterly Report (22) Cobber 15 Cuarterly Report (22) Cobber 15 Cuarterly Report (23) January 31 Value and Report (ACC) Report Due On: Report Due On: Report Due On: Report Due On: April 15 Cuarterly Report (22) Cobber 15 Cuarterly Report (23) January 31 Value and Report (CP) July 31 Mid-Year Report (CP) Report To the: Convention (12C) Special (12S) Felection on Report (71) To this I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Signature of Treasurer Darryl Tattrie Darryl Tattrie IElectromically Filed) NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. \$4379. FEC FORM 3X		TYPE OR PRINT ▼		type 12FE4M5
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) April 15 Quarterly Report (Q2) April 15 Quarterly Report (Q3) January 31 Year-End Report (Q3) January 31 Tormination Report (TER) Covering Period Q7 Q1 Q214 Through Q8 Q8 Q8 Q9 Q9 Q9 Q9 Q9	Forward Massachusett	ts		1
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) April 15 Quarterly Report (Q2) April 15 Quarterly Report (Q3) January 31 Year-End Report (Q3) January 31 Tormination Report (TER) Covering Period Q7 Q1 Q214 Through Q8 Q8 Q8 Q9 Q9 Q9 Q9 Q9				
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) April 15 Quarterly Report (Q2) April 15 Quarterly Report (Q3) January 31 Year-End Report (Q3) January 31 Tormination Report (TER) Covering Period Q7 Q1 Q214 Through Q8 Q8 Q8 Q9 Q9 Q9 Q9 Q9				
than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER V C C C00563981 3. IS THIS NEW (N) OR AMENDED (A) (A) TYPE OF REPORT (Choose One) (Beport (Choose One) C Quarterly Reports: April 15 Quarterly Reports: April 15 Quarterly Report (O1) July 15 Quarterly Report (O2) C Cotober 15 Quarterly Report (O2) C Quarterly Report (O2) April 15 Quarterly Report (O2) C Quarterly Report (O2) T Year-End Report (New Felection Repor	ADDRESS (number and street)	1 Emerson Place 160	;	
2. FEC IDENTIFICATION NUMBER V C C C00563981 3. IS THIS REPORT (N) OR AMENDED (A) AMENDED (A	Check if different			
A. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) X October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Chily) Termination Report (RER) Termination Report (PER) Termination Report		Boston		MA 02114
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Cotober 15 Quarterly Report (Q3) January 31 Vear-End Report (VE) July 31 Mid-Year Report (Non-Bection) Report (Non-Bection) Vear Cohly) PRE-Election Report (Non-Bection) Vear Cohly) Report (Non-Bection) Vear Cohly	2. FEC IDENTIFICATION NU	JMBER ▼	CITY ▲	STATE ▲ ZIP CODE ▲
(Choose One) (Report Due On:	C C00563981		3. IS THIS REPORT X (N)	
(a) Quarterly Reports: April 15		Report	Feb 20 (M2) Ma	(Non-Election
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) X October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Report (TER) Termination (TER) Termi	(a) Quarterly Reports:	Due On.		(Non-Election Year Only)
July 15 Quarterly Report (Q2) Cotober 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Darryl Tattrie Convention (12C)			Apr 20 (M4) Jul	20 (M7) Oct 20 (M10) Jan 31 (YE)
October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) POST-Election Report (TER) General (30G) Runoff (30R) Special (12S) in the State of State of Special (30S) Runoff (30R) Special (12S) In the State of I	July 15	(C) 12-Day		General (12G) Runoff (12R)
January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Termination Report (TER) Journal Tattrie Lection on M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Cotober 15	Report for	the: Convention (12	C) Special (12S)
July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Darryl Tattrie General (30G) Runoff (30R) Special (30S)	January 31			iii dio
Termination Report (TER) Election on Election on Election on Election on In the State of State of Covering Period To vy	July 31 Mid-Year Report (Non-election	n (d) 30-Day POST-Elec	` '	Runoff (30R) Special (30S)
5. Covering Period 07 01 2014 through 09 30 2014 I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Darryl Tattrie Signature of Treasurer Darryl Tattrie [Electronically Filed] Date 10 15 2014 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office Ligo		·	M = M /	
Type or Print Name of Treasurer Darryl Tattrie [Electronically Filed] Date Date Darryl Tattrie Darryl Tattrie [Electronically Filed] Date Dat				
Signature of Treasurer Darryl Tattrie [Electronically Filed] Date Da	I certify that I have examined th	is Report and to the b	est of my knowledge and be	ief it is true, correct and complete.
Signature of Treasurer Darryl Tattrie [Electronically Filed] Date 10 15 2014	Type or Print Name of Treasure	r Darryl Tattrie		
Office FORM 3X	Signature of Treasurer Darry	yl Tattrie	[Electronically F	
	NOTE: Submission of false, errone	eous, or incomplete info	rmation may subject the person	n signing this Report to the penalties of 2 U.S.C. §437g.
Only Rev. 12/2004	Use			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

_	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
	Write or Type Committee Name Forward Massachusetts		
F	Report Covering the Period: From:	07 01 2014 To:	09 30 / 2014
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		0.00
	(b) Cash on Hand at Beginning of Reporting Period	. 30407.15	
	(c) Total Receipts (from Line 19)	. 120000.00	153255.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	. 150407.15	153255.00
7.	Total Disbursements (from Line 31)	. 139737.59	142585.44
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10669.56	10669.56
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	. 0.00	
10	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	. 0.00	
	This committee has qualified as a mu	Iticandidate committee. (see FEC FORM 1M)	
		For further information contact:	
		Federal Election Commission 999 E Street, NW Washington, DC 20463	
		Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Forward	Massachi	icatte
roiwaid	IVIASSACIII	useus

Report Covering the Period: From:	01 2014 To:	09 30 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:	l	
(a) Individuals/Persons Other		
Than Political Committees	120000.00	153250.00
(i) Itemized (use Schedule A)	7	
(ii) Unitemized	0.00	5.00
(iii) TOTAL (add	, 0.50	
Lines 11(a)(i) and (ii)	120000.00	153255.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	120000.00	153255.00
Totals to Line 33, page 5) Transfers From Affiliated/Other	120000.00	100200.00
Party Committees	0.00	0.00
rarty Committees	0.00	0.00
8. All Loans Received	0.00	0.00
	7	7
. Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	7	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds		,
(a) Non-Federal Account	0.00	
(from Schedule H3)	0.00	0.00
40.1 · 5 · 4 · 5 · · · · · · ·	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
(c) Total Translers (add To(a) and To(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	120000.00	153255.00
. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	120000.00	153255.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: – (a) Allocated Federal/Non-Federal	10.00 1 0.100	Calcindar Tear to Bate
Activity (from Schedule H4)		0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	42270.93	45118.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	42270.93	45118.78
Transfers to Affiliated/Other Party	7	
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures	07466 66	07466.66
(use Schedule E)Coordinated Party Expenditures	97466.66	97466.66
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	, , , 0.00
Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(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	0.00	0.00
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	0.00	0.00
With Federal Funds(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	139737.59	142585.44
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	139737.59	142585.44

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	120000.00	153255.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	120000.00	153255.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	42270.93	45118.78
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	42270.93	45118.78

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 6 OF 106

TEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)
IEWIZED NECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports an	d Statements ma	av not be sold or used by any n	13
or for commercial purposes, other than using			
NAME OF COMMITTEE (In Full)			
Forward Massachusetts			
Full Name (Last, First, Middle Initial)			
A. Eunice Panetta Mailing Address 33 Harbor St			Date of Receipt
			07 28 _ 2014 _
City	State MA	Zip Code 01944	Transaction ID : 11ai-000000012
Manchester F50 ID acceptance (contribution		01944	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10000.00
Name of Employer	Occupation		
Self	Private Inve		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		10000.00	Earmarked through Democracy Engine
Full Name (Last, First, Middle Initial)			5. (5
Thomas Israel Mailing Address 12 E 49 St			Date of Receipt
			07 30 2014
City	State NY	Zip Code	Transaction ID : 11ai-000000013
New York		10017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10000.00
Name of Employer	Occupation		
A C Israel Ent Inc	Investor		
Receipt For: Primary General	Aggregate	Year-to-Date ▼	Earmarked through Democracy Engine
Other (specify) ▼		10000.00	Lamarked through Democracy Engine
Full Name (Last, First, Middle Initial)			Data of Descipt
Mailing Address 52 High Rock Rd			Date of Receipt
			08 18 2014
City Wayland	State MA	Zip Code 01778	Transaction ID : 11ai-000000015
FEC ID number of contributing			Amount of Each Receipt this Period
federal political committee.	C		50000.00
Name of Employer	Occupation		
Bain Capital	Investor		
Receipt For: Primary General	Aggregate	Year-to-Date ▼	
Other (specify) Other (specify)		50000.00	
			'
SUBTOTAL of Receipts This Page (optional))		70000.00
	<u></u>		
TOTAL This Period (last page this line numb	oer only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

106

for each category of the Detailed Summary Page 14 13 15 16 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) Forward Massachusetts Full Name (Last, First, Middle Initial) Joshua Bekenstein Date of Receipt Mailing Address 52 High Rock Rd 2014 09 03 City Zip Code State Transaction ID: 11ai-000000016 Wayland MA 01778 Amount of Each Receipt this Period FEC ID number of contributing C 25000.00 federal political committee. Name of Employer Occupation **Bain Capital** Investor Receipt For: Aggregate Year-to-Date ▼ Primary General 75000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Amos B. Hostetter Jr. Date of Receipt Mailing Address 85 Mt Vernon St 09 04 2014 City State Zip Code Transaction ID: 11ai-000000017 MA **Boston** 02108 Amount of Each Receipt this Period FEC ID number of contributing C 25000.00 federal political committee. Name of Employer Occupation Pilot House Associates, LLC Chairman Receipt For: Aggregate Year-to-Date ▼ Primary General 25000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 50000.00 SUBTOTAL of Receipts This Page (optional)..... 120000.00

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

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 106 (check only one) 11a
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) Forward Massachusetts		erson for the purpose of soliciting contributions
Name of Employer Occupat	Zip Code 20011 C00468314 dion ate Year-to-Date ▼	Date of Receipt 07 02 2014 Transaction ID: 11c-000000009 Amount of Each Receipt this Period 10000.00 [MEMO ITEM] Total earmarked through conduit; PAC limit not effected.
Name of Employer Occupat	Zip Code 20011 C00468314 cion ate Year-to-Date ▼	Date of Receipt 08 06 2014 Transaction ID: 11c-000000014 Amount of Each Receipt this Period 20000.00 [MEMO ITEM] Total earmarked through conduit; PAC limit not effected.
Full Name (Last, First, Middle Initial) Mailing Address City State FEC ID number of contributing federal political committee. Name of Employer Occupation Aggregation of the Community of the	Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional))	0.00
TOTAL This Period (last page this line number only)	·····	0.00

SCHEDULE B (FEC Form 3X)	lles same	to opposite (=)	1	FOR LINE NUMBER: PAGE 9 OF 106						
TEMIZED DISBURSEMENTS	for each ca	te schedule(s) tegory of the immary Page	(check only 21b 27	one) 22 28a	23 28b	24 280		25 29	20	
Any information copied from such Reports and State or for commercial purposes, other than using the nar			d by any perso	on for the	purpose	of soliciti	ng co	ntribut	tions	
NAME OF COMMITTEE (In Full) Forward Massachusetts	me and addres	ss or any politica	ai committee to	SOIICIT COR	itributions	s from St	ich co	ommitte	<u>ee.</u>	
Full Name (Last, First, Middle Initial)										
- Cambridge Innovations				Date of	Disburse	ement				
Mailing Address 1 Broadway St				07	/ D)1)14	Υ	
,		Zip Code		Trans	action ID	· 21h-03	2_0001	8-000	118	
Cambridge Purpose of Disbursement	MA	02142		IIaiis	action ib	. 215-0	-0001	0-000		
Rent				Amount	of Each	Disburse	ement	this F	Period	
Candidate Name			Category/					350	0.00	
Office Sought: House Disburse Senate President	ment For: Primary Other (specify	General y) ▼	Туре			,				
State: District:	'									
Full Name (Last, First, Middle Initial) - Emily Cherniack				Date of	Disburse	ement				
Mailing Address 1 Emerson PI Apt 16C				07	/ D	01		014	Υ	
Boston		Zip Code 02114		Trans	action ID) : 21b-0	3-0001	19-000)19	
Purpose of Disbursement Management Consulting Services				Amount	of Each	Disburse	ement	this F	Period	
Candidate Name			Category/ Type					1500).00	
Office Sought: House Senate President State: District:	ment For: Primary Other (specify	General ✓								
Full Name (Last, First, Middle Initial) First Jackson Realty, LLC					Disburse					
Mailing Address 92 Jackson St				07	/ D)1)14	Y	
Salem		Zip Code 01970-3068		Trans	action ID) : 21b-0	3-0002	20-000)20	
Purpose of Disbursement Office Rent Candidate Name				Amount	of Each	Disburse	ement	this F	Period	
Canadate Hane			Category/ Type					1000	.00	
	ment For: Primary	General								
Senate President State: District:	Other (specify	y) ▼								

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28 28b	24 25 26 28c 29 36				
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full) Forward Massachusetts	Gadrood or any point		Jan Gorial Dullotto	Sasti Sommittee.				
Full Name (Last, First, Middle Initial)								
^{A.} Sean Donnelly			Date of Disbursen					
Mailing Address 1 Silver Leaf Way #123			07 16					
City	State Zip Code		Transaction ID	: 21b-03-00028-00029				
Peabody	MA 01960		. เฉมอลงแบท ID :	. <u> </u>				
Purpose of Disbursement Payroll			Amount of Each D	Disbursement this Period				
Candidate Name		Category/ Type		2000.00				
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) \(\pi\)							
State: District:								
Full Name (Last, First, Middle Initial)								
B. Emily Cherniack			Date of Disbursen					
Mailing Address 1 Emerson PI Apt 16C			07 30					
City Boston	State Zip Code MA 02114		Transaction ID :	: 21b-03-00032-0000				
Purpose of Disbursement Reimbursed Expenses-See Memos		<u> </u>	Amount of Fach F	Disbursement this Period				
Candidate Name		Category/ Type		1417.19				
Office Sought: House Disburse	ment For: Primary General Other (specify) ▼	1,700						
Full Name (Last, First, Middle Initial) C. MBTA			Date of Disbursen					
Mailing Address 89 South St #801			07 30					
City Boston	State Zip Code MA 02111		Transaction ID :	: 21b-03-00032-00054				
Purpose of Disbursement Train Fare								
Candidate Name		Category/ Type		Disbursement this Period 13.50				
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	1,900	[MEMO ITEM]	7 1 7				
				3417.19				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I		PAGE 11 OF 10
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 36
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) Forward Massachusetts	and address of any polling	a. committee to	SSIGN SOMMINGHOUS	cash committee.
Full Name (Last, First, Middle Initial)			Data (Dil	
A. Verizon			Date of Disburse	
Mailing Address 745 Boylston St			07 30	
,	State Zip Code		Transaction ID	: 21b-03-00032-00046
Boston Purpose of Disbursement	MA 02118			
Telephone			Amount of Each	Disbursement this Period
Candidate Name		Category/		17 04
Office Cought: House Dist	nent Fer	Type		47.81
	nent For: Primary General Other (specify)		[MEMO ITEM]	
State: District:	· 			
Full Name (Last, First, Middle Initial) 3. MBTA			Date of Disburse	ment
			M M / D	
Mailing Address 89 South St #801			07 3	0 2014
,	State Zip Code		Transaction ID	: 21b-03-00032-00047
Boston Purpose of Disbursement	MA 02111			
Train Fare			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		14.00
President	nent For: Primary General Other (specify)		[MEMO ITEM]	
State: District: Full Name (Last, First, Middle Initial)				
• Verizon			Date of Disburse	
Mailing Address 745 Boylston St			07 30	
Boston	State Zip Code MA 02118		Transaction ID	: 21b-03-00032-00048
Purpose of Disbursement Telephone				
Candidate Name		Category/ Type	Amount of Each	Disbursement this Period 37.19
	nent For: Primary General Other (specify)	туре	[MEMO ITEM]	
				0.00

S	CHEDULE B (FEC Form 3X)			FOR LIN	FOR LINE NUMBER: PAGE 12 OF 106						
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check or	ly one)						
			Summary Page	X 211	22 28a	23 28b	24		25 29	26 30b	
Δν	ny information copied from such Reports and Staten	l nente mav	not be sold or us								
	for commercial purposes, other than using the nam										
\setminus	NAME OF COMMITTEE (In Full)										
$ \rangle$	Forward Massachusetts										
_	Full Name (Last, First, Middle Initial)										
A.	MBTA					of Disbur					
	Mailing Address 89 South St #801				07	/ D	30)14	Y	
	City	State	Zip Code		<u> </u>						
	Boston	MA	02111		Tran	saction I	D : 21b-0	3-0003	32-000	49	
	Purpose of Disbursement Train Fare				Amou	nt of Eac	h Disburs	sement	this F	Period	
	Candidate Name			Category/					14	.00	
	Office Sought: House Disbursen	nent For		Туре		0.122				**	
		Primary	General		[MEM	O ITEM]					
	President	Other (spe									
	State: District:										
	Full Name (Last, First, Middle Initial)										
В.	Gogo Air					of Disbur					
	Mailing Address 1250 N Arlington Heights Rd Ste 5	0			07		30		014		
		State	Zip Code		Trar	saction l	D : 21b-0	3-0003	32-000)50	
	Itasca Purpose of Disbursement	IL	60143		-						
	Internet Access				Amou	nt of Eac	h Disburs	sement	this F	Period	
	Candidate Name		Category/						- 44	00	
				Type					14	.00	
	Office Sought: House Disbursen		Camanal		[MEM	O ITEM]					
		Primary Other (spe	General								
	State: District:	Outor (spe	√y) ▼								
_	Full Name (Last, First, Middle Initial)				+						
C.	Gogo Air				Date	of Disbur	sement				
						/ D	■ D /		Y	Υ	
	Mailing Address 1250 N Arlington Heights Rd Ste 50)			07		30	_ 20)14		
	•	State	Zip Code		Tran	saction I	D : 21b-0	3-0003	32-000)51	
	Itasca Purpose of Disbursement	IL	60143								
	Internet Access					nt of Eac	h Disburs	sement	this F	Period	
	Candidate Name Category/ Type					14.00					
	Office Sought: House Disbursen	nent For:		71	IMEM	O ITEM]					
	Senate	Primary	General		LIVICIVI	~ E.WIJ					
	President	Other (spe	ecify) 🔻								
_	State: District:										
8	SUBTOTAL of Disbursements This Page (optional)								0	.00	
F					-	7		-		#	
т	OTAL This Period (last page this line number only)			·····							

SCHEDULE B (FEC FO	Llos congreto cohodu	ام/م\	NUMBER: PAGE 13 OF 10
TEMIZED DISBURSEME	for each category of Detailed Summary Pa	the Concor on	y one) 22 23 24 25 26 28a 28b 28c 29 30
			son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Forward Massachusett			2 2 3 3 2 2 3 3 2 3 3 3 3 3 3 3 3 3 3 3
Full Name (Last, First, Middle Init	ial)		5. (5.1
^{A.} Gogo Air			Date of Disbursement
Mailing Address 1250 N Arlington	Heights Rd Ste 50		07 30 2014
City	State Zip Code		Transaction ID : 21b-03-00032-00045
Itasca Purpose of Disbursement	IL 60143		- 1131134311311212131313131313131313131313
Internet Access			Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	20.95
Office Sought: House Senate President	Disbursement For: Primary Gene Other (specify) ▼	eral	[MEMO ITEM]
State: District:			
Full Name (Last, First, Middle Init	ial)		
3. Nationbuilder			Date of Disbursement
Mailing Address 448 S Hill St Ste	200		07 30 2014
City	State Zip Code		Transaction ID : 21b-03-00032-00053
Los Angeles Purpose of Disbursement	CA 90013		- 113133313112 1213 00 00002 00003
Database Software Subscription			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	107.00
Office Sought: House Senate President State: District:	Disbursement For: Primary Gene Other (specify) ▼	ral	[MEMO ITEM]
Full Name (Last, First, Middle Init	ial)		Date of Disbursement
Mailing Address 1455 Market St			07 30 / 2014
City San Francisco	State Zip Code CA 94103		Transaction ID: 21b-03-00032-00041
Purpose of Disbursement Taxi Fare			
Candidate Name		Category/	Amount of Each Disbursement this Period 5.77
	Disbursement For:	Type	[MEMO ITEM]

ľ

SCHEDULE B (FEC	Form 3X)			FOR LINE NUMBER: PAGE 14 OF 10						
ITEMIZED DISBURS	EMENTS		arate schedule(s) category of the	(check only	one)					
			Summary Page	X 21b 27	22				26 30b	
Any information popied from a	ich Ponorto and Ctata	l nonto mass	not he cold or			the purpose of soliciting contribution in contributions from such committee to of Disbursement Transaction ID: 21b-03-00032-0009 The purpose of soliciting contribution in contributions from such committee to of Disbursement Transaction ID: 21b-03-00032-0009 The purpose of soliciting contribution in contributions from such committee to of Disbursement this P Transaction ID: 21b-03-00032-0009 The purpose of soliciting contribution in cont				
NAME OF COMMITTEE (In	Full)									
Forward Massachu	ısetts									
Full Name (Last, First, Midd	lle Initial)				_					
A . AT&T						_				
Mailing Address 647 Boylsto	on St				07				Y	
City		State	Zip Code		_					
Boston		MA	02118		Trans	saction ID	: 21b-03-00	0032-000)55	
Purpose of Disbursement Telephone					Amoun	t of Each	Disburseme	ent this I	Period	
Candidate Name				Category/				60	0.08	
Office Sought: Hou	se Disburser	nent For		Туре	,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Sen		Primary	General		[MEMO ITEM]					
	sident	Other (spe								
State: District:			· 							
Full Name (Last, First, Midd	lle Initial)									
B. Gogo Air						_				
Mailing Address 1250 N Ar	lington Heights Rd Ste 5	0			. м = м 07				Y	
City		State IL	Zip Code		Trans	saction ID	: 21b-03-00	0032-000)52	
Itasca Purpose of Disbursement		IL .	60143							
Internet Access						t of Each	Disburseme	ent this I	Period	
Candidate Name	Candidate Name Category/								7.00	
Office Country	00			Type		- 7			.00	
Office Sought: Hou		nent For: Primary	General		[MEMC	ITEM]				
		Other (spe								
State: District:		(opo	- 3/ ▼							
Full Name (Last, First, Midd	lle Initial)									
C. Uber					Date o	f Disburse	ment			
NA-SP A L L					M M				Υ	
Mailing Address 1455 Mark	et St				07	3	U	2014		
City	(State	Zip Code		Tear	action ID	. 216 02 00	1033 004	144	
San Francisco	San Francisco CA 94103					saction ID	: 210-03-00	JU3Z-UU(J 44	
Purpose of Disbursement Taxi Fare	Purpose of Disbursement Taxi Fare					–				
	Candidata Nama				Amount of Each Disbursement this P					
				Category/ Type			-	14	.40	
Office Sought: Hou	se Disburser	nent For:			IMEMO) ITEM1				
Sen		Primary	General							
	President Other (specify) ▼									
State: District:										
SUBTOTAL of Disbursements	This Page (ontional)							0	.00	
CODICIAL OF DISDUISEMENTS	i ilis i age (upliuliai)			·····	-	1		_	#	
TOTAL This Period (last page	e this line number only)									

PAGE 15 OF 10
3 24 25 2 3b 28c 29 3
se of soliciting contributions ons from such committee.
<u></u>
ursement
30 2014
ID : 21b-03-00032-00056
ch Disbursement this Period
13.50
1
rsement
30 2014
ID : 21b-03-00032-00042
ch Disbursement this Period
6.86
1
rsement
30 / 2014
ID : 21b-03-00032-00060
ch Disbursement this Period
14.00
ני

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only		PAGE 16 OF 10				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 28b	24 25 26 28c 29 30				
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full) Forward Massachusetts								
Full Name (Last, First, Middle Initial) A. MBTA			Date of Disbursem					
Mailing Address 89 South St #801			07 30	2014				
Boston	State Zip Code MA 02111		Transaction ID :	21b-03-00032-00040				
Purpose of Disbursement Train Fare Candidate Name			Amount of Each D	isbursement this Period				
Office Sought: House Disbursen	nent For	Category/ Type	IMENO ITEM	14.00				
Senate President	Primary General Other (specify) ▼		[MEMO ITEM]					
State: District:								
Full Name (Last, First, Middle Initial) B. AT&T			Date of Disbursem					
Mailing Address 647 Boylston St			07 30					
,	State Zip Code MA 02118		Transaction ID : 21b-03-00032-00039					
Telephone			Amount of Each D	isbursement this Period				
Candidate Name		Category/ Type		145.18				
President	nent For: Primary General Other (specify)		[MEMO ITEM]					
Full Name (Last, First, Middle Initial) C. MBTA	,							
Mailing Address 89 South St #801			07 30					
Boston	State Zip Code MA 02111		Transaction ID :	21b-03-00032-00038				
Purpose of Disbursement Train Fare Candidate Name		Category/	Amount of Each D	hisbursement this Period				
200		Type		70.00				
	nent For: Primary General Other (specify)		[MEMO ITEM]					
State: District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)				0.00				

Use separate schedule(s) for each category of the Dotaled Summary Page	SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 17 OF 10						
Anount of Each Disbursement for: Full Name (Last, First, Middle Initial)	TEMIZED DISBURSEMENTS	for each category o	f the	X 21b	22					
FUII Name (Last, First, Middle Initial) Gogo Air Mailing Address 1250 N Arlington Heights Rd Ste 50 City Itasca Itasc										
Address 1250 N Artington Heights Rd Ste 50 City State Zip Code IL 60143 Purpose of Disbursement Internet Access Candidate Name Category' City State: District: Full Name (Last, First, Middle Initial) House Senate President Office Sought: House Senate President Office Sought: House Disbursement For: Senate President Office Sought: Transaction ID : 21b-03-00032-00037 Amount of Each Disbursement this Per Category' Type Date of Disbursement this Per Category' Type Date of Disbursement Office Sought: House Senate Primary General Primary General Other (specify) ▼ Transaction ID : 21b-03-00032-00036 Amount of Each Disbursement Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) House Senate President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) House Senate President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) House Senate Primary General Other (specify) ▼ Category' Type Mailing Address 28 Norman St City State Zip Code MA 01970 Date of Disbursement Office Sought: House State Zip Code MA 01970 Transaction ID : 21b-03-00032-00035 Amount of Each Disbursement Office Sought: House Category' Type Transaction ID : 21b-03-00032-00035 Mailing Address 28 Norman St City State Zip Code MA 01970 Amount of Each Disbursement Office Sought: House Category' Type Mailing Address 28 Norman St City State Zip Code MA 01970 Category' Type Mailing Address 28 Norman St City State Zip Code MA 01970 Category' Type Missing Address 28 Norman St City State Zip Code MA 01970 Category' Type Missing Address 28 Norman St City State Zip Code MA 01970 Category' Type Missing Address 28 Norman St City State Zip Code Mailing Address 28 Norman St City State Zip Code Mailing Address 28 Norman St City State Zip Code Mailing Address 28 Norman St City State Zip Code Mailing Address 28 Norman St City State Zip Code Mailing Address 28 Norman St City State Zip Code M	` '									
Address 1250 N Arlington Heights Rd Ste 50	Full Name (Last. First, Middle Initial)									
City State Zip Code IL Got43 Purpose of Disbursement Internet Access Candidate Name Category/ Type Category/ Type City State Zip Code Primary General Office Supplies Category/ Type Category/ Type Date of Disbursement Office Supplies Category/ Type Date of Disbursement Transaction ID : 21b-03-00032-00037 Amount of Each Disbursement this Per Z2.95 [MEMO ITEM] Date of Disbursement Office Supplies Candidate Name Category/ Type Transaction ID : 21b-03-00032-00036 IMEMO ITEM] Date of Disbursement Office Supplies Category/ Salem President Other (specify) ▼ Date of Disbursement Office Supplies Category/ Type Transaction ID : 21b-03-00032-00036	,					_			Y Y	Y
Transaction ID : 21b-03-00032-00037 Purpose of Disbursement Internet Access Candidate Name Office Sought: House Senate President Perimary General Primary General Office Supplies City State Zip Code TN 38116 Purpose of Disbursement United Primary General Office Supplies Candidate Name Category/ Type Date of Disbursement Office Supplies Candidate Name Category/ Type Transaction ID : 21b-03-00032-00036 Memphs TN 38116 Transaction ID : 21b-03-00032-00036 Transaction ID : 21b-03-00032-00036 Transaction ID : 21b-03-00032-00036 Amount of Each Disbursement Office Supplies Category/ Type Mailing Address 28 Norman St Category/ Type Date of Disbursement this Per Salet State Sip Code MA 01970 Date of Disbursement Office Supplies Category/ Type Transaction ID : 21b-03-00032-00036 Transaction ID : 21b-03-00032-00036 Transaction ID : 21b-03-00032-00036 Amount of Each Disbursement Office Supplies Category/ Type Transaction ID : 21b-03-00032-00035 Transaction ID : 21b-03-00032-00035 Amount of Each Disbursement Metring Meal Expenses Candidate Name Category/ Type Transaction ID : 21b-03-00032-00035 Amount of Each Disbursement this Per Category/ Type Transaction ID : 21b-03-00032-00035 Amount of Each Disbursement this Per Category/ Type Transaction ID : 21b-03-00032-00035 Amount of Each Disbursement this Per Category/ Type Transaction ID : 21b-03-00032-00035	Mailing Address 1250 N Arlington Heights Rd Ste 5	0			07		30		2014	
Transaction ID : 21b-03-00032-00036 House			9		Trans	action I	D · 21h	-03-00	032-00	037
Internet Access Candidate Name Category/ Type Office Sought: House Senate President Other (specify) ▼ Full Name (Last, First, Middle Initial) FedEx Office Mailing Address 3875 Airways City State Zip Code TN 38116 Purpose of Disbursement For: Category/ Type Candidate Name Category/ Type Date of Disbursement Transaction ID : 21b-03-00032-00036 May Other (specify) ▼ Transaction ID : 21b-03-00032-00036 May Other (specify) ▼ Bate Tip Code Category/ Type Mailing Address 28 Norman St City State Zip Code Category/ Type Disbursement this Per Category/ Type Date of Disbursement this Per Category/ Type City State Zip Code MA 01970 Purpose of Disbursement Maeting Meal Expenses Candidate Name Disbursement Type Category/ Type Category/ Type Transaction ID : 21b-03-00032-00036 Amount of Each Disbursement this Per Category/ Amount of Each Disbursement this Per Category/ Type C		IL 60143			mano	uotioii i		, 00 00	002 00	001
Office Sought: House Senate Primary General Other (specify) ▼ State: District:	Internet Access				Amount	t of Eac	h Disbı	urseme	nt this	Period
Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) FedEx Office Mailing Address 3875 Airways City State Zip Code TN 38116 Purpose of Disbursement Office Supplies Candidate Name Category/ Type Date of Disbursement Transaction ID : 21b-03-00032-00036 Amount of Each Disbursement this Per Senate Disbursement For: Senate District: Full Name (Last, First, Middle Initial) Hong Kong Mailing Address 28 Norman St City State Zip Code Transaction ID : 21b-03-00032-00036 Transaction ID : 21b-03-00032-00036 [MEMO ITEM] Date of Disbursement this Per Category/ Type [MEMO ITEM] Transaction ID : 21b-03-00032-00036 Amount of Each Disbursement Transaction ID : 21b-03-00032-00035 Amount of Each Disbursement Transaction ID : 21b-03-00032-00035 Amount of Each Disbursement this Per Category/ Type Category/ Type Transaction ID : 21b-03-00032-00035 Amount of Each Disbursement this Per Category/ Type Transaction ID : 21b-03-00032-00035 Amount of Each Disbursement this Per Category/ Type Amount of Each Disbursement this Per Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼						- 7		,	2	2.95
Full Name (Last, First, Middle Initial) FedEx Office Mailing Address 3875 Airways City Memphis Purpose of Disbursement Office Supplies Candidate Name Office Sought: Full Name (Last, First, Middle Initial) House President State: District: Full Name (Last, First, Middle Initial) Hong Kong Mailing Address 28 Norman St City Salem Amount of Each Disbursement this Per Mailing Address 28 Norman St City Salem Category/ Type Mailing Address 28 Norman St City Salem Mailing Address 28 Norman St City Salem Amount of Each Disbursement St Amount of Each Disbursement St Mailing Address 28 Norman St City Salem Mailing Address 28 Norman St City Salem Amount of Each Disbursement St A	Senate	Primary Ger	neral		[MEMC	ITEM]				
Transaction ID : 21b-03-00032-00036 Mailing Address 3875 Airways City State Zip Code TN 38116 Purpose of Disbursement Office Supplies Candidate Name Category/ Type Office Sought: House Primary General Other (specify) ▼ City State: District: Full Name (Last, First, Middle Initial) Hong Kong Mailing Address 28 Norman St City State Zip Code General Other (specify) ▼ Disbursement For: [MEMO ITEM] Date of Disbursement ID : 21b-03-00032-00036 Amount of Each Disbursement this Per Memory Type Date of Disbursement this Per Memory Type Transaction ID : 21b-03-00032-00036 Transaction ID : 21b-03-00032-00036 Amount of Each Disbursement Office Sought: House Disbursement For: [MEMO ITEM] Category/ Type Category/ Type Office Sought: House Primary General Other (specify) ▼ Category/ Type Office Sought: House Disbursement For: [MEMO ITEM]	State: District:									
City State Zip Code Memphis TN 38116 Purpose of Disbursement Office Supplies Candidate Name Category/ Type Office Sought: House President State: District: Full Name (Last, First, Middle Initial) Hong Kong Mailing Address 28 Norman St City State Zip Code MA 01970 Purpose of Disbursement Meeting Meal Expenses Candidate Name Category/ Type Transaction ID: 21b-03-00032-00036 Amount of Each Disbursement this Per [MEMO ITEM] Transaction ID: 21b-03-00032-00035 Amount of Each Disbursement Mailing Address 28 Norman St Transaction ID: 21b-03-00032-00035 Transaction ID: 21b-03-00032-00035 Amount of Each Disbursement Mailing Address 28 Norman St City State Zip Code MA 01970 Purpose of Disbursement Meeting Meal Expenses Candidate Name Category/ Type Office Sought: House Primary General Other (specify) ▼ [MEMO ITEM]	FedEx Office				M = M	_	D	Y		Y
Memphis TN 38116 Purpose of Disbursement Office Supplies Candidate Name Category' Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Hong Kong Mailing Address 28 Norman St City State Zip Code Salem MA 01970 Purpose of Disbursement Meeting Meal Expenses Candidate Name Category' Type Date of Disbursement Mailing Address 28 Norman St Transaction ID: 21b-03-00032-00035 Amount of Each Disbursement Mailing Address 28 Norman St City State Zip Code MA 01970 Furpose of Disbursement Meeting Meal Expenses Candidate Name Category' Type Office Sought: House Primary General Other (specify) ▼ [MEMO ITEM] Memo ITEM]		State Zin Code	7							
Office Supplies Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ City State Zip Code Salem MA 01970 Purpose of Disbursement Meeting Meal Expenses Candidate Name Category/ Type [MEMO ITEM] Amount of Each Disbursement this Per Memory Repeated to the primary General Other (specify) ▼ Amount of Each Disbursement this Per Memory Repeated to the primary General Other (specify) ▼ Amount of Each Disbursement this Per Memory Repeated to the primary General Other (specify) ▼ Amount of Each Disbursement this Per Memory Repeated to the primary General Other (specify) ▼ Amount of Each Disbursement this Per Memory Repeated to the primary General Other (specify) ▼ Amount of Each Disbursement this Per Memory Repeated to the primary General Other (specify) ▼	Memphis	•			Trans	action	ID : 21k	o-03-00	032-00	036
Office Sought: House Disbursement For: Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Hong Kong Mailing Address 28 Norman St City State Zip Code Salem MA 01970 Purpose of Disbursement Meeting Meal Expenses Candidate Name Category/ Type [MEMO ITEM] Transaction ID: 21b-03-00032-00035 Amount of Each Disbursement this Per Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) [MEMO ITEM] [MEMO ITEM]	Office Supplies				Amoun	t of Eac	h Disbı	urseme	nt this	Period
Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Hong Kong Mailing Address 28 Norman St City State Zip Code Salem MA 01970 Purpose of Disbursement Meeting Meal Expenses Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Included The Included Senate Primary General Other (specify) ▼ [MEMO ITEM]	Candidate Name					,		,		8.24
Full Name (Last, First, Middle Initial) Hong Kong Mailing Address 28 Norman St City State Zip Code Salem MA 01970 Purpose of Disbursement Meeting Meal Expenses Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Category/ Type IMAM 0 Date of Disbursement Transaction ID: 21b-03-00032-00035 Amount of Each Disbursement this Per [MEMO ITEM]	Senate President	Primary Ger	neral		[MEMC	ITEM]				
Mailing Address 28 Norman St City State Zip Code Salem MA 01970 Purpose of Disbursement Meeting Meal Expenses Candidate Name Category/ Type Office Sought: House Senate Primary General President President O7 30 2014 Transaction ID: 21b-03-00032-00035 Amount of Each Disbursement this Per Category/ Type [MEMO ITEM]	Full Name (Last, First, Middle Initial)					f Disbur	sement			
Salem MA 01970 Purpose of Disbursement Meeting Meal Expenses Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) Type I MA 01970 Transaction ID: 216-03-00032-00035 Amount of Each Disbursement this Per 45.70 [MEMO ITEM]	Mailing Address 28 Norman St				/ D				Y	
Purpose of Disbursement Meeting Meal Expenses Candidate Name Category/ Type Office Sought: Disbursement For: Senate Primary Other (specify) Other (specify))		Trans	action	ID : 21k	o-03-00	032-00	035
Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ Category/ Type [MEMO ITEM]	Purpose of Disbursement					=	. 5: .			.
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ [MEMO ITEM]	Candidate Name		Ca		Amoun	t of Eac	n Disbi	urseme		
State: District:	Senate President	Primary Ger	neral	туре	[MEMO	ITEM]		7		
	State: DISTRICT:									

SCHEDULE B (FEC Form 3X)	Han annount of the Co	FOR LINE	NUMBER:	PAGE 18 OF 106			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(onlook only					
	Detailed Summary Page	21b	22 23 28b	24 25 26 28c 29 30b			
Any information copied from such Reports and Stater or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)	•						
Forward Massachusetts							
Full Name (Last, First, Middle Initial) A. Amtrak			Date of Disburseme	ent			
			M M / D D	/ Y Y Y Y Y			
Mailing Address 2 South Station			07 30	2014			
City S Boston	State Zip Code MA 02118		Transaction ID : 2	21b-03-00032-00033			
Purpose of Disbursement Train Fare			Amount of Each Di	sbursement this Period			
Candidate Name							
Office Sought: House Disburser	nent For:	Type		274.00			
Senate	Primary General		[MEMO ITEM]				
State: President	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
B. MBTA			Date of Disburseme				
Mailing Address 89 South St #801			07 30	2014			
City	State Zip Code						
Boston	MA 02111		Transaction ID: 2	21b-03-00032-00043			
Purpose of Disbursement Train Fare			Amount of Each Di	sbursement this Period			
Candidate Name		Category/		14.00			
Office Sought: House Disburser	nent For:	Туре	[MEMO ITEM]	7			
Senate President	Primary General		[
State: District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial) C. AT&T			Date of Disburseme	ent			
			M M / D D	/ Y Y Y Y Y			
Mailing Address 647 Boylston St			07 30	2014			
,	State Zip Code MA 02118		Transaction ID : 2	21b-03-00032-00058			
Purpose of Disbursement	02110						
Telephone Candidate Name		0.1	Amount of Each Di	sbursement this Period			
		Category/ Type		152.05			
Office Sought: House Disburser Senate	nent For: Primary General		[MEMO ITEM]				
President	Other (specify) ▼						
State: District:							
SUBTOTAL of Disbursements This Page (optional)				0.00			
TOTAL This Period (last page this line number only)							

CHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE			
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(official offiny	7 one) 22 23 24 25 26 28a 28b 28c 29 3		
any information copied from such Reports and Stor for commercial purposes, other than using the					
NAME OF COMMITTEE (In Full) Forward Massachusetts	and address of any poll	- 33	The second from Such Committee.		
Full Name (Last, First, Middle Initial) - Amtrak			Date of Disbursement		
Mailing Address 2 South Station			07 30 / Y Y Y Y Y Y		
City	State Zip Code MA 02118		Transaction ID : 21b-03-00032-00059		
Boston Purpose of Disbursement Train Fare	IVIA UZ118		Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	146.00		
Office Sought: House Disbute Senate President	rsement For: Primary General Other (specify)	1,752	[МЕМО ІТЕМ]		
State: District:					
Full Name (Last, First, Middle Initial) Nationbuilder Mailing Address 448 S Hill St Ste 200			Date of Disbursement O7 30 2014		
City		Transaction ID : 21b-03-00032-00057			
Los Angeles Purpose of Disbursement Database Software Subscription	CA 90013	· · · ·	Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	82.38		
Office Sought: Senate President State: Disbut	rsement For: Primary General Other (specify)	1 .752	[МЕМО ІТЕМ]		
Full Name (Last, First, Middle Initial) - MBTA		Date of Disbursement			
Mailing Address 89 South St #801	Mailing Address 89 South St #801				
City Boston Purpose of Disbursement	State Zip Code MA 02111		Transaction ID : 21b-03-00032-00061		
Train Fare Candidate Name		Category/	Amount of Each Disbursement this Period		
Office Sought: House Disbu	rsement For: Primary General	Туре	[MEMO ITEM]		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 20 OF 106
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
Forward Massachusetts				
Full Name (Last, First, Middle Initial)			Date of Disburs	omont
A. Uno's			Date of Disburs	
Mailing Address 970 Paradise Rd				2014
	State Zip Code		Transaction IF) : 21b-03-00032-00062
Swampscott Purpose of Disbursement	MA 01907		Transaction	7. 215 00 00002 00002
Meeting Meal Expenses			Amount of Each	Disbursement this Period
Candidate Name		Category/		21.62
		Type		31.63
Office Sought: House Disbursen Senate	nent For: Primary General		[MEMO ITEM]	
President	Other (specify) ▼			
State: District:	· · · · · · · · ·			
Full Name (Last, First, Middle Initial)				
B. Emily Cherniack			Date of Disburs	ement
Mailing Address A Factor Pl Ast 400			07 J	30 2014
Mailing Address 1 Emerson PI Apt 16C			07	2014
City	State Zip Code		Transaction II	D : 21b-03-00033-00034
Boston Purpose of Disbursement	MA 02114			
Management Consulting Services			Amount of Each	Disbursement this Period
Candidate Name		Category/		
		Type		2000.00
Office Sought: House Disbursen				
Senate President	Primary General			
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. Cambridge Innovations			Date of Disburse	ement
			M M / D	
Mailing Address 1 Broadway St			08	2014
City	State Zip Code		Tuonasatian II	2 - 24 h 22 0000E 0000C
	MA 02142		Transaction IL	D : 21b-03-00025-00026
Purpose of Disbursement Rent				
Candidate Name			Amount of Each	Disbursement this Period
		Category/ Type		350.00
Office Sought: House Disbursen	nent For:	,, , , , , , , , , , , , , , , , , , ,	,	7
	Primary General			
President	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)				2350.00
CODICIAL OF DISDUISEMENTS THIS Page (OPHOHAI)		·····		
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)	11	, FOR LINE	NUMBER:	PAGE 21 OF 106
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	one)	
-	Detailed Summary Page		22 23 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State	ments may not be sold or			
or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
Forward Massachusetts				
Full Name (Last, First, Middle Initial)			Date of Dist	
A. First Jackson Realty, LLC			Date of Disbursen	
Mailing Address 92 Jackson St			08 05	2014
City	State Zip Code		Transaction ID ·	21b-03-00037-00066
Salem	MA 01970-3068		Transaction ID .	218-03-00037 - 00000
Purpose of Disbursement Office Rent			Amount of Each D	Disbursement this Period
Candidate Name		Category/ Type		1000.00
Office Sought: House Disburse	ement For:	туре		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Date of District	a a m t
B. Democracy Engine Inc.			Date of Disbursen	
Mailing Address 850 Quincy St, NW #402			08 06	
City	State Zip Code		Transaction ID :	21b-03-00024-00025
Washington Purpose of Disbursement	DC 20011	T		
Merchant Fee			Amount of Each D	Disbursement this Period
Candidate Name		Category/		
Democracy Engine Inc.		Type		750.40
Office Sought: House Disburse	ement For:	•		
Senate	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. Sean Donnelly			Date of Disbursen	nent
			M M / D D	
Mailing Address 1 Silver Leaf Way #123			08 06	2014
City	State Zip Code		Transaction ID -	21b-03-00039-00068
Peabody	MA 01960	1	Transaction ID .	218-00-00039-00000
Purpose of Disbursement Payroll				Natarana and All San Control
Candidate Name		Cata	Amount of Each D	Disbursement this Period
		Category/ Type		2000.00
	ement For:	-		
Senate	Primary General			
State: District:	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional).		k		3750.40
552. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.				
TOTAL This Period (last page this line number only	r)			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 22 OF 10
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 28a 28b	24 25 26 28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) Forward Massachusetts	a and address of any politic	Sa. Sommittee to	Solicit Continuation	55 500 501
Full Name (Last, First, Middle Initial)			Data of Bill	
A. Emily Cherniack			Date of Disburs	ement
Mailing Address 1 Emerson PI Apt 16C				2014
•	State Zip Code MA 02114		Transaction II	D : 21b-03-00061-0000
Purpose of Disbursement Reimbursed Expenses-See Memos			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		2947.20
	nent For: Primary General Other (specify)	,,	,	·
State: District:				
Full Name (Last, First, Middle Initial) 6. Charles River Park				D / Y Y Y Y
Mailing Address 4 Emerson PI			08	14 2014
Boston	State Zip Code MA 02210		Transaction II	D : 21b-03-00061-00093
Purpose of Disbursement Parking Fee		· · · ·	Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		48.00
President	nent For: Primary General Other (specify)		[МЕМО ІТЕМ]	
State: District: Full Name (Last, First, Middle Initial)				
2. Zipcar			Date of Disburs	ement
Mailing Address 35 Thomson PI				2014
Boston	State Zip Code MA 02210		Transaction II	D : 21b-03-00061-00101
Purpose of Disbursement Car Rental Candidate Name			Amount of Each	Disbursement this Period
	Categor Type			31.22
	nent For: Primary General Other (specify)		[MEMO ITEM]	
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).			7	2947.20

50	CHEDULE B (FEC Form 3X)	Han annual of the Co	FOR LINE	NUMBER:	PAGE 23 OF 106		
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(oricon orin)				
		Detailed Summary Page	21b	22 23 28b	24 25 26 28c 29 30b		
	ly information copied from such Reports and Stater for commercial purposes, other than using the nan						
	NAME OF COMMITTEE (In Full) Forward Massachusetts						
	Full Name (Last, First, Middle Initial)						
Α.	Zipcar			Date of Disburseme	/ Y Y Y Y Y		
	Mailing Address 35 Thomson PI			08 14	2014		
	Boston	State Zip Code MA 02210		Transaction ID : 2	21b-03-00061-00090		
	Purpose of Disbursement Car Rental		· · · ·	Amount of Each Di	sbursement this Period		
	Candidate Name		Category/ Type		57.38		
	Office Sought: House Senate President Disburser	nent For: Primary General Other (specify)		[MEMO ITEM]			
Anyor A. C.	State: District:						
В.	Full Name (Last, First, Middle Initial) Zipcar			Date of Disburseme			
	Mailing Address 35 Thomson PI			08 14	2014		
	City S Boston		Transaction ID : 21b-03-00061-0009				
	Purpose of Disbursement Car Rental			Amount of Each Di	sbursement this Period		
	Candidate Name	Category/ Type	,	66.94			
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)		[МЕМО ІТЕМ]			
_	State: District: Full Name (Last, First, Middle Initial)						
C.	Verizon			Date of Disburseme	ent		
	Mailing Address 745 Boylston St			08 14	2014		
	City Boston Purpose of Disbursement		Transaction ID : 2	21b-03-00061-00092			
	Telephone Candidate Name	Category/	Amount of Each Di	sbursement this Period			
	Office Sought: House Disburser Senate President State: District:	Туре	[MEMO ITEM]				
s	UBTOTAL of Disbursements This Page (optional)		>	, ,	0.00		
T	OTAL This Period (last page this line number only)						

	rate schedule(s)) FOR LINE				TAGE	24 (OF 10	
for each of Detailed S	category of the Summary Page	(check only 21b 27	one) 22 28a	23 28b		24 28c	25 29	3	
	any point	25			<u> </u>				
			Б.:	. D					
						V	γ	Y	
			08		14				
state MA	Zip Code 02210		Trans	action I	D : 21b	-03-000	61-000	094	
	<i>y y</i>		Amount	t of Eacl	h Disbu	ırsemer	nt this I	Period	
		Category/					62	2.16	
nent For: Primary Other (spec	General	1,400	[MEMC	ITEM]	-				
			М = М	_	D /			Y	
			08	<u> </u>	14		2014		
City State Zip Code Boston MA 02111				Transaction ID: 21b-03-00061-00096					
			Amount	t of Eacl	h Disbu	ırsemer	nt this I	Period	
Candidate Name							70	0.00	
nent For: Primary Other (spec	General Fify) ▼		[MEMC	ITEM]					
State: District: Full Name (Last, First, Middle Initial) MBTA					sement				
Mailing Address 89 South St #801					14			Y	
itate MA	Zip Code 02111		Trans	action I	D : 21b	-03-000	061-000	098	
Boston MA 02111 Purpose of Disbursement Train Fare									
Candidate Name								Period 7.00	
nent For: Primary Other (spec	General	1,750							
	e and addr itate MA ient For: Primary Other (spec	e and address of any polit itate Zip Code MA 02210 itate Zip Code MA 02111 itate Zip Code MA 02111 itate Zip Code MA 02111 itate Zip Code MA 02111	tate Zip Code MA 02210 Category/ Type tent For: Primary General Other (specify) Category/ Type Category/ Type	Date of tate Zip Code MA 02210 Date of Manual Category/ Type Intent For: Primary General Other (specify) Category/ Type Date of Manual Category/ Type Intent For: Primary General Other (specify) Date of Manual Category/ Type Intent For: Primary General Other (specify) Date of Manual Category/ Type Intent For: Primary General Other (specify) Date of Manual Category/ Type Intent For: Int	Date of Disburs Category/ Type	Date of Disbursement Category/Type Category/Type	eand address of any political committee to solicit contributions from such of eand address of any political committee to solicit contributions from such of eand address of any political committee to solicit contributions from such of eand address of any political committee to solicit contributions from such of eand address of any political committee to solicit contributions from such of eand address of any political committee to solicit contributions from such of eand address of any political committee to solicit contributions from such of eand address of any political committee to solicit contributions from such of eand address of any political committee to solicit contributions from such of eand address of any political committee to solicit contributions from such of each Disbursement Math	eand address of any political committee to solicit contributions from such committee and address of any political committee to solicit contributions from such committee and address of any political committee to solicit contributions from such committee and address of any political committee to solicit contributions from such committee and address of any political committee to solicit contributions from such committee and address of any political committee to solicit contributions from such committee and address of any political committee to solicit contributions from such committee and address of any political committee to solicit contributions from such committee and address of any political committee to solicit contributions from such committee and address of any political committee to solicit contributions from such	

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27	
Any information copied from such Reports and State or for commercial purposes, other than using the nar	ments may not be sold or use me and address of any political	d by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Forward Massachusetts			The state of the s
Full Name (Last, First, Middle Initial) A. Zipcar			Date of Disbursement
Mailing Address 35 Thomson PI			08 14 2014
Boston	State Zip Code MA 02210	_	Transaction ID : 21b-03-00061-00100
Purpose of Disbursement Car Rental Candidate Name		Category/	Amount of Each Disbursement this Period 93.64
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	Type	[MEMO ITEM]
Full Name (Last, First, Middle Initial) B. Organizer Mailing Address 1118 Howard St			Date of Disbursement 08 14 2014
City San Francisco Purpose of Disbursement Software Subscription	State Zip Code CA 94103		Transaction ID: 21b-03-00061-00102 Amount of Each Disbursement this Period
Candidate Name Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	Category/ Type	2020.00 [MEMO ITEM]
Full Name (Last, First, Middle Initial) C. Organizer Mailing Address 1118 Howard St			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code CA 94103		Transaction ID : 21b-03-00061-00103
Purpose of Disbursement Software Subscription Candidate Name		Category/ Type	Amount of Each Disbursement this Period 290.00
Office Sought: House Disbursel Senate President State: District:	ment For: Primary General Other (specify)		[MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only			0.00

50	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:		PAGE	26 (OF 106
IT	EMIZED DISBURSEMENTS	Use separate sch for each category		(check only		□	104	٦	
		Detailed Summary		X 21b 27	22 28a	23 28b	24 28c	25 29	26 30b
	ry information copied from such Reports and Stater for commercial purposes, other than using the nar								
	NAME OF COMMITTEE (In Full)								
$ \rangle$	Forward Massachusetts								
_	Full Name (Last, First, Middle Initial)				Data of F)isbursemei	at		
A.	Walmart				M M	/ D D		Y	V
	Mailing Address 450 Highland Ave				08	14		2014	
	,	State Zip Co			Transac	tion ID : 21	b-03-000)61-00(097
	Salem Purpose of Disbursement	MA 01970	·						
	Office Supplies				Amount o	f Each Dis	bursemer	nt this f	Period
	Candidate Name			Category/				10	0.78
	Office Sought: House Disburser	ment For:		Туре		7	7	10	0.76
	Senate Disburser		ieneral		[MEMO I	rem]			
	President	Other (specify)							
	State: District:								
Б	Full Name (Last, First, Middle Initial)				D-4 (F	Y-1			
В.	Naumkeag Ordinary				Date of L	isburseme		Y . Y .	V
	Mailing Address 118 Washington St				08	14		2014	Y
	•	State Zip Co			Transac	tion ID : 2	1b-03-000	061-000	099
	Salem Purpose of Disbursement	MA 01970)						
	Meeting Meal Expenses				Amount o	f Each Dis	bursemer	nt this I	Period
	Candidate Name			Category/ Type		7		33	3.89
	Office Sought: House Disburser	ment For:			[MEMO I	ГЕМ]			
	Senate	,	eneral						
	President State: District:	Other (specify) ▼							
_	Full Name (Last, First, Middle Initial)								
C.	Zipcar					isburseme			
	Mailing Address 35 Thomson PI				08	14		2014	Y
	City	State Zip Co	ode		Transac	tion ID : 21	1 h-03-000	n61-000	195
	Boston Purpose of Disbursement	MA 02210			Transac		15-05-000	70 I-00C	333
	Car Rental		- 1		Amount o	f Each Dis	huraamar	at thic [Dariad
	Candidate Name			Category/	Amount	I Each Dis	bursemer		3.38
	Office Sought: House Disburser	ment For:		Туре	IMEMO	FE NAT	7		
	Senate		ieneral		[MEMO I	I EIVI]			
	President	Other (specify) ▼							
_	State: District:								
s	SUBTOTAL of Disbursements This Page (optional)			·····•		7	,	0	.00
Ļ	OTAL This Davied (last name this line name)	<u> </u>							
LΤ	OTAL This Period (last page this line number only))				- m - 1 - 1	(0)	- 40	

SCHEDULE B (FEC Form 3X)	llee caparata cabadula(a)	FOR LINE		PAGE 27 OF 10
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only X 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 30
Any information copied from such Reports and State or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full) Forward Massachusetts	The und address of any point		SOIGH GOTHING HOTE	World Good Gorialities.
Full Name (Last, First, Middle Initial)			Date of Dishuman	
A. Michael Bonbon			Date of Disburse	
Mailing Address 16 Shillaber St			08 15	2014
•	State Zip Code		Transaction ID	: 21b-03-00173-00260
Peabody Purpose of Disbursement	MA 01960		Transaction 12	. 215 00 00110 00200
Payroll		L	Amount of Each	Disbursement this Period
Candidate Name		Category/		585.00
Office Sought: House Disburse	ment For:	Туре	7	7
Senate	Primary General			
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. Dina Bonbon			Date of Disburser	ment
			M M / D	
Mailing Address 16 Shillaber St			08 15	2014
,	State Zip Code		Transaction ID	: 21b-03-00174-00261
Peabody Purpose of Disbursement	MA 01960			
Payroll		L	Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		364.00
Office Sought: House Senate President State: District:	ment For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) C. Sean Donnelly			Date of Disburse	ment
			M M / D	
Mailing Address 1 Silver Leaf Way #123			08 15	2014
,	State Zip Code		Transaction ID	: 21b-03-00056-00085
Peabody Purpose of Disbursement	MA 01960			
Payroll			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		1500.00
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	урс		
District.				
SUBTOTAL of Disbursements This Page (optional)				2449.00
TOTAL This Period (last page this line number only)			1 0 1 1 0 1

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 28 OF 106
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	le and address of any politic	cai committee to	Solicit contribution	is from such committee.
Forward Massachusetts				
Full Name (Last, First, Middle Initial)				
A. Gardy Jean-Francois			Date of Disburs	sement
Mailing Address 71 Michigan Ave # 2			08	15 2014
City	State Zip Code		T	D. 041, 00 00040 00070
Lynn	MA 01902		Transaction I	D : 21b-03-00043-00072
Purpose of Disbursement Payroll			Amount of Eac	h Disbursement this Period
Candidate Name		Category/ Type		1000.00
	nent For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) B. Brian Jean-Francois			Date of Disburs	samant
5. Brian Jean-Francois				
Mailing Address 71 Michigan Ave #2			08	29 2014
•	State Zip Code MA 01902		Transaction I	D : 21b-03-00170-00257
Purpose of Disbursement Payroll		· · · ·	Amount of Eac	h Disbursement this Period
Candidate Name		Category/ Type		546.00
President	nent For: Primary General Other (specify) ▼	,,		
State: District: Full Name (Last, First, Middle Initial)				
C. Gardy Jean-Francois			Date of Disburs	
Mailing Address 71 Michigan Ave # 2			08	29 2014
City	State Zip Code		Transaction I	D : 21b-03-00171-00258
- ,····	MA 01902		Transaction	D . 215-03-00171-00230
Purpose of Disbursement Payroll			A	h Diahamaanaa Hilia Dadad
Candidate Name		Category/ Type	Amount of Eac	h Disbursement this Period 1000.00
Office Sought: House Disbursen	nent For:	.,,,,,		
Senate	Primary General Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)		·····		2546.00
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)	Use separate schedule	·/a\	IE NUMBER: PAGE 29 OF 10					
TEMIZED DISBURSEMENTS	for each category of th Detailed Summary Pag	ie (oncor only	/ one) 22 23 24 25 26 28a 28b 28c 29 30					
Any information copied from such Reports and Stater or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full) Forward Massachusetts	and address of dry pt		The second secon					
Full Name (Last, First, Middle Initial)								
A. Travis Thurman			Date of Disbursement					
Mailing Address 60 Aspen Rd			08 29 2014					
	State Zip Code		Transaction ID : 21b-03-00172-00259					
Swampscott Purpose of Disbursement	MA 01907							
Payroll			Amount of Each Disbursement this Period					
Candidate Name		Category/ Type	546.00					
Office Sought: House Disburser Senate President	nent For: Primary Genera Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial) 3. Sean Donnelly			Date of Disbursement					
Mailing Address 1 Silver Leaf Way #123			08 29 2014					
Peabody	State Zip Code MA 01960		Transaction ID : 21b-03-00102-00144					
Purpose of Disbursement Payroll			Amount of Each Disbursement this Period					
Candidate Name		Category/ Type	1500.00					
Office Sought: House Disburser Senate President State: District:	nent For: Primary ☐ Genera Other (specify) ▼	ıl						
Full Name (Last, First, Middle Initial) - Emily Cherniack			Date of Disbursement					
Mailing Address 1 Emerson PI Apt 16C			08 29 2014					
Boston	State Zip Code MA 02114		Transaction ID: 21b-03-00103-00145					
Purpose of Disbursement Management Consulting Services			Amount of Each Disbursement this Period					
Candidate Name		Category/ Type	2000.00					
Office Sought: House Disburser	ment For: Primary Genera							
Senate President State: District:	Other (specify) ▼							

for each category of the Detailed Summary Page	(check only X 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 36
ments may not be sold or use ne and address of any politica	ed by any perso al committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
State Zip Code MA 02114		Transaction ID : 21b-03-00104-0000
ment For:	Category/ Type	Amount of Each Disbursement this Period
Primary General Other (specify) ▼		
		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
State Zip Code MA 02111		Transaction ID: 21b-03-00104-00153 Amount of Each Disbursement this Period
ment For: Primary General Other (specify) ▼	Category/ Type	10.00 [MEMO ITEM]
		Date of Disbursement
0000		08 29 2014
State Zip Code WA 98101	Catogory	Transaction ID: 21b-03-00104-00157 Amount of Each Disbursement this Period
ment For: Primary General Other (specify)	Category/ Type	815.80 [MEMO ITEM]
	State Zip Code MA 02114 State Zip Code MA 02114 State Zip Code General Other (specify) State Zip Code MA 02111 State Zip Code MA 02111 State Zip Code MA 02111 State Zip Code MA 02111	MA 02114 Category/ Type Type Type Category/ Type

SCHEDULE B (FEC Form 3X)	Harris I I I I I I	FOR LINE	NUMBER:	PAGE 31 OF 106
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(onlook only		
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
Forward Massachusetts				
Full Name (Last, First, Middle Initial)			Data of Disburge	amant
A. Accurate Append			Date of Disburse	
Mailing Address 1511 3rd Ave Ste 621				29 2014
City	State Zip Code		Transaction ID	: 21b-03-00104-00156
Seattle	WA 98101		Transaction ib	. 215-03-00104-00130
Purpose of Disbursement Data Processing			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		135.72
Office Sought: House Disburse	ement For:	туре	[MEMO ITEM]	7
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Data of Diahuwa	
B. MBTA			Date of Disburse	
Mailing Address 89 South St #801			08 2	29 2014
City	State Zip Code		Transaction ID) : 21b-03-00104-00154
Boston	MA 02111		Transaction in	7. 210-03-00104-00134
Purpose of Disbursement Train Fare			Amount of Each	Disbursement this Period
Candidate Name		Cotogony	7 mileant of Easi	Biobardonicia uno i dilea
		Category/ Type		70.00
Office Sought: House Disburse	ement For:		[MEMO ITEM]	
Senate	Primary General		-	
President State: District:	Other (specify) ▼			
State: District: Full Name (Last, First, Middle Initial)				
C. Zipcar			Date of Disburse	ement
Moiling Address OF Theresay Di			08 2	
Mailing Address 35 Thomson Pl			08 2	2014
City	State Zip Code		Transaction ID) : 21b-03-00104-00152
Boston	MA 02210		Transaction ib	7. 210-03-00104-00132
Purpose of Disbursement Car Rental				
Candidate Name		0.1	Amount of Each	Disbursement this Period
		Category/ Type		31.22
Office Sought: House Disburse	ement For:		[MEMO ITEM]	
Senate	Primary General			
President Pictrict:	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)				0.00
SOBIOTAL OF DISDUISEMENTS THIS Page (optional)		······		
TOTAL This Period (last page this line number onl	y)			

50	CHEDULE B (FEC Form 3X)	Han any series 1 1 1 1 1	, FOR LINE	E NUMBER:	PAGE 32 OF 106
IT	EMIZED DISBURSEMENTS		(oricon or	·	00
				22 28a	23 24 25 26 28b 28c 29 30b
	NAME OF COMMITTEE (In Full)				
\rangle	Forward Massachusetts				
Δ	Full Name (Last, First, Middle Initial)			Date of Dis	chursement
Λ.	Zipcar			M M /	D D / Y Y Y Y
	Mailing Address 35 Thomson PI			08	29 2014
	,	•		Transacti	on ID : 21b-03-00104-00151
	Boston Purpose of Disbursement	MA 02210	Ι	_	
	Car Rental			Amount of	Each Disbursement this Period
	Candidate Name		Category/		23.00
	Office Sought: House Disburser	nent For:	Type		
		Use separate schedule(s) for each category of the Detailed Summary Page led from such Reports and Statements may not be sold or used by any person for the purpose of soliciting con ryposes, other than using the name and address of any political committee to solicit contributions from such contributions. ### Address of the contribution of the purpose of soliciting con ryposes. ### Address of the purpose of soliciting con ryposes. Other than using the name and address of any political committee to solicit contributions from such contributions. ### Address of the purpose of soliciting contributions from such contributions from such contributions. ### Address of the purpose of soliciting contributions from such contributions from such contributions. ### Address of the purpose of soliciting contributions from such contributions from such contributions from such contributions. ### Address of any political committee to solicit contributions from such contributions from such contributions from such contributions. ### Address of any political committee to solicit contributions from such contributions from such contributions from such contributions. ### Date of Disbursement to category if Type ### Address of any political committee to solicit contributions from such contributions f	:M]		
		Other (specify) ▼			
_					
В.	Full Name (Last, First, Middle Initial) Zipcar			Date of Dis	sbursement
	Zipcai				
	Mailing Address 35 Thomson Pl			08	29 2014
				Transacti	on ID : 21b-03-00104-00150
	Boston Purpose of Disbursement	IVIA 02210			
	Car Rental			Amount of	Each Disbursement this Period
	Candidate Name				108.38
	Office Sought: House Disburser	nent For:	- 7/2-5	[MEMO ITE	EM]
					•
		Other (specify)			
_	Full Name (Last, First, Middle Initial)				
C.	Zipcar			Date of Dis	sbursement
	Mailing Address 35 Thomson PI				
	City	State Zin Code			
	-			Transacti	on ID : 21b-03-00104-00149
	Purpose of Disbursement Car Rental				
	Candidate Name		Category/	Amount of	
	000	. =			94.56
				[MEMO ITE	M]
		•			
	State: District:	•			
,	UBTOTAL of Disbursements This Page (ontional)				0.00
dash					
т	OTAL This Period (last page this line number only)			L	

one) 22 23 24 25 28 28c 29
on for the purpose of soliciting contributions solicit contributions from such committee.
general communication of the second communication.
Date of Disbursement
08 29 2014
Transaction ID : 21b-03-00104-00148
Amount of Each Disbursement this Period
563.32 [MEMO ITEM]
[MEMOTICM]
Date of Disbursement
08 29 2014
Transaction ID: 21b-03-00104-00146
Amount of Each Disbursement this Period
10.61
[MEMO ITEM]
Date of Disbursement
08 29 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Transaction ID : 21b-03-00104-00155
Amount of Each Disbursement this Period
70.00
[MEMO ITEM]
•

SCHEDULE B (FEC Form 3X)	Harris I to the	, FOR LINE	NUMBER:	PAGE 34 OF 106
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	/ one)	
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	le and address of any point	icai committee to	3 SOIICIT COTHIDUTIONS	nom such commuee.
Forward Massachusetts				
Full Name (Last, First, Middle Initial)				
A. Cambridge Innovations			Date of Disburse	
Mailing Address 1 Broadway St			09 02	
City	State Zip Code		Transaction ID	. 041- 02 00405 00050
- Carriage	MA 02142		Transaction ID	: 21b-03-00165-00252
Purpose of Disbursement Rent			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		350.00
	nent For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) B. Public Policy Polling			Date of Disburse	ment
			M M / D	
Mailing Address 2912 Highwoods Blvd STE 201			09 0	3 2014
Raleigh	State Zip Code NC 27604		Transaction ID	: 21b-03-00109-00161
Purpose of Disbursement Poll			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		2000.00
Senate	nent For: 2014 Primary General Other (specify)	,		
Full Name (Last, First, Middle Initial) C. Emily Cherniack			Date of Disburse	ment
Mailing Address 1 Emerson PI Apt 16C			09 1 ²	
Boston	State Zip Code MA 02114		Transaction ID	: 21b-03-00164-00251
Purpose of Disbursement Management Consulting Services			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		3000.00
	nent For: Primary General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)				5350.00
TOTAL This Period (last page this line number only).				1 1 1 1 1

SCHEDULE B (FEC Form 3X)	11-		FOR LINE	NUMBER:	PAGE	PAGE 35 OF 10			
ITEMIZED DISBURSEMENTS	Use separate for each cate		(check only						
	Detailed Sum	mary Page	X 21b 27	22 28a	23 28b	24 28c	25 29	26 30b	
Any information copied from such Reports and State or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full)									
Forward Massachusetts									
Full Name (Last, First, Middle Initial)				5					
A. Sean Donnelly					Disburseme				
Mailing Address 1 Silver Leaf Way #123				09	12		2014	Y	
City	State Zip	Code			ID 0	41 00 004			
Peabody	MA 01	960		Transa	ction ID : 2	1b-03-001	53-0020)5	
Purpose of Disbursement Payroll				Amount of	of Each Dis	sbursemer	it this P	eriod	
Candidate Name			Category/ Type		4		1000.	00	
Office Sought: House Senate President Disburse	ement For: 2014 Primary Other (specify)	General ▼	.,,,,		,				
State: District:	-								
Full Name (Last, First, Middle Initial)									
B. CommonCentsConsulting, LLC				Date of I	Disburseme	ent			
Mailing Address 2910 E Gary Way				09	12		2014	Y	
City	State Zip	Code							
Phoenix		042		Transa	ction ID : 2	1b-03-001	60-0021	12	
Purpose of Disbursement Compliance and Accounting Consulting		Γ		Amount of	of Each Dis	sbursemer	nt this P	eriod	
Candidate Name			Category/ Type		,	-,	4000.	.00	
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (specify)	General ▼							
Full Name (Last, First, Middle Initial) C. Sandler, Reiff, Lamb, Rosenstein	& Birkensto	ck, P.C.		Date of I	Disburseme	ent			
Mailing Address 1025 Vermont Ave NW STE 300				M M M	12		2014	Y	
City		Code		Transa	ction ID : 2	1b-03-001	17-0016	 69	
Washington Purpose of Disbursement	DC 20	005							
Legal Fees Candidate Name			Category/	Amount of	of Each Dis	sbursemer	t this P	eriod	
			Type				1600.	00	
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (specify)	General ▼			,	,			
Side. District.									
SUBTOTAL of Disbursements This Page (optional)			······•	L.			6600.0	00	
TOTAL This Period (last page this line number only	/)								

Han see	aroto pobodiil-/-\	1					36 O	F 10
for each	category of the	(check only 21b	22	23 28b	24	, \square	25 29	2
		ed by any perso	on for the	purpose	of solicit	ing co	ntributio	ons
me and addr	ess of any politic	cal committee to	solicit cor	ntribution	s from si	uch co	mmitte	e.
				5 1.				
				_		V -		
			09					Y
State	Zip Code		Trans	action IF) · 21h_0	3_0011	Q_0017	 71
MA	01902		Halls	action iL	, . Z I W-U-	J-UU I I	J-00 I /	
			Amount	of Each	Disburs	ement	this Po	eriod
		Category/				-	1500 (00
mont Fam 1	204.4	Type		- 7			1300.0	50
_	2014 General							
			Б.	D: 1				
				_		V		
			09					Υ
State	Zip Code		Trana	action IF) · 21h ^	3_ 0 04 <i>0</i>	1_000	
MA	02114		irans	action iL	, . Z I D-U	J-UU 16	, 1-0000	,
			Amount	of Each	Disburs	ement	this Po	eriod
		Category/ Type					2125.	.81
ment For:								
Primary	General							
Other (spec	Jily) ▼							
			Date of	Disburse	ement			
			09					Y
State	Zip Code							
CA	94103		Trans	action IE): 21b-0	3-0016	1-0023	31
		Category/	Amount	of Each	Disburs	ement	this Po	-
ment For:		Type			,			_
Primary	General		IMEMO	i i ⊏ivij				
Other (spec	cify) 🔻							
	State MA MA State MA MA MA MA State MA MA MA MA MA MA MA MA MA MA	State Zip Code MA 01902 ement For: 2014 Primary General Other (specify) State Zip Code MA 02114 State Zip Code MA 02114 Primary General Other (specify) ement For:	Use separate schedule(s) for each category of the Detailed Summary Page ements may not be sold or used by any personal address of any political committee to separate and address of any political committee to separate and address of any political committee to separate and address of any political committee to separate separat	for each category of the Detailed Summary Page ments may not be sold or used by any person for the me and address of any political committee to solicit cor Date of MA 01902 Trans: Category/ Type Trans Other (specify) ▼ Date of MA 02114 Date of Category/ Type Trans Category/ Type Date of Date	Use separate schedule(s) for each category of the Detailed Summary Page Index a tage of Disburse Page of Disburse	Use separate schedule(s) for each category of the Detailed Summary Page Percent and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of any political committee to solicit contributions from state and address of	Use separate schedule(s) for each category of the Detailed Summary Page Y 21	Use separate schedule(s) for each category of the Detailed Summary Page

CHEDULE B (FEC Form 3X)	Use separate schedule	(s) FOR LINE	
TEMIZED DISBURSEMENTS	for each category of th Detailed Summary Pag	e (oncor only	/ one) 22 23 24 25 2 28a 28b 28c 29 3
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) Forward Massachusetts	and the purpose of any purpose of an	25	and the state of t
Full Name (Last, First, Middle Initial) - Adobe			Date of Disbursement
Mailing Address 345 Park Ave			09 21 2014
City San Jose	State Zip Code CA 95110		Transaction ID : 21b-03-00161-00236
Purpose of Disbursement Software Candidate Name			Amount of Each Disbursement this Period
Office Sought: House Disburse Senate	ment For: Primary Genera	Category/ Type	10.61 [MEMO ITEM]
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial) Sunoco Mailing Address 254-258 Broadway			Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement
City Somerville	State Zip Code MA 02145		Transaction ID : 21b-03-00161-00237
Purpose of Disbursement Auto Fuel Candidate Name			Amount of Each Disbursement this Period
		Category/ Type	56.55
Office Sought: House Senate President State: District:	ment For: Primary Genera Other (specify) ▼	I	[MEMO ITEM]
Full Name (Last, First, Middle Initial) Full Color Signs and Graphics	Full Name (Last, First, Middle Initial)		
Mailing Address 26 Joyce St			09 21 7 2014
City Lynn Purpose of Disbursement	State Zip Code MA 01902		Transaction ID : 21b-03-00161-00233
Printing Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate	ment For: Primary Genera		[MEMO ITEM]

ľ

	CHEDULE B (FEC Form 3X)	lloo con	ata aabadula(a)		NE NUMBER: PAGE 38 OF 106				
IT -	EMIZED DISBURSEMENTS	for each ca	ate schedule(s) ategory of the ummary Page	(check only 21b 27	one) 22 28a	23 28b	24 28c	25 29	26
	y information copied from such Reports and Statem for commercial purposes, other than using the nam								
\rangle	NAME OF COMMITTEE (In Full) Forward Massachusetts								
Α.	Full Name (Last, First, Middle Initial) Citgo					Disburser			
	Mailing Address 219 Paradise Rd				09	21		2014	Y
	Swampscott	State MA	Zip Code 01907		Transa	ction ID	: 21b-03-0	0161-00	238
	Purpose of Disbursement Auto Fuel Candidate Name				Amount	of Each I	Disbursem	ent this	Period
	Office Sought: House Disbursem	nent For:		Category/ Type	[MEMO	ITEMI		5	1.78
	President	Primary Other (specif	General fy) ▼		ţ				
В.	State: District: Full Name (Last, First, Middle Initial) Uber				Date of	Disburser			
	Mailing Address 1455 Market St		09	21		2014	Y		
	•	State CA	Zip Code 94103		Transa	ection ID	: 21b-03-0	0161-00	232
	Taxi Fare Candidate Name			Category/	Amount	of Each I	Disbursem		_
		nent For: Primary Other (specif	General fy) ▼	Type	[MEMO	ITEM]	7	1	7.92
).	Full Name (Last, First, Middle Initial) Uber				Date of	Disburser		Y	V
	Mailing Address 1455 Market St				09	21		2014	
	City State Zip Code San Francisco CA 94103				Transa	ction ID	: 21b-03-0	0161-00	230
	Purpose of Disbursement Taxi Fare Candidate Name			Category/ Type	Amount	of Each I	Disbursem		Period 9.28
		nent For: Primary Other (specif	General ▼	71	[MEMO	ITEM]			

ľ

S	CHEDULE B (FEC Form 3X)	llee serie	rote cobadilla(s)	IE NUMBER: PAGE 39 OF 106					
ITI	EMIZED DISBURSEMENTS	for each o	rate schedule(s) category of the	(check only	one)	23	24	25	<u> </u>
		Detailed S	Summary Page	27	28a	28b	28c	29	30
	y information copied from such Reports and Statem for commercial purposes, other than using the nam								
$\overline{\ }$	NAME OF COMMITTEE (In Full)								
\rangle	Forward Massachusetts								
_	Full Name (Last, First, Middle Initial)				5	5			
Α.	Uber				Date of	Disburse		N Y N Y	V
	Mailing Address 1455 Market St				09		1	2014	
	•	State	Zip Code		Trans	action ID	: 21b-03-0	00161-00	1220
		CA	94103		ITAIIS	action ib	. 210-03-0	JU 10 1-UC	1229
	Purpose of Disbursement Taxi Fare				Amount	of Each	Disbursen	nent this	Period
	Candidate Name			Category/ Type				3	31.00
	Office Sought: House Disbursem	nent For:		1900	[MEMO	ITFM1	7		
	Senate	Primary	General		[,			
	President State: District:	Other (spec	ify) ▼						
В.	Full Name (Last, First, Middle Initial) Uber				Disburse				
	Mailing Address 1455 Market St				09	2	D / Y	2014	Y
	•	State CA	Zip Code 94103		Trans	action ID	: 21b-03-	00161-00)228
	Purpose of Disbursement Taxi Fare				Amount	of Each	Disbursen	nent this	Period
	Candidate Name			Category/					14.57
	Office Sought: House Disbursem	nent For:		Type	MEMO	·TCM1			
	Senate	Primary Other (spec	General		[MEMC	IIEWIJ			
	State: District:	Cirior (opoc	,						
C.	Full Name (Last, First, Middle Initial)				Date of	Disburse	ement		
•	Zipcar					/ D		Y Y	Y
	Mailing Address 35 Thomson PI		09	2	1	2014			
	•	State MA	Zip Code 02210		Trans	action ID	: 21b-03-	00161-00)226
	Purpose of Disbursement Car Rental								
	Candidate Name			Category/ Type	Amount	of Each	Disbursen	nent this	Period 7.25
	Office Sought: House Disbursem	nent For:		туре	[MEMO	ITEM1	7		
	Senate	Primary	General		[INIEINIO	I I E IVI J			
	President	Other (spec	ify) 🔻						
	State: District:								

S	CHEDULE B (FEC Form 3X)	Here was a second of the second	FOR LINE	NUMBER:	PAGE 40 OF 106
ITI	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(origon oring		
		Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b
	ny information copied from such Reports and Stater for commercial purposes, other than using the nam				
	NAME OF COMMITTEE (In Full)				
\rangle	Forward Massachusetts				
_	Full Name (Last, First, Middle Initial)			Data of Diabura	oment
A.	Zipcar			Date of Disburse	
	Mailing Address 35 Thomson PI			1	2014
	,	State Zip Code		Transaction ID) : 21b-03-00161-00225
	Boston Purpose of Disbursement	MA 02210		-	
	Car Rental			Amount of Each	Disbursement this Period
	Candidate Name		Category/		69.06
	Office Sought: House Disburser	mont For	Туре		03.00
	Senate Dispurser	Primary General		[MEMO ITEM]	
	President	Other (specify) ▼			
_	State: District:				
D	Full Name (Last, First, Middle Initial)			Data of Diabura	amant.
В.	Richdale Food Shop		Date of Disburs		
	Mailing Address 229 Broadway	1	2014		
	City	State Zip Code MA 01904		Transaction II	D : 21b-03-00161-00217
	Lynn Purpose of Disbursement		-		
	Meeting Meal Expenses		Amount of Each	Disbursement this Period	
	Candidate Name		Category/ Type		5.30
	Office Sought: House Disburser	ment For:	.,,,,,	[MEMO ITEM]	,
	Senate	Primary General		[2	
	President State: District:	Other (specify) ▼			
_	Full Name (Last, First, Middle Initial)				
C.	Verizon			Date of Disburs	
	Mailing Address 745 Boylston St		09 / 2	21 2014	
	City	State Zip Code		Transaction IF	D : 21b-03-00161-00248
	Boston Purpose of Disbursement	MA 02118	I	- Transaction is	7.215-03-00101-002-0
	Telephone			Amount of Each	Disbursement this Period
	Candidate Name	Category/ Type		47.81	
	Office Sought: House Disburser	ment For:	,,,	[MEMO ITEM]	
	Senate	Primary General			
	State: District:	Other (specify) ▼			
Г	otato. District.				
s	UBTOTAL of Disbursements This Page (optional)				0.00
\vdash					
[T	OTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)	Han announts and the Co.	FOR LINE	NUMBER:	PAGE 41 OF 106	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only			
	Detailed Summary Page	X 21b 27	22 23 28a 28		
Any information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
Forward Massachusetts					
Full Name (Last, First, Middle Initial)			Data of Diahu		
A. Zipcar			Date of Disbu		
Mailing Address 35 Thomson PI			09	21 2014	
•	State Zip Code		Transaction	ID : 21b-03-00161-00227	
200.0	MA 02210		Hansaction	ID . 210-03-00101-00221	
Purpose of Disbursement Car Rental			Amount of Eac	ch Disbursement this Period	
Candidate Name		Category/ Type		40.91	
Office Sought: House Disbursen	nent For:		[MEMO ITEM]	,	
	Primary General		-		
President State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
B. Wendy's			Date of Disbu	rsement	
			M = M / D	/ Y Y Y Y Y	
Mailing Address 116 Boston St					
•	State Zip Code		Transaction	ID: 21b-03-00161-00249	
Lynn Purpose of Disbursement	MA 01902				
Meeting Meal Expenses			Amount of Eac	ch Disbursement this Period	
Candidate Name		Category/		10.01	
		Type		13.94	
Office Sought: House Disbursem			[MEMO ITEM]		
	Primary General				
State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
C. AT&T			Date of Disbu	rsement	
Mailing Address 647 Boylston St	Mailing Address 647 Boylston St				
City	State Zip Code				
-	MA 02118		Transaction	ID: 21b-03-00161-00224	
Purpose of Disbursement					
Internt Access			Amount of Eac	ch Disbursement this Period	
Candidate Name		Category/		231.96	
Office Sought: House Disbursen	nent For:	Туре		7	
	Primary General		[MEMO ITEM]		
	Other (specify) ▼				
State: District:	<u> </u>				
				0.00	
SUBTOTAL of Disbursements This Page (optional)		·····		0.00	
TOTAL This Period (last page this line number only).					

	Use separate schedule(FOR LINE	
ITEMIZED DISBURSEMENT	for each category of the Detailed Summary Page	e (orlook only	7 one) 22 23 24 25 26 28a 28b 28c 29 30
			on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Forward Massachusetts	g 2s rearro and address of any por		South South Sales and South So
Full Name (Last, First, Middle Initial)			Date of Dishuse and
A. Apple Store			Date of Disbursement
Mailing Address 100 Cambridge Side P	ace #202		09 21 2014
City Cambridge	State Zip Code MA 02141		Transaction ID : 21b-03-00161-00223
Purpose of Disbursement Office Equipment - Charger			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	30.81
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		[MEMO ITEM]
State: District:			
Full Name (Last, First, Middle Initial) B. Apple Store			Date of Disbursement
Mailing Address 100 Cambridge Side F	lace #202		09 21 2014
City Cambridge	State Zip Code MA 02141		Transaction ID : 21b-03-00161-00222
Purpose of Disbursement Office Equipment - Chargers, Headpho	nes		Amount of Each Disbursement this Period
Candidate Name		Category/ Type	61.62
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify) ▼		[МЕМО ІТЕМ]
Full Name (Last, First, Middle Initial) C. G/J Towing & Recovery			Date of Disbursement
Mailing Address 22 Whitin Ave			09 21 2014
City Revere	State Zip Code MA 02151		Transaction ID : 21b-03-00161-00221
Purpose of Disbursement Towing Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Senate	Disbursement For: Primary General Other (specify) ▼	Type	65.00 [MEMO ITEM]

for each of Detailed S	rate schedule(s) category of the Summary Page	(check only 21b 27	one) 22 28a	23	24		25	
	_			28b	28c		29	3
		sed by any perso						
and dull	130 C. any point		35			J 30		
				5 1.				
				_		v = ··	V	V
			09					Y
ate	Zip Code		Trans	action ID) : 21b-03	-0016	1-002	20
1A 	02210							
			Amount	of Each	Disburse	ment	this P	Period
		Category/					12	.00
ent For		Туре	IMENA			_		
rimary	General cify) ▼		[МЕМО	IIEMJ				
-								
			Date of	/ D	D /			Y
ate	Zip Code		Trans	action II) : 21b-03	-0016	1-002	19
<u> </u>	02210							
			Amount	of Each	Disburse	ment	this P	Period
		Category/					365	.00
ent For: Primary Other (spec	General ify) ▼	1,500	[MEMO	ITEM]				
			09					Y
ate 1A	Zip Code 01907		Trans	action IE) : 21b-03	-0016	1-002	18
Postage Candidate Name			Amount	of Each	Disburse	ement	this P	-
ent For: Primary Other (spec	General ify) ▼	туре				-		-
	ate IA ent For: rimary ther (spec	ent For: rimary General where (specify) ate Zip Code ate Zip Code ate Zip Code ate O2210 The Code ate Specify ate Zip Code ate O2210 The Code ate Specify ate Zip Code ate O1907	ate Zip Code IA 02210 Category/ Type ate Zip Code IA 01907 Category/ Type ate Zip Code IA 01907 Category/ Type ate Zip Code IA 01907	Date of M M M 09 Trans Amount Category/ Type Inter (specify) Date of Date of M M M 09 Date of Category/ Type Inter (specify) Date of M M M 09 Date of Date of M M M 09 Trans Amount Category/ Type Inter (specify) Date of Date of Trans Amount Category/ Type Inter (specify) Date of Date of Amount Category/ Type Inter For: Inter For:	Date of Disburss Max	Date of Disbursement M	Date of Disbursement M	Date of Disbursement March 21

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b	
Any information copied from such Reports and Stat or for commercial purposes, other than using the na	ements may not be sold or use	d by any pers	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Forward Massachusetts	ame and address of any politica	a commutee to	o solicit continuutions from such confinitiee.
Full Name (Last, First, Middle Initial) A. Richdale Food Shop Mailing Address 229 Broadway			Date of Disbursement OP 21 2014
	7: 0		2011
City Lynn	State Zip Code MA 01904		Transaction ID : 21b-03-00161-00216
Purpose of Disbursement Meeting Meal Expenses Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Senate President State: Disburs	ement For: Primary General Other (specify) ▼	Type	16.98 [MEMO ITEM]
Full Name (Last, First, Middle Initial) 3. Dunkin Donuts Mailing Address 116 Lewis St			Date of Disbursement Date of Disbursement Date of Disbursement 2014
City Lynn Purpose of Disbursement Meeting Meal Expenses	State Zip Code MA 01902		Transaction ID: 21b-03-00161-00215 Amount of Each Disbursement this Period
Office Sought: House Senate President State: Disburs	ement For: Primary General Other (specify) ▼	Category/ Type	29.65 [MEMO ITEM]
Full Name (Last, First, Middle Initial) Yellow Cab Company of DC Inc	Full Name (Last, First, Middle Initial)		
Mailing Address 1636 Bladensburg Rd NE			09 21 2014
City Washington Purpose of Disbursement	State Zip Code DC 20002		Transaction ID : 21b-03-00161-00250
Car Rental Candidate Name		Category/ Type	Amount of Each Disbursement this Period 27.00
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼	71	[MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number on			0.00

SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER:	PAGE 45 OF 106
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 27		23 24 25 26 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full)	The state of the points			
Forward Massachusetts				
Full Name (Last, First, Middle Initial)				
A. Captain Pizza		Date of Disb		
Mailing Address 3 Railroad Ave			09	21 2014
City	State Zip Code		Transactio	n ID : 21b-03-00161-00239
Swampscott	MA 01907		Hallsacilo	II ID . 210-03-00 161-00239
Purpose of Disbursement Meeting Meal Expenses			Amount of E	ach Disbursement this Period
Candidate Name		Category/		80.00
Office Sought: House Disburser	ant Fam	Туре		
Office Sought: House Disburser Senate	nent For: Primary General		[MEMO ITEN	M]
President	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)				
B. Spiros			Date of Disb	
Mailing Address 161 Chestnut St			09	21 2014
,	State Zip Code MA 01902		Transactio	n ID : 21b-03-00161-00247
Lynn Purpose of Disbursement	MA 01902			
Auto Fuel			Amount of E	ach Disbursement this Period
Candidate Name		Category/		46.17
Office Sought: House Disburser	nent For:	Туре		
Senate Sought.	Primary General		[MEMO ITEN	/ I]
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Data of Dist	
C. Siroc Restaurant			Date of Disb	
Mailing Address 915 15th St NW			09	21 2014
City S Washington	State Zip Code DC 20005		Transactio	n ID : 21b-03-00161-00246
Purpose of Disbursement	20003			
Meeting Meal Expenses			Amount of E	ach Disbursement this Period
Candidate Name		Category/		39.89
Office Sought: House Disburser	nent For:	Туре		7
Senate	Primary General		[MEMO ITEN	N]
President	Other (specify)			
State: District:				
				0.00
SUBTOTAL of Disbursements This Page (optional)		·····•		0.00
TOTAL This Period (last page this line number only)				

	CHEDULE B (FEC Form 3X)	Use senara	ate schedule(s)		IE NUMBER:			PAGE	46 (OF 10
IT	EMIZED DISBURSEMENTS	for each ca	ategory of the ummary Page	(check only 21b 27	one) 22 28a	23 28b	24		25 29	
	y information copied from such Reports and Staten for commercial purposes, other than using the name									
<u>></u>	NAME OF COMMITTEE (In Full) Forward Massachusetts	is and dualte	so or any pondoc	301111111100 10	Conort Control			3011 0		
_	Full Name (Last, First, Middle Initial)				Data of I	N' - I				
۹.	Nationbuilder				Date of I	/ D		V V	Y	V
	Mailing Address 448 S Hill St Ste 200				09	2			014	
	City S Los Angeles		Zip Code 90013		Transa	tion ID	: 21b-0	3-001	61-002	245
	Purpose of Disbursement Database Software Subscription				Amount of	of Each	Disburs	semen	t this	Period
	Candidate Name			Category/ Type		7			107	7.00
	Office Sought: House Disburser Senate President	nent For: Primary Other (specif	General y) ▼	,,	[MEMO I	ГЕМ]	·			
	State: District:									
3.	Full Name (Last, First, Middle Initial) Nationbuilder Mailing Address 448 S Hill St Ste 200				Date of I	Disburse 2	D /		014	Y
	,		Zip Code 90013		Transa	ction ID	: 21b-0	3-001	61-002	244
	Los Angeles Purpose of Disbursement Database Software Subscription	<u> </u>	90013		Amount o	of Fach	Dishurs	semen	t this	Period
	Candidate Name			Category/ Type	7 amount	Ladir	Diobard	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	7.00
	Office Sought: House Senate President State: Disbursen	nent For: Primary Other (specif	General y) ▼	1,500	[МЕМО І	TEM]				
<u> </u>	Full Name (Last, First, Middle Initial) MBTA				Date of I					
	Mailing Address 89 South St #801				09	2			014	Y
	,		Zip Code 02111		Transa	ction ID	: 21b-0	3-001	61-002	243
	Train Fare Candidate Name			Category/	Amount o	of Each	Disburs	semen		
	Office Sought: House Disburser Senate	nent For: Primary Other (specif	General	Type	[MEMO I	ГЕМ]			70	0.00

SCHEDULE B (FEC Form 3)		FOR LINE NUMBER: PAGE 47 OF 106			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)			
	Detailed Summary Page	X 21b 22 23 24 25 26 27 28a 28b 28c 29 30b			
		y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Forward Massachusetts					
Full Name (Last, First, Middle Initial) A. Kramerbooks		Date of Disbursement			
Mailing Address 1517 Connecticut Ave NW		09 21 2014			
City	Otata 7in Cada				
City Washington	State Zip Code DC 20036	Transaction ID : 21b-03-00161-00242			
Purpose of Disbursement Meeting Meal Expenses		Amount of Each Disbursement this Period			
Candidate Name		ategory/ Type 74.33			
Office Sought: House Senate President	isbursement For: Primary General Other (specify)	[MEMO ITEM]			
State: District:					
Full Name (Last, First, Middle Initial) B. Foodler		Date of Disbursement			
Mailing Address 31 St James Ave	Mailing Address 31 St James Ave				
City	State Zip Code	Transaction ID : 21b-03-00161-00241			
Boston	MA 02116	Transaction ib . 215-03-00101-00241			
Purpose of Disbursement Meeting Meal Expenses		Amount of Each Disbursement this Period			
Candidate Name		ategory/ Type 20.92			
Office Sought: House E	isbursement For: Primary General Other (specify)	[MEMO ITEM]			
Full Name (Last, First, Middle Initial) C. Charles River Park		Date of Disbursement			
Mailing Address 4 Emerson PI		09 21 7 2014			
City Boston	State Zip Code MA 02210	Transaction ID : 21b-03-00161-00240			
Purpose of Disbursement Parking Fee Candidate Name		Amount of Each Disbursement this Period			
Candidate Name		ategory/ Type 48.00			
Office Sought: Senate President State: District:	Senate Primary General President Other (specify) ▼				
SUBTOTAL of Disbursements This Page (or	otional)	0.00			
TOTAL This Period (last page this line numl	,				

SCHEDULE B (FEC Form 3X)	Lleo conorata cohedula/a\	FOR LINE		PAGE 48 OF 106
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28	
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) Forward Massachusetts	is and address of any politica	Committee to	Solicit Contribution	non agai committee.
Full Name (Last, First, Middle Initial)			Date of Dist	
A. Liberty Hotel			Date of Disbu	rsement
Mailing Address 215 Charles St			09	21 2014
City S Boston	State Zip Code MA 02114		Transaction	ID : 21b-03-00161-00213
Purpose of Disbursement Meeting Meal Expenses			Amount of Ea	ch Disbursement this Period
Candidate Name		Category/ Type		48.66
Office Sought: House Disbursen Senate President	nent For: Primary General Other (specify)	туре	[MEMO ITEM]	
State: District:				
Full Name (Last, First, Middle Initial) 8.			Date of Disbu	rsement
Mailing Address			M = M / C	D / Y Y Y Y Y
City	State Zip Code			
Purpose of Disbursement			Amount of Ea	ch Disbursement this Period
Candidate Name	l	Category/ Type	A MINIOR OF LA	on Disbursement this Period
	nent For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial)				
C.			Date of Disbu	rsement
Mailing Address			W - W /	
City	State Zip Code			
Purpose of Disbursement				
Candidate Name		Category/ Type		ch Disbursement this Period
	nent For: Primary General Other (specify)	,,		
SUBTOTAL of Disbursements This Page (optional)				0.00
				4496424
TOTAL This Period (last page this line number only)			1	41864.21

S

Darryl Tattrie

Signature

SCHEDULE E (FEC Form 3X)		
TEMIZED INDEPENDENT EXPENDITURES		PAGE 49 OF 106 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts		
		C C00563981
Check if 24-hour report 48-hour report New repo	rt Amends repo	ort filed on
Full Name of Payee Chelsea Gothie		Date of Public Distribution/Dissemination
		M M / D D / Y Y Y Y
Mailing Address 5 Lincoln St		Amount
City State 2	Zip Code	448.50
	01944	Transaction ID : 24-03-00029-00030 Date of Disbursement or Obligation
Purpose of Expenditure Payroll	Category/ Type	07 16 7 2014
Name of Federal Candidate	X Support	Office Sought:
Seth Moulton	Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	448.50	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Kristin Roderick		M = M / D = D / Y = Y = Y
Mailing Address 68 Salem St		Amount
City State	Zip Code	156.00
Salem MA	01970	Transaction ID: 24-03-00030-00031 Date of Disbursement or Obligation
Purpose of Expenditure Payroll	Category/ Type	07 16 / 2014
Name of Federal Candidate	X Support	Office Sought: X House District: 06
Seth Moulton	Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	604.50	Disbursement For: Primary General 2014
Tel Election of Office cought		Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures		▶ 604.50
		7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures		>
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

10

Date

15

Signature

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES	PAGE 50 OF 106
	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts	C C00563981
Check if 24-hour report 48-hour report New report Amends re	eport filed on Man / Dad / Yayayay
Full Name of Payee Kate Jordan Mailing Address 03 Jackson St	Date of Public Distribution/Dissemination
92 Jackson St	Amount
City State Zip Code	312.00
Salem MA 02140	Transaction ID: 24-03-00031-00032 Date of Disbursement or Obligation
Purpose of Expenditure Payroll Category/ Type	07 D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:06
Seth Moulton Oppose	
Calendar Year-To-Date Per Election for Office Sought 916.50	Disbursement For: X Primary General 2014 Other (specify) ▶
Full Name of Payee Shirley Ortiz	Date of Public Distribution/Dissemination
Mailing Address 64 Rand St	Amount
City State Zip Code Revere MA 02151	370.50 Transaction ID : 24-03-00034-00063 Date of Disbursement or Obligation
Purpose of Expenditure Payroll Category/ Type	08 / 04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Seth Moulton Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	682.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	···· >
Under penalty of perjury I certify that the independent expenditures reported herein wer with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	
Darryl Tattrie [Electronically Filed] Da	ate 10 15 2014

31	age# 14978405625 CHEDULE E (FEC Form 3X)	\		
	EMIZED INDEPENDENT EXPENDIT			PAGE 51 OF 106 FOR LINE 24 OF FORM 3X
NΔ	AME OF COMMITTEE (In Full)			
	Forward Massachusetts			FEC IDENTIFICATION NUMBER ▼
				C C00563981
Ch	neck if 24-hour report 48-hour report	port New rep	ort Amends repo	ort filed on
	Full Name of Payee Kristin Roderick			Date of Public Distribution/Dissemination
	Mailing Address 68 Salem St			Amount
	City	State	Zip Code	442.00
	Salem	MA	01970	Transaction ID: 24-03-00035-00064 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll		Category/ Type	08 / 04 / 2014
	Name of Federal Candidate		Support	Office Sought: House District: 06
	Seth Moulton		Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	7 7 7	1729.00	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	Full Name of Payee Yasneiry Rodriguez	-		Date of Public Distribution/Dissemination
	Mailing Address 83 Congress St			Amount
				Alliount
	City	State	Zip Code	364.00
	City Salem	State MA	Zip Code 01970	
	City		•	364.00 Transaction ID : 24-03-00036-00065
	City Salem Purpose of Expenditure		01970 Category/	Transaction ID : 24-03-00036-00065 Date of Disbursement or Obligation
	City Salem Purpose of Expenditure Payroll		O1970 Category/ Type	364.00 Transaction ID : 24-03-00036-00065 Date of Disbursement or Obligation M M M / D 04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Salem Purpose of Expenditure Payroll Name of Federal Candidate		O1970 Category/ Type Support	Transaction ID : 24-03-00036-00065 Date of Disbursement or Obligation M M M O8
	City Salem Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date	MA	Category/ Type Support Oppose 2093.00	Transaction ID : 24-03-00036-00065 Date of Disbursement or Obligation M M M O8 O4 O4 O2014 Office Sought: House District: 06 MA President Senate State: MA Disbursement For: Primary General Other (specify) ▶
	City Salem Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date Per Election for Office Sought	MA	Category/ Type Support Oppose 2093.00	Transaction ID : 24-03-00036-00065 Date of Disbursement or Obligation M M M O8 O4 O4 O2014 Office Sought: House District: 06 MA President Senate State: MA Disbursement For: Primary General Other (specify) ▶
	City Salem Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date Per Election for Office Sought	MA penditures	Category/ Type Support Oppose 2093.00	Transaction ID: 24-03-00036-00065 Date of Disbursement or Obligation M M M O8
	City Salem Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Ex	ma ependitures	Category/ Type Support Oppose 2093.00	Transaction ID: 24-03-00036-00065 Date of Disbursement or Obligation M M M O8

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Darryl Tattrie	[Electronically Filed]	Date	10	15	2014
Signature					

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE			OF		106	
FOR	LINE	24	OF	FOF	٦М	ЗХ

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts	C C00563981
Check if 24-hour report 48-hour report New report	Amends report filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Chelsea Gothie	M = M / D = D / Y = Y = Y = Y
Mailing Address 5 Lincoln St	Amount
City State Zip Coo	ode 253.50
Manchester By The MA 01944	Transaction ID : 24-03-00038-00067 Date of Disbursement or Obligation
Purpose of Expenditure Payroll Categ	gory/ Type 08 06 2014
Name of Federal Candidate	Support Office Sought: House District: 06
Seth Moulton	Oppose President Senate State: MA
	Disbursement For: Primary General 2014 Characterists
	Other (specify)
Full Name of Payee Kate Jordan	Date of Public Distribution/Dissemination
Mailing Address 92 Jackson St	Amount
City State Zip Co	ode 300.12
Salem MA 02140	Transaction ID : 24-03-00040-00069 Date of Disbursement or Obligation
Purpose of Expenditure Payroll Categ	gory/ Type 08 08 2014
Name of Federal Candidate	Support Office Sought: X House District: 06
Seth Moulton	Oppose President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought 26	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	553.62
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reporter with, or at the request or suggestion of, any candidate or authorized commit party committee) any political party committee or its agent.	
Darryl Tattrie [Electronically Fil	iled] Date 10 15 2014
Signature	

S П

		_		
	CHEDULE E (FEC Form 3X			
ΓΕ	EMIZED INDEPENDENT EXPEND	ITURES		PAGE 53 OF 106
				FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
F	orward Massachusetts			C C00563981
				C C00303981
				M = M / D = D / Y = Y = Y
Ch	neck if 24-hour report 48-hour re	eport New rep	ort Amends repo	rt filed on
_	I = " N			
	Full Name of Payee Method Strategies, LLC			Date of Public Distribution/Dissemination
		re was not made in cooper	ration, consultation or	M M / D D / Y Y Y Y
	Mailing Address 233 5th Ave			
	233 3111 AVE			Amount
	Cit.	Otata	7: O	5409.00
	City	State	Zip Code	
	Venice	CA	90291	Transaction ID: 24-03-00026-00027 Date of Disbursement or Obligation
	Purpose of Expenditure		Category/	M M / D D / Y Y Y Y
	Campaign Palm Card		Type	08 13 2014
	Name of Federal Candidate			
			X Support	Office Sought:
	Seth Moulton		Oppose	President Senate State: MA
	Calendar Year-To-Date			Disbursement For: X Primary General
	Per Election for Office Sought		8055.62	Other (specify)
	Full Name of Payee			
				Doto of Bublic Distribution/Discomination
	Raiza Bautista			Date of Public Distribution/Dissemination
	Raiza Bautista			Date of Public Distribution/Dissemination
				M = M / D = D / Y = Y = Y
	Raiza Bautista			
	Raiza Bautista	State	Zip Code	M = M / D = D / Y = Y = Y
	Raiza Bautista Mailing Address 71 Michigan Ave	State MA	Zip Code 01902	Amount
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn		·	Amount 156.00
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure		01902 Category/	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn		01902	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure		01902 Category/	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure Payroll		O1902 Category/ Type	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation 08 15 08 Date of Disbursement or Obligation Man
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton		01902 Category/ Type Support	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Office Sought:
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure Payroll Name of Federal Candidate		01902 Category/ Type Support	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date		O1902 Category/ Type Support Oppose	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation M M M O8
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date		O1902 Category/ Type Support Oppose	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date	MA	Category/ Type Support Oppose 8211.62	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date Per Election for Office Sought	MA	Category/ Type Support Oppose 8211.62	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date Per Election for Office Sought	MA xxpenditures	O1902 Category/ Type Support Oppose 8211.62	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent E	MA xxpenditures	O1902 Category/ Type Support Oppose 8211.62	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent E	MA Expenditurest Expenditures	Category/ Type Support Oppose 8211.62	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent E (b) SUBTOTAL of Unitemized Independent	MA Expenditurest Expenditures	Category/ Type Support Oppose 8211.62	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Raiza Bautista Mailing Address 71 Michigan Ave City Lynn Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent E (b) SUBTOTAL of Unitemized Independent	MA Expenditurest Expenditures	Category/ Type Support Oppose 8211.62	Amount 156.00 Transaction ID: 24-03-00053-00082 Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Darryl Tattrie	[Electronically Filed]	Date	10 ^M	15	2014
Signature					

П

party committee) any political party committee or its agent.

Darryl Tattrie

Signature

CHEDULE E (FEC Form 3X)			
EMIZED INDEPENDENT EXPENDITU	IRES		PAGE 54 OF 106 FOR LINE 24 OF FORM 3X
IAME OF COMMITTEE (In Full)			
Forward Massachusetts			FEC IDENTIFICATION NUMBER ▼
			C C00563981
heck if 24-hour report 48-hour repor	rt New	report Amends repo	ort filed on
Full Name of Payee Jake Robert			Date of Public Distribution/Dissemination
			M = M / D = D / Y = Y = Y
Mailing Address 60 Gregory St			Amount
City	State	Zip Code	351.00
Marblehead	MA	01945	Transaction ID: 24-03-00054-00083 Date of Disbursement or Obligation
Purpose of Expenditure Payroll		Category/ Type	08 / 15 / 2014
Name of Federal Candidate		Support	Office Sought: House District: 06
Seth Moulton		Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		8562.62	Disbursement For:
Full Name of Payee Michelle Mendez Mailing Address 27 Phillips Ave Apt 2			Date of Public Distribution/Dissemination Amount
City	State	Zip Code	533.00
Lynn	MA	01902	Transaction ID : 24-03-00055-00084 Date of Disbursement or Obligation
Purpose of Expenditure Payroll		Category/ Type	M 08 / 15 / Y Y 2014
Name of Federal Candidate		X Support	Office Sought:
Seth Moulton		Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		9095.62	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expe	nditures		. ▶ 884.00
(b) SUBTOTAL of Unitemized Independent Ex	xpenditures		
(c) TOTAL Independent Expenditures			•
			not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

[Electronically Filed]

10

Date

15

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TI	EMIZED INDEPENDENT EXPENDITURES		PAGE 55 OF 106 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۲	Forward Massachusetts		C C00563981
Cł	heck if 24-hour report 48-hour report New report	t Amends repor	rt filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Angel Gonzalez		M M / D D / Y W Y W Y
	Mailing Address 71 Michigan Ave # 1		Amount
		Zip Code 01902	468.00 Transaction ID : 24-03-00057-00086
	Purpose of Expanditure		Date of Disbursement or Obligation
	Payroll	Category/ Type	08 / 15 / 2014
	Name of Federal Candidate	X Support	Office Sought: House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	9563.62	Disbursement For:
	Full Name of Payee		Date of Public Distribution/Dissemination
	Natasha Davila		M = M / D = D / Y = Y = Y
	Mailing Address 71 Michigan Ave # 1		
	/ I Wildrigan Ave # 1		Amount
	City State Zi	Zip Code	416.00
	,	01902	Transaction ID: 24-03-00058-00087 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	08 / 15 / 2014
	Name of Federal Candidate	X Support	Office Sought: House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date	0070.62	Disbursement For: Primary General
_	Per Election for Office Sought	9979.62	Other (specify)
-	(a) SUBTOTAL of Itemized Independent Expenditures		884.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		·
			7
	(c) TOTAL Independent Expenditures		>
	Under penalty of perjury I certify that the independent expenditures re with, or at the request or suggestion of, any candidate or authorized or party committee) any political party committee or its agent.		
	Darryl Tattrie [Electronica	allv Filed1	10 15 2014
	Signature	Date	10 13 2014

Signature

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES	3			PAGE 56 OF 106 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
Forward Massachusetts			La L	C00563981
Check if 24-hour report 48-hour report	New re	report Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee Jessica Holm-Sanchez			Date of Publi	ic Distribution/Dissemination
Mailing Address 169 Fayette St			_ L.J	, , , , , , , , , , , , , , , , , , , ,
			Amount	
City	State	Zip Code		208.00
Lynn	MA	01902		D: 24-03-00059-00088 ursement or Obligation
Purpose of Expenditure Payroll		Category/ Type	M 08	15 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 06
Seth Moulton		Oppose	President	Senate State: MA
Color day Year To Data			Disbursement For:	Primary General
Calendar Year-To-Date Per Election for Office Sought		10187.62	2014 Other (sp	
Full Name of Payee Jasmin West Mailing Address PO Box 1523			M = M	ic Distribution/Dissemination
1 0 500 1020			Amount	
City	State	Zip Code		117.00
Amherst	NH	03031		D : 24-03-00060-00089 oursement or Obligation
Purpose of Expenditure Payroll		Category/ Type	08	15 2014
Name of Federal Candidate		Support	Office Sought:	X House District:06
Seth Moulton		Oppose	President	Senate State: MA
Calendar Year-To-Date			Disbursement For:	Primary General
Per Election for Office Sought		10304.62	2014 Other (s	
(a) SUBTOTAL of Itemized Independent Expenditu	res		·	325.00
(b) SUBTOTAL of Unitemized Independent Expend	itures		>	
(c) TOTAL Independent Expenditures)	7
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	date or authoriz			
Darryl Tattrie	[Electr	ronically Filed] Date	10 / 15	/ Y Y Y Y Y Y 2014

Signature

S

	CHEDULE E (FEC FORM 3X) EMIZED INDEPENDENT EXPENDITURES		DAGE 57 OF 400
	MIZED INDEPENDENT EXPENDITORES		PAGE 57 OF 106 FOR LINE 24 OF FORM 3X
V	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	Forward Massachusetts		C C00563981
Cł	neck if 24-hour report 48-hour report New report	ort Amends repo	rt filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Edwin Soto		M = M / D = D / Y = Y = Y
	Mailing Address 25 South St Apt 309		Amount
	City State	Zip Code	325.00
	Lynn MA	01902	Transaction ID : 24-03-00064-00106 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	08 / 05 / 2014
	Name of Federal Candidate	Support	Office Sought: X House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	10629.62	Disbursement For:
	Full Name of Payee		Date of Public Distribution/Dissemination
	Emily Perez		M = M / D = D / Y = Y = Y
	Mailing Address 9 Henry Ave #2		Amount
	City State	Zip Code	260.00
	Lynn MA	01902	Transaction ID: 24-03-00065-00107 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	08 / 15 / 2014
	Name of Federal Candidate	X Support	Office Sought: X House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	10889.62	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		585.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		·
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Darryl Tattrie		M M / D D / Y Y Y Y

[Electronically Filed]

Date

2014

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts	C C00563981
	O
Check if 24-hour report 48-hour report New report	t Amends report filed on
Full Name of Payee Genesis Guerrero	Date of Public Distribution/Dissemination
Mailing Address	M M / D D / Y Y Y Y
47 Collins St Apt 3	Amount
City State Zi	Zip Code 260.00
Lynn MA 0	01902 Transaction ID: 24-03-00066-00108 Date of Disbursement or Obligation
Purpose of Expenditure Payroll	Category/ Type 08 15 2014
Name of Federal Candidate	Support Office Sought: House District: 06
Seth Moulton	Oppose President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Maciel Gonzalez	M = M / D = D / Y = Y = Y
Mailing Address 47 Collins St #3	Amount
City State Zi	Zip Code 208.00
Lynn MA 0	01902 Transaction ID : 24-03-00067-00109 Date of Disbursement or Obligation
Purpose of Expenditure Payroll	Category/ Type 08 15 2014
Name of Federal Candidate	Support Office Sought: House District: 06
Seth Moulton	Oppose President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	468.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures)
Under penalty of perjury I certify that the independent expenditures re with, or at the request or suggestion of, any candidate or authorized corparty committee) any political party committee or its agent.	·
Darryl Tattrie [Electronica	ally Filed] Date 10 15 2014
Signature	Date 10 15 2014

Signature

S

SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 59 OF 106 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts	C C00563981
Check if 24-hour report 48-hour report New report Amends report	t filed on Man / Dad / Yayayay
Full Name of Payee Ashley Menard	Date of Public Distribution/Dissemination
Mailing Address 54 Webster St	M M / D D / Y W W W
54 Webster St	Amount
City State Zip Code Lynn MA 01902	Transaction ID : 24-03-00068-00110 Date of Disbursement or Obligation
Purpose of Expenditure Payroll Category/ Type	08 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: X House District: 06
Seth Moulton Oppose	President Senate State: MA
	Disbursement For:
Full Name of Payee Chelsea Gothie	Date of Public Distribution/Dissemination
Mailing Address 5 Lincoln St	Amount
City State Zip Code	442.00
Manchester By The MA 01944	Transaction ID: 24-03-00069-00111 Date of Disbursement or Obligation
Purpose of Expenditure Payroll Category/ Type	M 08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought:
Seth Moulton Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	702.00
(b) SUBTOTAL of Unitemized Independent Expenditures	•
(c) TOTAL Independent Expenditures	•
Under penalty of perjury I certify that the independent expenditures reported herein were n with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Darryl Tattrie	M M / D D / Y Y Y

[Electronically Filed]

10

Date

15

S

Darryl Tattrie

Signature

	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 60 OF 106 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	orward Massachusetts		C C00563981
Ch	eck if 24-hour report 48-hour report New rep	oort Amends repo	ort filed on
	Full Name of Payee Michael Bonbon		Date of Public Distribution/Dissemination
	Mailing Address 16 Shillaber St		Amount
	City State	Zip Code	130.00
	Peabody MA	01960	Transaction ID: 24-03-00042-00071 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	08 / 15 / 2014
	Name of Federal Candidate Seth Moulton	Support Oppose	Office Sought: House District: 06 President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	12189.62	Disbursement For:
	Full Name of Payee Brian Jean-Francois Mailing Address 71 Michigan Ave #2		Date of Public Distribution/Dissemination Amount
	City State	Zip Code	507.00
	Lynn MA	01902	Transaction ID: 24-03-00044-00073 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	08 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	X Support	Office Sought: House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	12696.62	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		• 637.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(b) SOBTOTAL OF OTHER HIZER INDEPENDENT Experiorities		
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

10

Date

15

S П

Darryl Tattrie

Signature

36	CHEDULE E (FEC Form 3X)			
	EMIZED INDEPENDENT EXPENDITURES			PAGE 61 OF 106 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)		FEC ID	ENTIFICATION NUMBER ▼
F	Forward Massachusetts			C00563981
Ch	neck if 24-hour report 48-hour report New re	eport Amends repo	t filed on	D = D / Y = Y = Y = Y
	Full Name of Payee Kendrick Jean-Francois		Date of Public	Distribution/Dissemination
	14.35			
	Mailing Address 71 Michigan Ave #2		Amount	
	City State	Zip Code		416.00
	Lynn MA	01902		: 24-03-00045-00074 rsement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	08 /	15 / 2014
	Name of Federal Candidate	Support	Office Sought:	House District: 06
	Seth Moulton	Oppose	President	Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	13112.62	Disbursement For:	Primary General
			Other (sp	
	Full Name of Payee Charlene Fernandez		Date of Public	Distribution/Dissemination
	Mailing Address 2 Adams St		Amount	
	City State	Zip Code		481.00
	Lynn MA	01902		9: 24-03-00052-00081 ursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	M 08	18 / 2014
	Name of Federal Candidate		Office Sought:	✓ House District:06
	Seth Moulton	Oppose	President	Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	13593.62	Disbursement For: 2014 Other (sp	Primary General Decify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures		>	897.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		>	72
	(c) TOTAL Independent Expenditures		>	
	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.			

[Electronically Filed]

10

Date

15

S

Darryl Tattrie

Signature

	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 62 OF 106 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	orward Massachusetts		C C00563981
Ch	neck if 24-hour report 48-hour report New report	rt Amends repo	rt filed on
	Full Name of Payee Yasneiry Rodriguez		Date of Public Distribution/Dissemination
	Mailing Address 83 Congress St		Amount
		Zip Code 01970	78.00 Transaction ID : 24-03-00063-00105 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate Seth Moulton	Support Oppose	Office Sought: House District: 06 President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	13671.62	Disbursement For: X Primary General 2014 Other (specify) ▶
	Full Name of Payee Augustina Matos Mailing Address 27 Phillips Ave Apt 2		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Amount
	City State 2	Zip Code	481.00
	Lynn MA	01902	Transaction ID : 24-03-00046-00075 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	08 / 18 / 2014
	Name of Federal Candidate	X Support	Office Sought: X House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	14152.62	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures		. ▶ 559.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures r with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

10

Date

15

Signature

S

SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 63 OF 106 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts	C C00563981
Check if 24-hour report 48-hour report New report Amends report filed	i on Man / Dab / Yayayay
Full Name of Payee Erick Ubri	Date of Public Distribution/Dissemination
ETICK OBIT	M M / D D / Y Y Y Y
Mailing Address 47 Burril Ave #1	Amount
City State Zip Code	208.00
Lynn MA 01902	Transaction ID: 24-03-00047-00076 Date of Disbursement or Obligation
Purpose of Expenditure Payroll Category/ Type	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: X House District: 06
Seth Moulton Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For:
Full Name of Payee Travis Thurman	Date of Public Distribution/Dissemination
Mailing Address 60 Aspen Rd	Amount
City State Zip Code	325.00
Swampscott MA 01907	Transaction ID: 24-03-00048-00077 Date of Disbursement or Obligation
Purpose of Expenditure Payroll Category/ Type	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 06
Seth Moulton Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	533.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Darryl Tattrie	M / D D / Y Y Y

[Electronically Filed]

10

Date

15

S

Darryl Tattrie

Signature

	CHEDULE E (FEC Form 3X)			
ΓE	EMIZED INDEPENDENT EXPENDITURES		PAGE 64	OF 106 24 OF FORM 3X
V/	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION	
	orward Massachusetts			JN NUMBER V
			C C00563981	
Ch	eck if 24-hour report 48-hour report New rep	port Amends repo	rt filed on	Y = Y = Y
	Full Name of Payee Laiza Espinal		Date of Public Distribution/	/Dissemination
	Mailing Address		W - W / D - D /	
	14 Trinity Ave		Amount	
	City State	Zip Code		260.00
	Lynn MA	01902	Transaction ID : 24-03-0004 Date of Disbursement or C	
	Purpose of Expenditure Payroll	Category/ Type	08 / 18	2014
	Name of Federal Candidate	X Support	Office Sought: X House	District:06
	Seth Moulton	Oppose	President Senate	State: MA
	Calendar Year-To-Date Per Election for Office Sought	14945.62	Disbursement For: ☐ Primary 2014 ☐ Other (specify) ▶	General
	Full Name of Payee		Date of Public Distribution	/Dissemination
	Emely Benzan		M = M / D = D /	Y Y Y Y Y
	Mailing Address 10 Timson St # 2		Amount	
	City State	Zip Code		429.00
	Lynn MA	01902	Transaction ID: 24-03-0009 Date of Disbursement or 0	
	Purpose of Expenditure Payroll	Category/ Type	08 / 18 /	2014
	Name of Federal Candidate	X Support	Office Sought: X House	District:06
	Seth Moulton	Oppose	President Senate	State: MA
	Calendar Year-To-Date Per Election for Office Sought	15374.62	Disbursement For:	General
	(a) SUBTOTAL of Itemized Independent Expenditures		. •	689.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•	
	(c) TOTAL Independent Expenditures		•	
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.			

[Electronically Filed]

10

Date

15

NAME OF COMMITTEE (In Full)

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 65 OF 106 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00563981
of Public Distribution/Dissemination
/ M / D D / Y Y Y Y
int
429.00 action ID : 24-03-00051-00080
of Disbursement or Obligation
08 / 18 / 2014
nt: X House District: 06
ent Senate State: MA
nt For: X Primary General
Other (specify)
of Public Distribution/Dissemination
W = M / D = D / Y = Y = Y
int
ınt
330.38
of Disbursement or Obligation
08 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
nt: X House District: 06
ent Senate State: MA
nt For: X Primary General
Other (specify)
759.38
72 72 72
7 7

Forward Massachusetts Check if 24-hour report 48-hour report Amends report filed on New report Full Name of Payee Date Angelyz Benzan Mailing Address 10 Timson St # 2 Amou City State Zip Code MA Lynn 01902 Transa Date Purpose of Expenditure Category/ Payroll Type Name of Federal Candidate X Support Office Sough Seth Moulton Oppose Preside Disbursemen Calendar Year-To-Date 15803.62 2014 Per Election for Office Sought 0 Full Name of Payee Date Kate Jordan Mailing Address 92 Jackson St Amou City State Zip Code Salem MA 02140 Transa Date Purpose of Expenditure Category/ Payroll Type Name of Federal Candidate X Support Office Sough Seth Moulton Oppose Presid Disbursemen Calendar Year-To-Date 16134.00 2014 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Darryl Tattrie [Electronically Filed] 10 15 2014 Date Signature

3	age# 14978405640 CHEDULE E (FEC Form (SX)		
	EMIZED INDEPENDENT EXPEN			PAGE 66 OF 106 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
F	Forward Massachusetts			C C00563981
Ch	neck if 24-hour report 48-hou	r report New rep	ort Amends repo	rt filed on
	Full Name of Payee Progressive Contacts			Date of Public Distribution/Dissemination
	Mailing Address 4 Barton Ave			Amount
	City	State	Zip Code	6222.45
	Fort Edward	NY	12828	Transaction ID : 24-03-00070-00112 Date of Disbursement or Obligation
	Purpose of Expenditure Live Paid Phones		Category/ Type	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office Sought: X House District: 06
	Seth Moulton		Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought		22356.45	Disbursement For:
	Full Name of Payee Jake Robert			Date of Public Distribution/Dissemination
	Mailing Address 60 Gregory St			Amount
	City	State	Zip Code	494.00
	Marblehead	State MA	Zip Code 01945	494.00 Transaction ID: 24-03-00071-00113 Date of Disbursement or Obligation
			·	Transaction ID : 24-03-00071-00113
	Marblehead Purpose of Expenditure		01945 Category/	Transaction ID: 24-03-00071-00113 Date of Disbursement or Obligation
	Marblehead Purpose of Expenditure Payroll		Category/ Type	Transaction ID: 24-03-00071-00113 Date of Disbursement or Obligation 08 29 2014
	Marblehead Purpose of Expenditure Payroll Name of Federal Candidate		Category/ Type Support	Transaction ID: 24-03-00071-00113 Date of Disbursement or Obligation M M M / 29 / 2014 Office Sought: House District: 06
	Marblehead Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date Per Election for Office Sought	MA	Category/ Type Support Oppose 22850.45	Transaction ID: 24-03-00071-00113 Date of Disbursement or Obligation M 08
	Marblehead Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date	MA	Category/ Type Support Oppose 22850.45	Transaction ID: 24-03-00071-00113 Date of Disbursement or Obligation M 08
	Marblehead Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date Per Election for Office Sought	t Expenditures	Category/ Type Support Oppose 22850.45	Transaction ID: 24-03-00071-00113 Date of Disbursement or Obligation M 08
	Marblehead Purpose of Expenditure Payroll Name of Federal Candidate Seth Moulton Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent	t Expenditures	Category/ Type Support Oppose 22850.45	Transaction ID: 24-03-00071-00113 Date of Disbursement or Obligation M 08

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Darryl Tattrie	[Electronically Filed]	Date	10 ^M	1	15	/	2014
Signature							

S IT

(CHEDULE E (FEC Form 3X)						
ΓΕ	EMIZED INDEPENDENT EXPENDITURES				PAGE 67 FOR LINE		106 RM 3X
	AME OF COMMITTEE (In Full)			FEC	IDENTIFICATI	ON NUMB	ER ▼
F	forward Massachusetts			С	C00563981		
Ch	neck if 24-hour report 48-hour report New	report Amends repo	rt filed on	M = M	/ D = D /	Y 1 Y 1 Y	Y
	Full Name of Payee Charlene Fernandez		D	ate of Pu	blic Distribution	/Dissemina	
	Mailing Address 2 Adams St		A	mount		L	
	City State	Zip Code	— г			325.	00
	Lynn MA	01902			ID: 24-03-000 sbursement or	72-00114	.00
	Purpose of Expenditure Payroll	Category/ Type		08	/ D D /	2014	
	Name of Federal Candidate	X Support	Office S	ought:	X House	District:	06
	Seth Moulton	Oppose	Pr	esident	Senate	Siale. —	MA
	Calendar Year-To-Date Per Election for Office Sought	23175.45	Disburse 2014	ment For Other	: X Primary (specify) ►	/ Ge	eneral
	Full Name of Payee Angel Gonzalez		С	ate of Pu	iblic Distribution	ı/Dissemina	ation
	Mailing Address 71 Michigan Ave # 1		A	mount			
	City State	Zip Code				455.	00
	Lynn MA	01902			ID: 24-03-000 sbursement or		
	Purpose of Expenditure Payroll	Category/ Type		08	29	201	
	Name of Federal Candidate	Support	Office S	ought:	X House	District:	06
	Seth Moulton	Oppose		esident	Senate	State:	MA
	Calendar Year-To-Date Per Election for Office Sought	23630.45	Disburse 2014	ement For	: X Primar (specify) ►	y	eneral
	(a) SUBTOTAL of Itemized Independent Expenditures		. [7	780.00) "
	(b) SUBTOTAL of Unitemized Independent Expenditures		• [7 1 4		
	(c) TOTAL Independent Expenditures		•		7		
	Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or authori party committee) any political party committee or its agent.						

Darryl Tattrie	[Electronically Filed]	Date	10	15	/	2014
Signature						

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	EMIZED INDEPENDENT EXPENDITURES			FOR LINE 24 OF FORM 3X		
	NAME OF COMMITTEE (In Full) Forward Massachusetts					
_	C C00563981					
Che	eck if 24-hour report 48-hour report New report	oort Amends repo	ort filed or	n M M / D D / Y Y Y Y Y		
$ begin{array}{c} brace$	Full Name of Payee Benita Meli		D	Date of Public Distribution/Dissemination		
	Mailing Address 18 Bond St		Δ	Amount		
	City State	Zip Code	-	481.00		
	Lynn MA	01902		ansaction ID: 24-03-00074-00116 Date of Disbursement or Obligation		
	Purpose of Expenditure Payroll	Category/ Type		08 / 29 / 2014		
	Name of Federal Candidate	X Support	Office S	Sought: X House District: 06		
	Seth Moulton	Oppose	+ $-$	resident Senate State: MA		
	Calendar Year-To-Date Per Election for Office Sought	24111.45	Disburse 2014	ement For:		
	Full Name of Payee Michelle Mendez		С	Date of Public Distribution/Dissemination		
	Mailing Address			M = M / D = D / I =		
	Mailing Address 27 Phillips Ave Apt 2		F	Amount		
	City State	Zip Code		468.00		
	Lynn MA	01902		ransaction ID: 24-03-00075-00117 Date of Disbursement or Obligation		
	Purpose of Expenditure Payroll	Category/ Type	$\Box _{_}$	08 / 29 / 2014		
	Name of Federal Candidate	X Support	Office S	Sought: X House District: 06		
	Seth Moulton	Oppose	P	President Senate State: MA		
	Calendar Year-To-Date Per Election for Office Sought	24579.45	Disburse 2014	ement For:		
_				Other (open.)		
((a) SUBTOTAL of Itemized Independent Expenditures		·· • [949.00		
((b) SUBTOTAL of Unitemized Independent Expenditures					
((c) TOTAL Independent Expenditures					
١	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.	•		•		
	Darryl Tattrie [Electroni	nically Filed] Date	M M M	/ 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Signature	_ Date	,	التنتا لتا ا		

Signature

S

SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 69 OF 106 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts	C C00563981
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Date Augustina Matos	of Public Distribution/Dissemination
Mailing Address 27 Phillips Ave Apt 2	unt
Allo	uni
=)	416.00 action ID : 24-03-00076-00118 of Disbursement or Obligation
Purpose of Evpenditure	08 29 / 2014
Name of Federal Candidate Support Office Sough	ht: X House District:06
Seth Moulton Oppose Presid	dent Senate State: MA
Calendar Year-To-Date Per Election for Office Sought Disbursement 24995.45 Disbursement 2014	nt For:
Full Name of Payee Date Edwin Soto	of Public Distribution/Dissemination
Mailing Address 25 South St Apt 309 Amo	unt
City State Zip Code	351.00
	action ID: 24-03-00077-00119 of Disbursement or Obligation
Purpose of Expenditure	M M / D D / Y Y Y Y Y 08 29 2014
Name of Federal Candidate Support Office Soug	ht: X House District: 06
Seth Moulton Oppose Presid	dent Senate State: MA
Calendar Year-To-Date Per Election for Office Sought Disburseme 25346.45	ont For:
(a) SUBTOTAL of Itemized Independent Expenditures	767.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Darryl Tattrie	D D / Y Y Y

[Electronically Filed]

10

Date

15

Image# 14978405644				
	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES			PAGE 70 OF 106
NI	AME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
	Forward Massachusetts			C C00563981
Cł	neck if 24-hour report 48-hour report New rep	ort Amends repo		M = M / D = D / Y = Y = Y
	Full Name of Payee Kendrick Jean-Francois		Date	of Public Distribution/Dissemination
	Mailing Address 71 Michigan Ave #2		Amo	unt
	City State	Zip Code	<u> —</u> Г.	507.00
	Lynn MA	01902		action ID: 24-03-00078-00120 of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type		08 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	X Support	Office Soug	yht: X House District: 06
	Seth Moulton	Oppose	Presid	
	Calendar Year-To-Date Per Election for Office Sought	25853.45	Disburseme 2014	ent For: Primary General Other (specify)
	Full Name of Payee Erick Ubri		Date	e of Public Distribution/Dissemination
	Mailing Address 47 Burril Ave #1		Amo	punt
	City State	Zip Code		390.00
	Lynn MA	01902		saction ID: 24-03-00079-00121 e of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type		08 / 29 / 2014
	Name of Federal Candidate	X Support	Office Soug	ght: X House District: 06
	Seth Moulton	Oppose	Presi	
	Calendar Year-To-Date Per Election for Office Sought	26243.45	Disburseme 2014	ent For:
	(a) SUBTOTAL of Itemized Independent Expenditures		•	897.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

(c) TOTAL Independent Expenditures.....

Darryl Tattrie	[Electronically Filed]	Date	10 M	/ 15	2014
Signature					
Olgridiaic					

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	71	OF	
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X				
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
Forward Massachusetts C coo563981					
Check if 24-hour report 48-hour report New report Ar	mends report filed on				
Full Name of Payee	Date of Public Distribution/Dissemination				
Angelyz Benzan Mailing Address 40 Times St.# 9	M = M / D = D / Y = Y = Y				
10 Timson St # 2	Amount				
City State Zip Code	416.00				
Lynn MA 01902	Transaction ID : 24-03-00080-00122 Date of Disbursement or Obligation				
Purpose of Expenditure Payroll Category, Type					
Name of Federal Candidate	Support Office Sought: X House District: 06				
Seth Moulton	Oppose President Senate State: MA				
Calendar Year-To-Date Per Election for Office Sought 26659.4					
	Other (specify)				
Full Name of Payee Emely Benzan	Date of Public Distribution/Dissemination				
Mailing Address 10 Timson St # 2	Amount				
City State Zip Code	455.00				
Lynn MA 01902	Transaction ID: 24-03-00081-00123 Date of Disbursement or Obligation				
Purpose of Expenditure Payroll Category, Type					
Name of Federal Candidate	Support Office Sought: X House District: 06				
Seth Moulton	Oppose President Senate State: MA				
Calendar Year-To-Date Per Election for Office Sought 27114.	Disbursement For:				
(a) SUBTOTAL of Itemized Independent Expenditures	871.00				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	•				
Under penalty of perjury I certify that the independent expenditures reported h with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.					
Darryl Tattrie [Electronically Filed]	Date 10 15 2014				
Signature					

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	PAGE		OF		
	FOR L	NE 24	OF	FORM	ЗХ
DENTIFICATION NUMBER -					

	FOR LINE 24 OF FORM 3X				
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
Forward Massachusetts C C00563981					
Check if 24-hour report 48-hour report New report Amends	report filed on				
Full Name of Payee	Date of Public Distribution/Dissemination				
Maciel Gonzalez	M M / D D / Y Y Y Y				
Mailing Address 47 Collins St #3	Amount				
City State Zip Code	442.00				
Lynn MA 01902	Transaction ID : 24-03-00082-00124 Date of Disbursement or Obligation				
Purpose of Expenditure Payroll Category/ Type	08 / 29 / 2014				
Name of Federal Candidate Suppo	ort Office Sought: X House District: 06				
Seth Moulton Oppos					
Calendar Year-To-Date Per Election for Office Sought 27556.45	Disbursement For: Primary General 2014				
	Other (specify)				
Full Name of Payee Genesis Guerrero	Date of Public Distribution/Dissemination				
Mailing Address 47 Collins St Apt 3	Amount				
City State Zip Code	390.00				
Lynn MA 01902	Transaction ID : 24-03-00083-00125 Date of Disbursement or Obligation				
Purpose of Expenditure Payroll Category/ Type	08 / 29 / 2014				
Name of Federal Candidate Suppo	ort Office Sought: X House District: 06				
Seth Moulton Oppo	Trocident Genate State:				
Calendar Year-To-Date Per Election for Office Sought 27946.45	Disbursement For:				
(a) SUBTOTAL of Itemized Independent Expenditures	832.00				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
	7 7 7				
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or ag party committee) any political party committee or its agent.					
Darryl Tattrie [Electronically Filed]	Date 10 15 2014				
Signature					

	PAGE FOR LI	73 INE 24	OF OF F	106 ORM 3X	
DENTIFICATION NUMBER ▼					
	ENTIFI	CATIO	N NUM	BER ▼	

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts		C C00563981
Check if 24-hour report 48-hour report New re	eport Amends report file	ed on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Jessica Holm-Sanchez Mailing Address 400 Faculta Ct		M = M / D = D / Y = Y = Y
169 Fayette St		Amount
City State	Zip Code	260.00
Lynn MA	01902	Transaction ID : 24-03-00084-00126 Date of Disbursement or Obligation
Purpose of Expenditure Payroll	Category/ Type	08 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Offi	ice Sought: X House District:06
Seth Moulton	Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	Dis 28206.45 201	sbursement For:
Full Marca of Payer		
Full Name of Payee Ashley Menard		Date of Public Distribution/Dissemination
Mailing Address 54 Webster St		Amount
City State	Zip Code	247.00
Lynn MA	01902	Transaction ID : 24-03-00085-00127 Date of Disbursement or Obligation
Purpose of Expenditure Payroll	Category/ Type	08 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	X Support Off	fice Sought: X House District: 06
Seth Moulton	Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	28453.45 Dis 20°	sbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	·····	507.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Darryl Tattrie [Electro	onically Filed] Date	10 15 2014
Signature	Daio	

	PAGE		OF	106	
	FOR	LINE 2	24 OF F	FORM 3X	
IDENTIFICATION NUMBER ▼					
IC	ENTIF	ICATI	ON NU	MBER ▼	
	C0056	-	ON NU	MBER ▼	

				TOTT LINE 24 OF TOTHVI 5X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts				C C00563981
Check if 24-hour report 48-hour re	eport New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee			Date	e of Public Distribution/Dissemination
Laiza Espinal				M M / D D / Y Y Y Y
Mailing Address 14 Trinity Ave			Am	ount
City	State	Zip Code	— F	299.00
Lynn	MA	01902		saction ID : 24-03-00086-00128 e of Disbursement or Obligation
Purpose of Expenditure Payroll		Category/ Type		08 / 29 / 2014
Name of Federal Candidate		Support	Office Sou	ght: X House District: 06
Seth Moulton		Oppose		sident Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		28752.45	Disbursem 2014	
				Other (specify)
Full Name of Payee Natasha Davila			Dat	te of Public Distribution/Dissemination
Mailing Address 71 Michigan Ave # 1			Am	ount
			7 411	ou.i.
City	State	Zip Code		299.00
Lynn	MA	01902		saction ID: 24-03-00087-00129 te of Disbursement or Obligation
Purpose of Expenditure Payroll		Category/ Type		08 / 29 / 2014
Name of Federal Candidate		X Support	Office Sou	ight: X House District:06
Seth Moulton		Oppose	Pres	sident Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		29051.45	Disbursem 2014	
				Other (specify) -
(a) SUBTOTAL of Itemized Independent E	xpenditures			598.00
(b) SUBTOTAL of Unitemized Independent	Expenditures			
				75 75
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the with, or at the request or suggestion of, an party committee) any political party commit	y candidate or authorized			
Darryl Tattrie	[Electron	ically Filed]	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	•	Date		2011

SCH ITEN

EMIZED INDEPENDENT EXPENDITURES			PAGE 75 OF 106 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts			C C00563981
			O oodcooo
neck if 24-hour report 48-hour report	New	report Amends repo	ort filed on
Full Name of Payee Emily Perez			Date of Public Distribution/Dissemination
Mailing Address 9 Henry Ave #2			Amount
City	State	Zip Code	455.00
Lynn	MA	01902	Transaction ID : 24-03-00088-00130 Date of Disbursement or Obligation
Purpose of Expenditure Payroll		Category/ Type	08 / 29 / 2014
Name of Federal Candidate		X Support	Office Sought:
Seth Moulton		Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		29506.45	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee	_		Date of Public Distribution/Dissemination
Daniel Hennessey			M = M / D = D / Y = Y = Y
Mailing Address 9 Lauren Ln			Amount
City	State	Zip Code	260.00
Burlington	MA	01803	Transaction ID: 24-03-00089-00131 Date of Disbursement or Obligation
Purpose of Expenditure Payroll		Category/ Type	08 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sought: House District: 06
Seth Moulton		Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		29766.45	Disbursement For: Primary General 2014
(a) SUBTOTAL of Itemized Independent Expenditure	es		▶ Other (specify) ▶
(b) SUBTOTAL of Unitemized Independent Expendi	tures		
4.5			

Ur party committee) any political party committee or its agent.

Darryl Tattrie	[Electronically Filed]	Date	10	15	2014
Signature					

TEMIZED INDE	EPENDENT EXPENDITU	RES			PAGE 76 OF 106 FOR LINE 24 OF FORM 3X
NAME OF COMMI	,				FEC IDENTIFICATION NUMBER ▼
Forward Ma	ssacnusetts				C C00563981
Check if 24-h	our report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of F Sydahn Ric				Date	of Public Distribution/Dissemination
Mailing Addres					M = M / D = D / Y = Y = Y
	18 Caldwell Crescent			Amo	ount
City		State	Zip Code		351.00
Lynn		MA	01902		action ID: 24-03-00090-00132 of Disbursement or Obligation
Purpose of Ex Payroll	penditure		Category/ Type		08 / 29 / 2014
Name of Fede	ral Candidate		Support	Office Soug	ght: X House District: 06
Seth Moulton			Oppose	Presid	dent Senate State: MA
	Year-To-Date on for Office Sought	7	30117.45	Disburseme	ent For:
Full Name of I				Date	e of Public Distribution/Dissemination
Samnang	Keo				M = M / D = D / Y = Y = Y
Mailing Addres	98 Hanover St			Amo	ount
025.		Otata	75.0.4.		169.00
City Lynn		State MA	Zip Code 01902		saction ID : 24-03-00091-00133
Purpose of Ex Payroll	penditure		Category/ Type	Date	of Disbursement or Obligation 08 29 2014
Name of Fodo	Condidata			-	
Name of Fede Seth Moulton	ral Candidate		Support	Office Soug	NAA
Setti Moditori			Oppose	Presi	
	Year-To-Date ion for Office Sought	7	30286.45	Disburseme 2014	ent For:
					(-1
(a) SUBTOTAL	of Itemized Independent Exper	nditures		.	520.00
" \					
(p) SORIOIAL	of Unitemized Independent Ex	penditures		·· }	7 7 7
(c) TOTAL Inde	ependent Expenditures			· -	- Agr. Agr. Agr.
with, or at the r		andidate or authorized			cooperation, consultation, or concert f the reporting entity is not a political
Da	arryl Tattrie	[Electron	ically Filed]	a 10	15 2014
Signature			Date	9 10	10 2014

Darryl Tattrie

Signature

	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 77 OF 106 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	orward Massachusetts		C C00563981
Ch	eck if 24-hour report 48-hour report New rep	oort Amends repo	ort filed on M M / D D / Y Y Y Y Y
	Full Name of Payee Tonia Wonde		Date of Public Distribution/Dissemination
	Mailing Address 8 Summerset CT		Amount
	City State Lynn MA	Zip Code 01902	260.00 Transaction ID: 24-03-00092-00134 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	08 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate Seth Moulton	Support Oppose	Office Sought: House District: 06 President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	30546.45	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	Full Name of Payee Dahiana M Delarosa Mailing Address 19 Union St Apt 116		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Amount
	City State	Zip Code	325.00
	Lynn MA	01902	Transaction ID : 24-03-00093-00135 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	08 / 29 / 2014
	Name of Federal Candidate	X Support	Office Sought: X House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	30871.45	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 585.00
	`,		7 7
	(b) SUBTOTAL of Unitemized Independent Expenditures		>
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

10

Date

15

Darryl Tattrie

Signature

SCHEDULE E (FEC Form 3X)			
TEMIZED INDEPENDENT EXPENDITURI	ES		PAGE 78 OF 106 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts			
			C C00563981
Check if 24-hour report 48-hour report	New re	eport Amends repo	ort filed on
Full Name of Payee Cheyrithy Chea			Date of Public Distribution/Dissemination
			M = M / D = D / Y = Y = Y
Mailing Address 11 Williams St # 1			Amount
City	State	Zip Code	273.00
Lynn	MA	01902	Transaction ID: 24-03-00094-00136 Date of Disbursement or Obligation
Purpose of Expenditure Payroll		Category/ Type	08 / 29 / 2014
Name of Federal Candidate		Support	Office Sought: House District: 06
Seth Moulton		Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		31144.45	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
Chelsea Gothie			M = M / D = D / Y = Y = Y
Mailing Address 5 Lincoln St			Amount
City	State	Zip Code	344.50
Manchester By The	MA	01944	Transaction ID: 24-03-00095-00137 Date of Disbursement or Obligation
Purpose of Expenditure Payroll		Category/ Type	08 / 29 / 2014
Name of Federal Candidate			Office Sought:
Seth Moulton		Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		31488.95	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expendent	tures		617.50
(b) SUBTOTAL of Unitemized Independent Expe	nditures		
(a) TOTAL Independent Expenditures			
(c) TOTAL Independent Expenditures			•
	didate or authoriz		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

[Electronically Filed]

10

Date

15

PAGE	79	OF	106		
FOR L	INE 24	OF F	ORM 3X		
DENTIFICATION NUMBER ▼					

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts	C C00563981
Check if 24-hour report 48-hour report New	report Amends report filed on Amends report
Full Name of Payee	Date of Public Distribution/Dissemination
Kate Jordan	M = M / D = D / Y = Y = Y
Mailing Address 92 Jackson St	Amount
City State	Zip Code 234.00
Salem MA	02140 Transaction ID : 24-03-00096-00138 Date of Disbursement or Obligation
Purpose of Expenditure Payroll	Category/ Type 08 29 2014
Name of Federal Candidate	Support Office Sought: X House District: 06
Seth Moulton	Oppose President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee Shirley Ortiz	Date of Public Distribution/Dissemination
Mailing Address 64 Rand St	Amount
City State	Zip Code 312.00
Revere MA	02151 Transaction ID : 24-03-00097-00139 Date of Disbursement or Obligation
Purpose of Expenditure Payroll	Category/ Type 08 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office Sought: X House District: 06
Seth Moulton	Oppose President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	546.00
(b) SUBTOTAL of Unitemized Independent Expenditures	>
(c) TOTAL Independent Expenditures	>
	ures reported herein were not made in cooperation, consultation, or concert ized committee or agent of either, or (if the reporting entity is not a political
Darryl Tattrie [Elect	tronically Filed] Date 10 15 2014
Signature	

Darryl Tattrie

Signature

	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 80 OF 106 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	orward Massachusetts		C C00563981
Ch	eck if 24-hour report 48-hour report New rep	oort Amends repo	ort filed on M M / D D / Y Y Y Y Y
	Full Name of Payee Michael Bonbon		Date of Public Distribution/Dissemination
	Mailing Address 16 Shillaber St		Amount
	City State	Zip Code	728.00
	Peabody MA	01960	Transaction ID: 24-03-00098-00140 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	08 / 29 / 2014
	Name of Federal Candidate Seth Moulton	Support Oppose	Office Sought: House District: 06 President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	32762.95	President Senate State: NA Disbursement For: Primary General 2014 Other (specify) ▶
	Full Name of Payee Dina Bonbon Mailing Address 16 Shillaber St		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Amount
	City State	Zip Code	728.00
	Peabody MA	01960	Transaction ID: 24-03-00099-00141 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	08 / 29 / 2014
	Name of Federal Candidate	X Support	Office Sought: X House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	33490.95	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 1456.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

10

Date

15

	PAGE		OF	106	
	FOR LI	NE 24	OF FO	DRM 3X	
IDENTIFICATION NUMBER ▼					

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts	C C00563981
Check if 24-hour report 48-hour report New report Amends rep	port filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address and South States	M M / D D / Y Y Y Y
29 South St #2	Amount
City State Zip Code	117.00
Lynn MA 01905	Transaction ID: 24-03-00100-00142 Date of Disbursement or Obligation
Purpose of Expenditure Payroll Category/ Type	M 08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: X House District:06
Seth Moulton Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought 33607.95	Disbursement For: Primary General 2014
	Other (specify) -
Full Name of Payee Lida Kun	Date of Public Distribution/Dissemination
Mailing Address 5 Stephen St	Amount
City State Zip Code	78.00
Lynn MA 01902	Transaction ID: 24-03-00101-00143 Date of Disbursement or Obligation
Purpose of Expenditure Payroll Category/ Type	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: X House District:06
Seth Moulton Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought 33685.95	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	195.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	···· •
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	
Darryl Tattrie [Electronically Filed] Dat	te 10 / 15 / 2014
Signature	

PAGE	82	OF	
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts	C C00563981
Check if 24-hour report 48-hour report New report Amends rep	port filed on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
MEK Design LLC This expenditure was not made in cooperation, consultation or Mailing Address 4400 SW MOrrican St #220	M = M / D = D / Y = Y = Y
1130 SW MOrrison St #330	Amount
City State Zip Code	3250.00
Portland OR 97204	Transaction ID: 24-03-00105-00147 Date of Disbursement or Obligation
Purpose of Expenditure Palm Card Production and Printing Category/ Type	M 08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought:
Seth Moulton Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought 36935.95	Disbursement For: Primary General
	Other (specify) ►
Full Name of Payee Laiza Espinal Originally Written to Laiza Perez in Error 8/29/14	Date of Public Distribution/Dissemination
Mailing Address 14 Trinity Ave	Amount
City State Zip Code	-299.00
Lynn MA 01902	Transaction ID: 24-03-00112-00164 Date of Disbursement or Obligation
Purpose of Expenditure Payroll - Voided and Reissued for correct amount on 9/4/14 Category/ Type	09 / 03 / 2014
Name of Federal Candidate Support	Office Sought: X House District: 06
Seth Moulton Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought 36636.95	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	> 2951.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	
Darryl Tattrie [Electronically Filed] Dat	te 10 / 15 / 2014
Signature	

	PAGE		OF	106		
	FOR L	INE 24	OF F	ORM 3X		
_	DENTIFICATION NUMBER -					

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts	C C00563981
Check if 24-hour report 48-hour report	New report Amends report filed on Amends report filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Augustus Strategies Inc Mailing Address 2245 S Alexa Sahaal Dd Sta 200	M M / D D / Y Y Y Y
2345 S Alma School Rd Ste 206	Amount
City State	Zip Code 8767.85
Mesa AZ	85210 Transaction ID : 24-03-00107-00159 Date of Disbursement or Obligation
Purpose of Expenditure Live GOTV Calls	Category/ Type 09 03 2014
Name of Federal Candidate	Support Office Sought: X House District: 06
Seth Moulton	Oppose President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Davis	
Full Name of Payee Laiza Espinal Replacement pament originally	Date of Public Distribution/Dissemination written for \$299 with mispelled name
Mailing Address 14 Trinity Ave	Amount
City State	Zip Code 403.00
Lynn MA	01902 Transaction ID: 24-03-00111-00163 Date of Disbursement or Obligation
Purpose of Expenditure Payroll	Category/ Type 09 05 / 2014
Name of Federal Candidate	Support Office Sought: X House District: 06
Seth Moulton	Oppose President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2014 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	9170.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures)
	nditures reported herein were not made in cooperation, consultation, or concert athorized committee or agent of either, or (if the reporting entity is not a political
Darryl Tattrie	Electronically Filed] Date 10 15 2014
Signature	

S IT

Darryl Tattrie

Signature

CHEDULE E (FEC Form 3X)		
TEMIZED INDEPENDENT EXPENDITURES		PAGE 84 OF 106 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts		C C00563981
Check if 24-hour report 48-hour report New	report Amends repo	ort filed on
Full Name of Payee Method Strategies, LLC		Date of Public Distribution/Dissemination
		M = M / D = D / Y = Y = Y
Mailing Address 233 5th Ave		Amount
City State	Zip Code	2530.02
Venice CA	90291	Transaction ID: 24-03-00114-00166 Date of Disbursement or Obligation
Purpose of Expenditure Door Hangars and Palm Cards	Category/ Type	09 05 7 2014
Name of Federal Candidate	X Support	Office Sought: House District: 06
Seth Moulton	Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	69681.77	Disbursement For:
Full Name of Payee		Date of Public Distribution/Dissemination
Method Strategies, LLC		M M / D D / Y Y Y Y
Mailing Address 233 5th Ave		Amount
City State	Zip Code	21343.95
Venice CA	90291	Transaction ID: 24-03-00110-00162 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail & Postage	Category/ Type	09 / 05 / 2014
Name of Federal Candidate	Support	Office Sought: X House District: 06
John F. Tierney	> Oppose	President Senate State: MA
	Z oppose	
Calendar Year-To-Date Per Election for Office Sought	67151.75	Disbursement For:
_		
(a) SUBTOTAL of Itemized Independent Expenditures		▶ 23873.97
(b) SUBTOTAL of Unitemized Independent Expenditures		. •
(c) TOTAL Independent Expenditures		
······································		
Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or authorizant party committee) any political party committee or its agent.		

[Electronically Filed]

10

Date

15

S ITI

CHEDULE E (FEC Form 3X	()				
EMIZED INDEPENDENT EXPEND	TURES			PAGE FOR LI	85 OF 106 NE 24 OF FORM 3X
AME OF COMMITTEE (In Full)				<u> </u>	
Forward Massachusetts				1.1.1.1.1.1	CATION NUMBER ▼
				C C005639	3 81
heck if 24-hour report 48-hour re	eport New repo	ort Amends repo		M = M / D = D	/
Full Name of Payee Augustus Strategies Inc			Date	e of Public Distrib	ution/Dissemination
Mailing Address 2345 S Alma School Rd	Ste 206		Amo	ount	
City	State	Zip Code	— F		6630.70
Mesa	AZ	85210		saction ID : 24-03 e of Disbursement	
Purpose of Expenditure Live GOTV Calls		Category/ Type		09 / 06	2014
Name of Federal Candidate		Support	Office Soug	ght: X Hous	e District: 06
Seth Moulton		Oppose	Presid		
Calendar Year-To-Date Per Election for Office Sought		76312.47	Disburseme	ent For: X Pri Other (specify) ►	mary General
Full Name of Payee Augustus Strategies Inc Mailing Address 2245 S Alma School Rd			Date	e of Public Distrib	ution/Dissemination
2345 S Alma School Rd	Ste 206		Amo	ount	
City	State	Zip Code			8958.55
Mesa	AZ	85210		saction ID : 24-03 e of Disbursement	
Purpose of Expenditure Live GOTV Calls		Category/ Type		09 / 09	2014
Name of Federal Candidate		X Support	Office Soug	ght: X Hous	se District: 06
Seth Moulton		Oppose	Presi	dent Sena	te State: MA
Calendar Year-To-Date Per Election for Office Sought		85271.02	Disburseme 2014	ent For: X Pri Other (specify) ►	imary General
(a) SUBTOTAL of Itemized Independent E	xpenditures		· [7	15589.25
(b) SUBTOTAL of Unitemized Independen	t Expenditures				70 1 70 1
(c) TOTAL Independent Expenditures			· [4
Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commit	ny candidate or authorized				

Darryl Tattrie	[Electronically Filed]	led] Date	10	15	/	2014
Signature						

	mage# 14978405660						
	CHEDULE E (FEC Form 3X) MIZED INDEPENDENT EXPENDITURES			DAGE 96 OF 406			
1 6	WILLED INDEPENDENT EXPENDITURES			PAGE 86 OF 106 FOR LINE 24 OF FORM 3X			
۱ΙΔ	ME OF COMMITTEE (In Full)		T				
	orward Massachusetts		FE	C IDENTIFICATION NUMBER ▼			
•	orward Maddadradetta		C	C00563981			
Ch	eck if 24-hour report 48-hour report New report	Amends repo	rt filed on	/ D D / Y D Y D			
	Full Name of Payee Fantasia Means		Date of P	ublic Distribution/Dissemination			
	rantasia ivieans		M = N	/ D D / Y Y Y Y			
	Mailing Address 6 Herbert St #3		Amount				
	City State Zip Co	odo		39.00			
	Lynn MA 01902			n ID : 24-03-00141-00193 isbursement or Obligation			
	Purpose of Expenditure	gom/	Date of D				
	Payroll	gory/ Type	09	12 2014			
	Name of Federal Candidate	X Support	Office Sought:	House District: 06			
	Seth Moulton	Oppose	President	Senate State: MA			
	Calendar Year-To-Date Per Election for Office Sought 853	310.02	Disbursement For 2014 Other	r: X Primary General (specify) ▶			
	Full Name of Payee Myrmarie Ramirez		Date of P	ublic Distribution/Dissemination			
			- N	/ D D / Y Y Y Y			
	Mailing Address 15 Veteran's Memorial Dr		Amount				
	City State Zip C	ode		390.00			
	Peabody MA 0196	0		on ID: 24-03-00142-00194 disbursement or Obligation			
	Purpose of Expenditure Payroll Cate	gory/ Type		/ D D / Y Y Y Y			
	Name of Federal Candidate	X Support	Office Sought:	House District:06			
	Seth Moulton	Oppose	President	Senate State: MA			
	Calendar Year-To-Date	700.02	Disbursement Fo	or: Primary General			
	Per Election for Office Sought	700.02		(specify) •			
	(a) SUBTOTAL of Itemized Independent Expenditures		•	429.00			
	(b) SUBTOTAL of Unitemized Independent Expenditures		.				
	(c) TOTAL lade and at Formality						
	(c) TOTAL Independent Expenditures		•	4			

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Darryl Tattrie	[Electronically Filed]	Date	10	15	2014
Signature					
9					

Darryl Tattrie

Signature

	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 87 OF 106 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	orward Massachusetts		C C00563981
Ch	eck if 24-hour report 48-hour report New report	ort Amends repo	ort filed on
	Full Name of Payee Raynel Mazara		Date of Public Distribution/Dissemination
	Mailing Address 15 Canterbury Ct		Amount
		7: 0 !	50.00
	City State Lynn MA	Zip Code 01905	52.00 Transaction ID : 24-03-00143-00195 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	X Support	Office Sought: House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	85752.02	Disbursement For:
	Full Name of Payee Yina Payano		Date of Public Distribution/Dissemination
			M = M / D = D / Y = Y = Y
	Mailing Address 2 Adams St		Amount
	City State	Zip Code	156.00
	Lynn MA	01902	Transaction ID : 24-03-00144-00196 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 / 12 / 2014
	Name of Federal Candidate	X Support	Office Sought: X House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	85908.02	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures		208.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

10

Date

15

TEMIZED INDEPENDENT	r expenditures						PAGE 88 FOR LINE 2	OF 106 24 OF FORM 3X
NAME OF COMMITTEE (In Ful	•					FEC	IDENTIFICATI	ON NUMBER ▼
Forward Massachuse	etts					C	C00563981	
Check if 24-hour report	48-hour report	New repo	ort Amer	nds repo	ort filed	on M M	/ D = D /	Y Y Y Y
Full Name of Payee						Date of Pub	lic Distribution	/Dissemination
Darlene Gonzalez						M = M	/ D D /	Y Y Y Y Y
Mailing Address 14 Oakwo	od PI					Amount		
City	Sta	ate	Zip Code		\dashv			312.00
Lynn	MA		01902				D: 24-03-001	45-00197
Purpose of Expenditure Payroll			Category/ Type			09	12	2014
Name of Federal Candidate	,		X Sup	ipport	Office	Sought:	X House	District:06
Seth Moulton				ppose		President	Senate	State: MA
Calendar Year-To-Date Per Election for Office	Sought		86220.02		Disbu 2014	rsement For:	Primary	General
Full Name of Payee						Date of Pub	lic Distribution	/Dissemination
Adam Lan						M = M	/ D D /	YYYYY
Mailing Address 16 Farrage	ut Rd					Amount		
City	Sta	ate	Zip Code					52.00
Swampscott	M	ИΑ	01907				ID: 24-03-001 oursement or	
Purpose of Expenditure Payroll			Category/ Type			09	12	2014
Name of Federal Candidate	;		X Su	pport	Office	Sought:	X House	District:06
Seth Moulton				opose		President	Senate	State: MA
Calendar Year-To-Date Per Election for Office	Sought		86272.02		Disbu 2014		Primary specify) ▶	y General
(a) SUBTOTAL of Itemized I	Independent Expenditures						-	364.00
(b) SUBTOTAL of Unitemize	d Independent Expenditures				·· •			
(c) TOTAL Independent Exp	enditures				·· >		4	
Under penalty of perjury I ce with, or at the request or sug party committee) any political	ggestion of, any candidate or	r authorized						
Darryl Tattrie		[Electroni	ically Filed]	Dota	M 10		201	4
Signature				Date	,			

NAME OF COMMITTEE (In Full) Forward Massachusetts

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

		PAGE 89	OF 106
	FEC I	DENTIFICATION	ON NUMBER ▼
	C	C00563981	
n	M = M	/ D D /	Y I Y I Y I Y
Date	of Publ	ic Distribution/	Dissemination
	M = M	/ D D /	Y Y Y Y Y
Amo	unt		
			117.00
		D : 24-03-0014 oursement or C	l 7-00199
		12	_
Soug	ht:	X House	District: 06
resio	dent [Senate	State: MA
eme	nt For:		General
		pecify) ▶	
Date	of Publ	lic Distribution/	/Dissemination
	M = M	/ D D /	Y = Y = Y = Y
Amo	unt		
			117.00
		D : 24-03-0014	
rans	action I		
		oursement or C	Obligation
		oursement or C	Obligation 2014
Date	of Disk	/ D D /	2014
	of Disk	12 /	2014
Soug	of Disk	X House	2014 District: 06 State: MA
Soug Presidence	of Disk	X House Senate	2014 District: 06 State: MA
Soug Presidence	of Disk	House Senate Primary	2014 District: 06 State: MA
Soug Presidence	of Disk	House Senate X Primary	2014 District: 06 State: MA
Soug Presidence	of Disk	House Senate X Primary	2014 District: 06 State: MA General
Soug Presidence	of Disk	House Senate X Primary	2014 District: 06 State: MA General
Soug Presidence	of Disk	House Senate ∑ Primary specify) ▶	2014 District: 06 State: MA General
Date Soug Soug President (of Disk	House Senate ∑ Primary specify) ▶	2014 District: 06 State: MA General

Check if 24-hour report 48-hour report Amends report filed of New report Full Name of Payee Jenniffer Miranda Mailing Address 111 Chestnut St Apt # 1 City State Zip Code MA 01902 Lynn Ti Purpose of Expenditure Category/ Payroll Type Name of Federal Candidate Office X Support Seth Moulton Oppose Disburs Calendar Year-To-Date 2014 86389.02 Per Election for Office Sought Full Name of Payee Karen Guerrero Mailing Address 108 Franklyn St Apt 13 City State Zip Code Lynn MA 01902 Purpose of Expenditure Category/ Payroll Type Name of Federal Candidate X Support Office Seth Moulton Oppose Disbur Calendar Year-To-Date 86506.02 2014 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Darryl Tattrie [Electronically Filed] 10 15 2014 Date Signature

Signature

S

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		PAGE 90 OF 106
			FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full) Forward Massachusetts		FEC IDENTIFICATION NUMBER ▼
	orward massacrusetts		C C00563981
Cł	neck if 24-hour report 48-hour report New report	ort Amends repo	rt filed on
	Full Name of Payee Donny Ann		Date of Public Distribution/Dissemination
	Mailing Address 498 Essex St Apt 96		Amount
			Amount
	City State	Zip Code	78.00
	Lynn MA	01902	Transaction ID: 24-03-00149-00201 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	X Support	Office Sought: X House District:06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	86584.02	Disbursement For:
	Full Name of Payee Aysha Mendez		Date of Public Distribution/Dissemination
	Mailing Address 3 Nichols St		Amount
	City State	Zip Code	78.00
	Lynn MA	01902	Transaction ID: 24-03-00150-00202 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	X Support	Office Sought: X House District:06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	86662.02	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		156.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		>
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Darryl Tattrie		M M / D D / Y Y Y

[Electronically Filed]

10

Date

15

	PAGE 91		106 DRM 3X
	NTIFICAT		
	00563981		
n/	D D /	Y	Y
Date of Public	Distribution	n/Dissemir	nation
M M /	D D	Y Y	YYY
Amount			
		7	8.00
ansaction ID : Date of Disburs			
09	12	20	1 1
ought:	House	District:	06
resident	Senate	State:	MA
	X Primar	у 🔲	General
Other (spe			
Date of Public		n/Dissemii	
W = W /	D = D	/ - 1	
Amount			
		7	8.00
ansaction ID			
Date of Disbur	sement or	Obligation	1 • Y • Y
09	12	20	014
Sought: X	House	District:	06
resident	Senate	State:	MA
ement For:	X Prima	ry	General
Other (spe	ecify) 🕨		
		156.	00
7	7		
			I
-7-			

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts		C C00563981
Check if 24-hour report 48-hour report New report	ort Amends repo	rt filed on
Full Name of Payee Martha Medina		Date of Public Distribution/Dissemination
Mailing Address 3 Nichols St		Amount
City State	Zip Code	78.00
Lynn MA	01902	Transaction ID : 24-03-00151-00203 Date of Disbursement or Obligation
Purpose of Expenditure Payroll	Category/ Type	09 12 / Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: X House District: 06
Seth Moulton	Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	86740.02	Disbursement For:
Full Name of Payee		Date of Public Distribution/Dissemination
Freslyn Garcia-Gonzalez		M = M / D = D / Y = Y = Y
Mailing Address 16 Breed St # 8		Amount
City State	Zip Code	78.00
Lynn MA	01902	Transaction ID : 24-03-00152-00204 Date of Disbursement or Obligation
Purpose of Expenditure Payroll	Category/ Type	09 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: X House District:06
Seth Moulton	Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	86818.02	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		156.00
(b) SUBTOTAL of Unitemized Independent Expenditures		>
(c) TOTAL Independent Expenditures		>
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Darryl Tattrie [Electroni	ically Filed] Date	10 15 2014
Signature		

S П

	NUEDIII E E /EEC Earm 2V				
	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES				PAGE 92 OF 106
					FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
F	orward Massachusetts				C C00563981
Ch	eck if 24-hour report 48-hour report Nev	w repo	ort Amends repo	ort filed	on Man / Dab / Yayayay
	Full Name of Payee				Date of Public Distribution/Dissemination
	Chelsea Gothie				M = M / D = D / Y = Y = Y
	Mailing Address 5 Lincoln St				Amount
	0111		7:- 0-1-		252.50
	City State Manchester By The MA		Zip Code 01944		253.50 Transaction ID : 24-03-00154-00206
			01944		Date of Disbursement or Obligation
	Purpose of Expenditure Payroll		Category/ Type		09 12 / Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office	e Sought: X House District: 06
	Seth Moulton		Oppose		President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	7	87071.52	Disbi 2014	ursement For:
	Full Name of Payee				Date of Public Distribution/Dissemination
	Shirley Ortiz				M M / D D / Y Y Y Y
	Mailing Address 64 Rand St				Amount
	City State		Zip Code		123.50
	Revere MA		02151		Transaction ID : 24-03-00155-00207
			1		Date of Disbursement or Obligation
	Purpose of Expenditure Payroll		Category/ Type		09 / 12 / 2014
	Name of Federal Candidate		X Support	Offic	e Sought: X House District: 06
	Seth Moulton		Oppose		President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought		87195.02	Disb 2014	ursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures			▶	377.00
	(b) SUBTOTAL of Unitemized Independent Expenditures				
					7 7 7
	(c) TOTAL Independent Expenditures			▶	
	Under penalty of perjury I certify that the independent expendi	tures	reported herein were	not m	ade in cooperation, consultation, or concert

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Darryl Tattrie	[Electronically Filed]	Date	10 ^M	15	2014
Signature					

PAGE	93	OF	106	
FOR LI	NE 24	4 OF F	ORM 3X	
DENTIFIC	CATIO	N NUM	BER ▼	

NAME OF COMMITTEE (In Full)	
` '	FEC IDENTIFICATION NUMBER ▼
Forward Massachusetts	C C00563981
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Kate Jordan	M M / D D / Y Y Y Y
Mailing Address 92 Jackson St	Amount
City State Zip Code	396.50
Salem MA 02140	Transaction ID : 24-03-00156-00208
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Payroll Type	09 12 2014
Name of Federal Candidate Support Office	e Sought: X House District:06
Seth Moulton Oppose	President Senate State: MA
07504.50	ursement For: Primary General
Per Election for Office Sought 87591.52 2012	Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Michael Bonbon	M = M / D = D / Y = Y = Y
Mailing Address 16 Shillaber St	Amount
City State Zip Code	866.14
Peabody MA 01960	Transaction ID: 24-03-00157-00209 Date of Disbursement or Obligation
Purpose of Expenditure Payroll Category/ Type	09 12 2014
Name of Federal Candidate Support Office	te Sought: X House District: 06
Seth Moulton Oppose	President Senate State: MA
Calendar Year-To-Date Dist	pursement For:
Per Election for Office Sought 88457.66 201	4 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	1262.64
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Darryl Tattrie [Electronically Filed]	10 15 2014
Signature Date	

П

36	CHEDULE E (FEC Form 3X)		
ΓΙ	EMIZED INDEPENDENT EXPENDITURES		PAGE 94 OF 106 FOR LINE 24 OF FORM 3X
NI A	AME OF COMMITTEE (In Full)		
	Forward Massachusetts		FEC IDENTIFICATION NUMBER ▼ C C00563981
Cł	neck if 24-hour report 48-hour report New rep	ort Amends repo	ort filed on M M / D D / Y Y Y Y Y
	Full Name of Payee Dina Bonbon		Date of Public Distribution/Dissemination
	Mailing Address 16 Shillaber St		Amount
	City State Peabody MA	Zip Code 01960	741.00 Transaction ID : 24-03-00158-00210
	Purpose of Expenditure Payroll	Category/ Type	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate Seth Moulton	Support Oppose	Office Sought: House District: 06 President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	89198.66	Disbursement For:
	Full Name of Payee Kimberly Cruz Mailing Address 428 Franklin St #6		Date of Public Distribution/Dissemination
	138 Franklin St #6		Amount
	City State	Zip Code	104.00
	Lynn MA	01902	Transaction ID : 24-03-00159-00211 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 / 12 / 2014
	Name of Federal Candidate	X Support	Office Sought: X House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	89302.66	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 845.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		. •
	(c) TOTAL Independent Expenditures		. •
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized		

party committee) any political party committee or its agent.

Darryl Tattrie	[Electronically Filed]	Date	10 ^M	15	2014
Signature					

S П

Darryl Tattrie

Signature

36	CHEDULE E (FEC Form 3X)		
TE	EMIZED INDEPENDENT EXPENDITURES		PAGE 95 OF 106 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	orward Massachusetts		C C00563981
Ch	neck if 24-hour report 48-hour report New rep	ort Amends repo	ort filed on
	Full Name of Payee Brian Jean-Francois		Date of Public Distribution/Dissemination
	Mailing Address 71 Michigan Ave #2		Amount
	City State	Zip Code	546.00
	Lynn MA	01902	Transaction ID: 24-03-00118-00170 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 / 12 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	89848.66	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	Full Name of Payee Travis Thurman		Date of Public Distribution/Dissemination
	Mailing Address 60 Aspen Rd		Amount
	City State	Zip Code	377.00
	Swampscott MA	01907	Transaction ID: 24-03-00120-00172 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: X House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	90225.66	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		923.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		. •
	(c) TOTAL Independent Expenditures		· · · · · · · · · · · · · · · · · · ·
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

10

Date

15

TE	EMIZED INDEPENDENT EXPENDITURES				PAGE 96 OF 106 FOR LINE 24 OF FORM 3X	
	IAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
۲	Forward Massachusetts				C C00563981	
Ch	heck if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y	
	Full Name of Payee Jake Robert				Date of Public Distribution/Dissemination	
	Mailing Address 60 Gregory St				Amount	
	City Marblehead	State MA	Zip Code 01945		351.00 Transaction ID : 24-03-00121-00173	
	Purpose of Expenditure Payroll		Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Name of Federal Candidate		Support	Office	Sought: X House District: 06	
	Seth Moulton		Oppose		President Senate State: MA	
	Calendar Year-To-Date Per Election for Office Sought	7 1 7	90576.66	Disbu 2014	rsement For:	
	Full Name of Payee Charlene Fernandez				Date of Public Distribution/Dissemination	
	Mailing Address 2 Adams St				Amount	
	City	State	Zip Code		364.00	
	Lynn	MA	01902		Transaction ID: 24-03-00122-00174 Date of Disbursement or Obligation	
	Purpose of Expenditure Payroll		Category/ Type		09 / 12 / 2014	
	Name of Federal Candidate		X Support	Office	Sought: X House District: 06	
	Seth Moulton		Oppose		President Senate State: MA	
	Calendar Year-To-Date Per Election for Office Sought		90940.66	Disbu 2014	orsement For:	
	(a) SUBTOTAL of Itemized Independent Expenditure	}s		>	715.00	
	(b) SUBTOTAL of Unitemized Independent Expenditu	ures		··· •		
	(c) TOTAL Independent Expenditures			···· >	7 7	
	Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	ate or authorized				
	Darryl Tattrie	[Electron	nically Filed]	Δ M	0 15 2014	
	Signature		Date Date	e Li	2014	

Image# 14978405671				
SCHEDULE E (FEC Form 3X TEMIZED INDEPENDENT EXPENDI				PAGE 97 OF 106 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Forward Massachusetts			C	C00563981
Check if 24-hour report 48-hour re	eport New repo	ort Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee Angel Gonzalez			Date of Pul	olic Distribution/Dissemination
Mailing Address 71 Michigan Ave # 1			Amount	
City	State	Zip Code		455.00
Lynn	MA	01902		ID: 24-03-00123-00175 bursement or Obligation
Purpose of Expenditure Payroll		Category/ Type	09	12 / 2014
Name of Federal Candidate		X Support	Office Sought:	X House District: 06
Seth Moulton		Oppose	President	Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		91395.66	Disbursement For: 2014 Other (Primary General
Full Name of Payee Benita Meli	-		Date of Pu	blic Distribution/Dissemination
Mailing Address 18 Bond St			Amount	
City	State	Zip Code		520.00
Lynn	MA	01902		ID: 24-03-00124-00176 sbursement or Obligation
Purpose of Expenditure Payroll		Category/ Type	09	/ 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	X House District: 06
Seth Moulton		Oppose	President	Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	, ,	91915.66	Disbursement For 2014 Other	Specify) Primary General
(a) SUBTOTAL of Itemized Independent E	xpenditures		>	975.00
(b) SUBTOTAL of Unitemized Independen	t Expenditures		· •	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

(c) TOTAL Independent Expenditures.....

Darryl Tattrie	[Electronically Filed]	Date	10	/ 15	/	2014
Signature						

TE	EMIZED INDEPENDENT EXPENDITURES			PAGE 98 OF 106 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
F	Forward Massachusetts			C C00563981
Ch	neck if 24-hour report 48-hour report New	v report Amends rep		M = M / D = D / Y = Y = Y
٦	Full Name of Payee Michelle Mendez			of Public Distribution/Dissemination
				M M / D D / Y Y Y Y
	Mailing Address 27 Phillips Ave Apt 2		Amo	unt
	City State	Zip Code		546.00
	Lynn MA	01902		e of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type		09 / 12 / 2014
	Name of Federal Candidate	X Support	Office Soug	ght: X House District: 06
	Seth Moulton	Oppose	Presid	NAA
	Calendar Year-To-Date Per Election for Office Sought	92461.66	Disburseme 2014	ent For:
	Full Name of Payee		Date	e of Public Distribution/Dissemination
	Augustina Matos			M M / D D / Y Y Y Y
	Mailing Address 27 Phillips Ave Apt 2			
	21 Fillilips AVE Apt 2		Amo	punt
	City State	Zip Code		351.00
	Lynn MA	01902		saction ID: 24-03-00126-00178 e of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type		09 / 12 / 2014
	Name of Federal Candidate	X Support	Office Soug	ght: X House District: 06
	Seth Moulton	Oppose	Presid	MΛ
	Calendar Year-To-Date Per Election for Office Sought	92812.66	Disburseme 2014	ent For:
_				Oliof (Sp35))
	(a) SUBTOTAL of Itemized Independent Expenditures		,	897.00
	(b) SUBTOTAL of Unitemized Independent Expenditures			
	(c) TOTAL Independent Expenditures		···· \	4
,	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or author party committee) any political party committee or its agent.			
	Darryl Tattrie [Elec	ectronically Filed]	ite 10	15 2014
	Signature	Dat	te 10	2014

Signature

TEMIZED INDEPENDENT EXPENDITURES		PAGE 99 OF 106
		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Forward Massachusetts		FEC IDENTIFICATION NUMBER ▼
Ulwalu wassachusetts		C C00563981
Check if 24-hour report 48-hour report New report	ort Amends report fi	iled on Man / Dad / Yayayay
Full Name of Payee Edwin Soto		Date of Public Distribution/Dissemination
Mailing Address 25 South St Apt 309		Amount
City State	Zip Code	169.00
Lynn MA	01902	Transaction ID: 24-03-00127-00179 Date of Disbursement or Obligation
Purpose of Expenditure Payroll	Category/ Type	09 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Of	ffice Sought: X House District: 06
Seth Moulton	Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought	92981.66 Di	isbursement For:
Full Name of Payee Kendrick Jean-Francois		Date of Public Distribution/Dissemination
Mailing Address 71 Michigan Ave #2		Amount
City State Lynn MA	Zip Code 01902	520.00 Transaction ID : 24-03-00128-00180
Purpose of Expenditure		Date of Disbursement or Obligation
Payroll	Category/ Type	09 12 / 2014
Name of Federal Candidate	Support Of	office Sought: X House District: 06
Seth Moulton	Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		isbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		689.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Darryl Tattrie [Electron	nically Filed]	10 15 2014

Darryl Tattrie

Signature

	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 100 OF 106 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	orward Massachusetts		C C00563981
Ch	eck if 24-hour report 48-hour report New rep	ort Amends repo	ort filed on
	Full Name of Payee Erick Ubri		Date of Public Distribution/Dissemination
	Mailing Address 47 Burril Ave #1		Amount
			Amount
	City State	Zip Code	208.00
	Lynn MA	01902	Transaction ID : 24-03-00129-00181 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 / 12 / 2014
	Name of Federal Candidate	X Support	Office Sought: X House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	93709.66	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	Full Name of Payee		Date of Public Distribution/Dissemination
	Angelyz Benzan		M = M / D = D / Y = Y = Y
	Mailing Address 10 Timson St # 2		Amount
	City State	Zip Code	364.00
	Lynn MA	01902	Transaction ID: 24-03-00130-00182 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 / 12 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	94073.66	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures		572.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		>
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

10

Date

15

	HEDULE E (FEC Form 3X)			
	MIZED INDEPENDENT EXPENDITURES			PAGE 101 OF 106 FOR LINE 24 OF FORM 3X
NA N	ME OF COMMITTEE (In Full)			
	orward Massachusetts			FEC IDENTIFICATION NUMBER ▼
	n ward Massacriusetts			C C00563981
Che	ock if 24-hour report 48-hour report New rep	port Amends repo		M = M / D = D / Y = Y = Y
Т	Full Name of Payee		Date	e of Public Distribution/Dissemination
	Emely Benzan			M M / D D / Y Y Y Y
	Mailing Address 10 Timson St # 2		Amo	punt
ŀ	City State	Zip Code	-	455.00
١	Lynn MA	01902		saction ID: 24-03-00131-00183 e of Disbursement or Obligation
Ī	Purpose of Expenditure	Category/	7	M = M / D = D / Y = Y = Y
١	Payroll	Type	_	09 12 2014
	Name of Federal Candidate	X Support	Office Soug	ght: X House District: 06
	Seth Moulton	Oppose	Presi	dent Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	94528.66	Disburseme 2014	ent For:
ľ	Full Name of Payee			e of Public Distribution/Dissemination
١	Genesis Guerrero			M = M / D = D / Y = Y = Y
ľ	Mailing Address 47 Collins St Apt 3		Amo	punt
ŀ	City State	Zip Code		130.00
1	Lynn MA	01902	Trans	saction ID : 24-03-00132-00184
ŀ	- J····	1		e of Disbursement or Obligation
١	Purpose of Expenditure Payroll	Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ŀ	Name of Federal Candidate	Support	Office Soug	ght: X House District: 06
١	Seth Moulton	Oppose	Presi	NAA
ľ	Calendar Year-To-Date		Disburseme	ent For: X Primary General
	Per Election for Office Sought	94658.66	2014	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		· •	585.00
(b) SUBTOTAL of Unitemized Independent Expenditures			
				4 4
(c) TOTAL Independent Expenditures		•	7 7 7
٧	Inder penalty of perjury I certify that the independent expenditures vith, or at the request or suggestion of, any candidate or authorized arty committee) any political party committee or its agent.			

Darryl Tattrie [Electronically Filed] 10 15 2014 Date Signature

S П

party committee) any political party committee or its agent.

Signature

SCHEDULE E (FEC Form 3	X)		
TEMIZED INDEPENDENT EXPENI	DITURES		PAGE 102 OF 106 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			
Forward Massachusetts			C C00563981
Check if 24-hour report 48-hour	report New re	eport Amends repo	ort filed on M M M / D D / Y Y Y Y Y
Full Name of Payee Laiza Espinal			Date of Public Distribution/Dissemination
Mailing Address 14 Trinity Ave			Amount
City Lynn	State MA	Zip Code 01902	507.00 Transaction ID: 24-03-00133-00185 Date of Disbursement or Obligation
Purpose of Expenditure Payroll		Category/ Type	09 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Seth Moulton		Support Oppose	Office Sought: House District: 06 President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		95165.66	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee Natasha Davila Mailing Address 71 Michigan Ave # 1			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Amount
City	State	Zip Code	260.00
Lynn	MA	01902	Transaction ID: 24-03-00134-00186 Date of Disbursement or Obligation
Purpose of Expenditure Payroll		Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sought: X House District:06
Seth Moulton		Oppose	President Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		95425.66	Disbursement For:
(a) SUBTOTAL of Itemized Independent	Expenditures		767.00
(b) SUBTOTAL of Unitemized Independent	nt Expenditures		
(c) TOTAL Independent Expenditures			•
			not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

Darryl Tattrie [Electronically Filed] 15 2014 Date

Darryl Tattrie

Signature

	CHEDULE E (FEC Form 3X)			
ΓE	EMIZED INDEPENDENT EXPENDITURES			PAGE 103 OF 106 FOR LINE 24 OF FORM 3X
N/	ME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
	orward Massachusetts			
				C C00563981
Ch	eck if 24-hour report 48-hour report New rep	port Amends repo		M / D D / Y = Y = Y
	Full Name of Payee Emily Perez		Date of	of Public Distribution/Dissemination
	Mailing Addrass			M / D D / Y Y Y Y
	9 Henry Ave #2		Amour	nt
	City State	Zip Code		377.00
	Lynn MA	01902		ction ID: 24-03-00135-00187 of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	M	09 / 12 / 2014
	Name of Federal Candidate	X Support	Office Sough	t: X House District: 06
	Seth Moulton	Oppose	Preside	ent Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	95802.66	Disbursement 2014 Of	t For:
	Full Name of Payee		Date of	of Public Distribution/Dissemination
	Sydahn Richie		М	M / D D / Y Y Y Y
	Mailing Address 18 Caldwell Crescent		Amou	nt
	City State	Zip Code		455.00
	Lynn MA	01902		ction ID: 24-03-00136-00188 of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	M	09 / 12 / 2014
	Name of Federal Candidate	X Support	Office Sough	t: X House District:06
	Seth Moulton	Oppose	Preside	ent Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	96257.66	Disbursemen 2014 O	t For:
	(a) SUBTOTAL of Itemized Independent Expenditures			832.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•	7 7 7
	(c) TOTAL Independent Expenditures		·· •	7 7 7
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.			

[Electronically Filed]

10

Date

15

Darryl Tattrie

Signature

	CHEDULE E (FEC Form 3X)		
ΓΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 104 OF 106 FOR LINE 24 OF FORM 3X
NΑ	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
	orward Massachusetts		
			C C00563981
Ch	eck if 24-hour report 48-hour report New report	ort Amends repo	ort filed on
	Full Name of Payee Tonia Wonde		Date of Public Distribution/Dissemination
			M M / D D / Y Y Y Y
	Mailing Address 8 Summerset CT		Amount
	City State	Zip Code	52.00
	Lynn MA	01902	Transaction ID : 24-03-00137-00189 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 12 7 2014
	Name of Federal Candidate	Support	Office Sought: X House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	96309.66	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	Full Name of Payee		Date of Public Distribution/Dissemination
	Dahiana M Delarosa		M M / D D / Y Y Y Y
	Mailing Address 19 Union St Apt 116		Amount
	City State	Zip Code	494.00
	Lynn MA	01902	Transaction ID: 24-03-00138-00190 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	X Support	Office Sought: House District: 06
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	96803.66	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures		546.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

10

Date

15

Signature

S

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		
	EMIZED INDEPENDENT EXPENDITORES		PAGE 105 OF 106 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۲	Forward Massachusetts		C C00563981
Cł	neck if 24-hour report 48-hour report New report	ort Amends repo	ort filed on
	Full Name of Payee Cheyrithy Chea		Date of Public Distribution/Dissemination
	Mailing Address 11 Williams St # 1		Amount
	City State	Zip Code	468.00
	Lynn MA	01902	Transaction ID : 24-03-00139-00191 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 / 12 / 2014
	Name of Federal Candidate	X Support	Office Sought:
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	97271.66	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	Full Name of Payee Jazmine Jackson		Date of Public Distribution/Dissemination
	Mailing Address 6 Herbert st #3		Amount
	City State	Zip Code	39.00
	Lynn MA	01902	Transaction ID: 24-03-00140-00192 Date of Disbursement or Obligation
	Purpose of Expenditure Payroll	Category/ Type	09 / 12 / 2014
	Name of Federal Candidate	X Support	Office Sought:
	Seth Moulton	Oppose	President Senate State: MA
	Calendar Year-To-Date Per Election for Office Sought	97310.66	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		. > 507.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		. •
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Darryl Tattrie		M M / D D / Y Y Y

[Electronically Filed]

10

Date

15