

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

My Committee

ADDRESS (number and street) 249 Melrose St. #1L

Check if different than previously reported. (ACC) Brooklyn NY 11206

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

C C00667667

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2018 through M M / D D / Y Y Y Y Y Y 09 / 30 / 2018

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

Lerner, Nate, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Lerner, Nate, , ,* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 15 / 2018

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

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

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

My Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="66797.70"/>	<input type="text" value="66797.70"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="66797.70"/>	<input type="text" value="66797.70"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="45779.70"/>	<input type="text" value="45779.70"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="21018.00"/>	<input type="text" value="21018.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

My Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10772.50	10772.50
(ii) Unitemized	56025.20	56025.20
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	66797.70	66797.70
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	66797.70	66797.70
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	66797.70	66797.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	66797.70	66797.70

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	30170.95	30170.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	30170.95	30170.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	15608.75	15608.75
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	45779.70	45779.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45779.70	45779.70

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	66797.70	66797.70
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	66797.70	66797.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	30170.95	30170.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	30170.95	30170.95

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
My Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Alt, Jane, , ,		Date of Receipt MM / DD / YYYY 07 / 29 / 2018
Mailing Address 2203 Orrington Avenue		Transaction ID : SA11AI.5760
City Evanston	State IL	Zip Code 60201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Alt, Jane, , ,		Date of Receipt MM / DD / YYYY 08 / 05 / 2018
Mailing Address 2203 Orrington Avenue		Transaction ID : SA11AI.6876
City Evanston	State IL	Zip Code 60201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Briskin, Richard, , ,		Date of Receipt MM / DD / YYYY 09 / 30 / 2018
Mailing Address 360 Dolan Avenue		Transaction ID : SA11AI.9137
City Mill Valley	State CA	Zip Code 94941
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) The Sands Report	Occupation (for Individual) Publisher	<input type="checkbox"/> Memo Item
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
My Committee

A. Brozost, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1642 3rd street
 City Manhattan beach State CA Zip Code 90266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Lawyer
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2018
Transaction ID : SA11AI.9077
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Byrne, Blake, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1880 Century Park East Suite 1404
 City Los Angeles State CA Zip Code 90067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2018
Transaction ID : SA11AI.8966
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Champion, Kerry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 556 Hopkins St.
 City Menlo Park State CA Zip Code 94025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) Consultant
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2018
Transaction ID : SA11AI.8536
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
My Committee

A. Champion, Kerry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 556 Hopkins St.
 City Menlo Park State CA Zip Code 94025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) Consultant
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2018
Transaction ID : SA11AI.9022
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Clark, Maxine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 N. Bemiston Avenue
 City Saint Louis State MO Zip Code 63105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2018
Transaction ID : SA11AI.5835
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Clark, Maxine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 N. Bemiston Avenue
 City Saint Louis State MO Zip Code 63105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2018
Transaction ID : SA11AI.8460
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
My Committee

A. Estrin, Eliot, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2002 Tuna Canyon Rd

City Topanga	State CA	Zip Code 90290
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2018

Transaction ID : SA11AI.5505

Amount of Each Receipt this Period
800.00

Memo Item

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

Mailing Address 950 Olive St

City Menlo Park	State CA	Zip Code 94025
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) none	Occupation (for Individual) none
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Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2018

Transaction ID : SA11AI.8634

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1175 Park Ave Ny NY 10128

City NY	State NY	Zip Code 10128
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not employed	Occupation (for Individual) Not employed
---	---

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2018

Transaction ID : SA11AI.8735

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
My Committee

A. Horne, Michael, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 936 N. Vista St

City LA	State CA	Zip Code 90046
------------	-------------	-------------------

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

Name of Employer (for Individual) mjj Corp.	Occupation (for Individual) President
--	--

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2018

Transaction ID : SA11AI.8940

Amount of Each Receipt this Period
3000.00

Memo Item

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

Mailing Address 3201 Cahuenga Boulevard West

City Los Angeles	State CA	Zip Code 90068
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Valhalla Entertainment	Occupation (for Individual) Producer
---	---

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2018

Transaction ID : SA11AI.8906

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 6325 N Sheridan #1902

City Chicago	State IL	Zip Code 60660
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2018

Transaction ID : SA11AI.8486

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
My Committee

A. Johnson, Anna, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6325 N Sheridan #1902

City Chicago	State IL	Zip Code 60660
-----------------	-------------	-------------------

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

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
233.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2018

Transaction ID : SA11AI.8537

Amount of Each Receipt this Period
7.50

Memo Item

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

Mailing Address 6325 N Sheridan #1902

City Chicago	State IL	Zip Code 60660
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
248.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2018

Transaction ID : SA11AI.9039

Amount of Each Receipt this Period
15.00

Memo Item

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

Mailing Address 6325 N Sheridan #1902

City Chicago	State IL	Zip Code 60660
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
298.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2018

Transaction ID : SA11AI.9187

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	72.50
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
My Committee

A. Kukreja, Rajiv, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Warren Street #405
 City Jersey City State NJ Zip Code 07302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) CTO
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 08 / 19 / 2018
Transaction ID : SA11AI.8371
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Loewenstern, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1357 Miller Dr.
 City West Hollywood State CA Zip Code 90069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 07 / 22 / 2018
Transaction ID : SA11AI.4986
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. MAYER, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3353 Cesar Chavez St
 City San Francisco State CA Zip Code 94110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Google Occupation (for Individual) Engineer
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 08 / 05 / 2018
Transaction ID : SA11AI.6664
 Amount of Each Receipt this Period
 250.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)
My Committee

A. MAYER, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3353 Cesar Chavez St
 City San Francisco State CA Zip Code 94110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Google Occupation (for Individual) Engineer
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2018
Transaction ID : SA11AI.7016
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MAYER, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3353 Cesar Chavez St
 City San Francisco State CA Zip Code 94110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Google Occupation (for Individual) Engineer
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2018
Transaction ID : SA11AI.8383
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. MAYER, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3353 Cesar Chavez St
 City San Francisco State CA Zip Code 94110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Google Occupation (for Individual) Engineer
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2018
Transaction ID : SA11AI.8973
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
My Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. McEvoy, Nion, , ,		Date of Receipt MM / DD / YYYY 08 / 05 / 2018
Mailing Address 101 Jordan Avenue		Transaction ID : SA11AI.7024
City San Francisco	State CA	Zip Code 94118
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Chronicle Books	Occupation (for Individual) Publisher	<input type="checkbox"/> Memo Item
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pakula, William, , ,		Date of Receipt MM / DD / YYYY 08 / 12 / 2018
Mailing Address PO Box 231474		Transaction ID : SA11AI.7592
City Centreville	State VA	Zip Code 20120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Retired Military	Occupation (for Individual) Retired Military	<input type="checkbox"/> Memo Item
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pakula, William, , ,		Date of Receipt MM / DD / YYYY 08 / 12 / 2018
Mailing Address PO Box 231474		Transaction ID : SA11AI.7762
City Centreville	State VA	Zip Code 20120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Retired Military	Occupation (for Individual) Retired Military	<input type="checkbox"/> Memo Item
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
My Committee

A. Porter, Jay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1207 W Roscoe St
 City Chicago State IL Zip Code 60657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Revere Occupation (for Individual) CEO
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2018
Transaction ID : SA11AI.5955
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Rhodes, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 Waban Hill Rd.
 City CHESTNUT HILL State MA Zip Code 02467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Epizyme Occupation (for Individual) Biotech
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2018
Transaction ID : SA11AI.7180
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Schwartz, Leslie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 Pound Hollow Road
 City Glen Head State NY Zip Code 11545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2018
Transaction ID : SA11AI.5652
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
My Committee

A. Shorr, Amy, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1423 McCollum Street

City Los Angeles	State CA	Zip Code 90026
---------------------	-------------	-------------------

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

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2018

Transaction ID : SA11AI.7225

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 3659 Ocean View Ave

City Los Angeles	State CA	Zip Code 90066-3158
---------------------	-------------	------------------------

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

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2018

Transaction ID : SA11AI.6442

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 5 Sands Lane

City Port Jefferson	State NY	Zip Code 11777
------------------------	-------------	-------------------

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

Name of Employer (for Individual) smb capital	Occupation (for Individual) trader
--	---------------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2018

Transaction ID : SA11AI.5518

Amount of Each Receipt this Period
250.00

Memo Item

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 17 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
My Committee

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wulff, Gina, , ,

Mailing Address 136 Waverly Pl

City Mountain View	State CA	Zip Code 94040
-----------------------	-------------	-------------------

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

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2018

Transaction ID : SA11AI.6236

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	10772.50

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

My Committee

Full Name (Last, First, Middle Initial)

A. Act Blue

Mailing Address PO Box 441146

City
Somerville

State
MA

Zip Code
02144

Purpose of Disbursement
Fundraising Expenses

003

Category/
Type

Candidate Name

My Committee

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	8

FEC Identification Number

C00667667

Transaction ID : SB21B.9261

Amount of Each Disbursement this Period

2648.92

Memo Item

Full Name (Last, First, Middle Initial)

B. Between Friends

Mailing Address 2903 Forestview Ct.

City
Chesapeake

State
VA

Zip Code
23321

Purpose of Disbursement
Video Production

004

Category/
Type

Candidate Name

My Committee

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C00667667

Transaction ID : SB21B.9292

Amount of Each Disbursement this Period

1350.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Blue Deal LLC

Mailing Address PO Box 50

City
Annandale

State
VA

Zip Code
22003

Purpose of Disbursement
Fundraising Advertisement on Occupy Democrats Facebook Page

003

Category/
Type

Candidate Name

My Committee

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C00667667

Transaction ID : SB21B.9285

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

4998.92

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

My Committee

Full Name (Last, First, Middle Initial)

A. Chadwick Creative

Mailing Address 12636 Sunset Avenue
Suite E5

City Ocean City State MD Zip Code 21842

Purpose of Disbursement
Graphics for Fundraising

003

Category/
Type

Candidate Name

My Committee

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2018

FEC Identification Number

C C00667667

Transaction ID : SB21B.9270

Amount of Each Disbursement this Period

825.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Chadwick Creative

Mailing Address 12636 Sunset Avenue
Suite E5

City Ocean City State MD Zip Code 21842

Purpose of Disbursement
Graphics for Fundraising

003

Category/
Type

Candidate Name

My Committee

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2018

FEC Identification Number

C C00667667

Transaction ID : SB21B.9280

Amount of Each Disbursement this Period

495.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Groundbase 'Solidarity Company'

Mailing Address 3524 Navajo Street Unit 102

City Denver State CO Zip Code 80211

Purpose of Disbursement
Millennial Voter Registration Outreach and Text Banking

007

Category/
Type

Candidate Name

My Committee

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2018

FEC Identification Number

C C00667667

Transaction ID : SB21B.9287

Amount of Each Disbursement this Period

1900.00

Memo Item

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

3220.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

My Committee

Full Name (Last, First, Middle Initial)

A. Knight, Ryan, , ,

Mailing Address 6440 Langdon Ave

City
Los Angeles

State
CA

Zip Code
91406

Purpose of Disbursement
Salary for Build the Wave

001

Category/
Type

Candidate Name

My Committee

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	8

FEC Identification Number

C00667667

Transaction ID : SB21B.9274

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Knight, Ryan, , ,

Mailing Address 6440 Langdon Ave

City
Los Angeles

State
CA

Zip Code
91406

Purpose of Disbursement
Salary for Ryan Knight

001

Category/
Type

Candidate Name

My Committee

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C00667667

Transaction ID : SB21B.9277

Amount of Each Disbursement this Period

4000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Knight, Ryan, , ,

Mailing Address 6440 Langdon Ave

City
Los Angeles

State
CA

Zip Code
91406

Purpose of Disbursement
Salary for Ryan Knight

001

Category/
Type

Candidate Name

My Committee

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C00667667

Transaction ID : SB21B.9279

Amount of Each Disbursement this Period

3000.00

Memo Item

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

8500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

My Committee

Full Name (Last, First, Middle Initial)

A. Lerner, Nate, , ,

Mailing Address 240 Kent Ave #B19

City
Brooklyn

State
NY

Zip Code
11249

Purpose of Disbursement
Salary for Nate Lerner

001

Candidate Name

My Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	8

FEC Identification Number

C C00667667

Transaction ID : SB21B.9272

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Lerner, Nate, , ,

Mailing Address 240 Kent Ave #B19

City
Brooklyn

State
NY

Zip Code
11249

Purpose of Disbursement
Salary for Nate Lerner

001

Candidate Name

My Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C C00667667

Transaction ID : SB21B.9276

Amount of Each Disbursement this Period

6000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Lerner, Nate, , ,

Mailing Address 240 Kent Ave #B19

City
Brooklyn

State
NY

Zip Code
11249

Purpose of Disbursement
Salary for Nate Lerner

001

Candidate Name

My Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C C00667667

Transaction ID : SB21B.9278

Amount of Each Disbursement this Period

3000.00

Memo Item

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

11500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

My Committee

Full Name (Last, First, Middle Initial)

A. SendGrid

Mailing Address 1801 California St Suite 500

City
Denver

State
CO

Zip Code
80202

Purpose of Disbursement
Sending Q3 Fundraising Emails

003

Category/
Type

Candidate Name

My Committee

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2018

FEC Identification Number

C00667667

Transaction ID : SB21B.9283

Amount of Each Disbursement this Period

632.88

Memo Item

Full Name (Last, First, Middle Initial)

B. TD Bank

Mailing Address 32 Chesnut St. PO Box 1377

City
Lewiston

State
ME

Zip Code
04243

Purpose of Disbursement
Wire Transfer, Payroll and Banking fees for Q3

001

Category/
Type

Candidate Name

My Committee

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2018

FEC Identification Number

C00667667

Transaction ID : SB21B.9281

Amount of Each Disbursement this Period

230.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Upwork

Mailing Address 441 Logue Avenue

City
Mountain View

State
CA

Zip Code
94043

Purpose of Disbursement
Hired consultant to assist with text banking

001

Category/
Type

Candidate Name

My Committee

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2018

FEC Identification Number

C00667667

Transaction ID : SB21B.9290

Amount of Each Disbursement this Period

1089.15

Memo Item

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

1952.03

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

30170.95

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) My Committee
FEC IDENTIFICATION NUMBER C C00667667

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Groundbase 'Solidarity Company'
Mailing Address 3524 Navajo Street Unit 102
City Denver State CO Zip Code 80211
Purpose of Expenditure Voter Data for Text messages supporting Danny O'Connor
Category/Type 006
Date of Public Distribution/Dissemination 08/06/2018
Amount 3608.75
Transaction ID: SE.9265
Date of Disbursement or Obligation 08/06/2018

Name of Federal Candidate: O'CONNOR, DANIEL JAY, , ,
Support Oppose
Office Sought: House District: 12
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 3608.75
Disbursement For: Other (specify) Special-General

Full Name of Payee Resistance Labs 'Public Results' LLC
Mailing Address 2055 Lombard Street #0513
City San Francisco State CA Zip Code 94147
Purpose of Expenditure GOTV Texts to support Danny O'Connor for Congress
Category/Type 004
Date of Public Distribution/Dissemination 08/06/2018
Amount 12000.00
Transaction ID: SE.9268
Date of Disbursement or Obligation 08/06/2018

Name of Federal Candidate: O'CONNOR, DANIEL JAY, , ,
Support Oppose
Office Sought: House District: 12
President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 15608.75
Disbursement For: Other (specify) Special-General

(a) SUBTOTAL of Itemized Independent Expenditures 15608.75
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 15608.75

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.

Lerner, Nate, , ,

[Electronically Filed]

Date 10/15/2018

Signature