

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 Mary McMillan


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 <br> Use <br> Only |  |  |  |  |  | FEC FORM 3X <br> Rev. 12/2004 |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |

FEC Form 3X (Rev. 02/2003)

## Write or Type Committee Name <br> Peninsula PAC



| COLUMN A | COLUMN B |
| :---: | :---: |
| This Period | Calendar Year-to-Date |

6. (a) Cash on Hand January 1,

| Y-r |
| :---: |
| 2015 |

(b) Cash on Hand at

Beginning of Reporting Period. $\qquad$

(c) Total Receipts (from Line 19) $\qquad$

19500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines
6(a) and 6(c) for Column B) $\qquad$

7. Total Disbursements (from Line 31) $\qquad$




9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
0.00
10. Debts and Obligations Owed BY the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
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

## Write or Type Committee Name

Peninsula PAC

| I. Receipts |
| :--- |
| Report Covering the Period: From: |

19. Total Receipts (add Lines 11(d),
$12,13,14,15,16,17$, and 18(c)) ......... $\square$

| 19500.00 |
| :---: | :---: |
| -19500.00 |

20. Total Federal Receipts
(subtract Line 18(c) from Line 19) ..........


FEC Form 3X (Rev. 02/2003)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$
(ii) Non-Federal Share. $\qquad$
(b) Other Federal Operating Expenditures $\qquad$
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) $\qquad$ ....
22. Transfers to Affiliated/Other Party Committees
23. Contributions to

Federal Candidates/Committees and Other Political Committees. $\qquad$
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(2 U.S.C. §441a(d))
(use Schedule F)... $\qquad$
26. Loan Repayments Made $\qquad$
27. Loans Made
28. Refunds of Contributions To:
(a) Individuals/Persons Other Than Political Committees $\qquad$
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs)..
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))...........
29. Other Disbursements $\qquad$

|  | 0.00 |
| :---: | :---: |
| $, \quad, 0.00$ |  |


|  | 0.00 |
| :---: | :---: |
|  | 0.00 |

30. Federal Election Activity (2 U.S.C. §431(20))
(a) Allocated Federal Election Activity (from Schedule H6)
(i) Federal Share $\qquad$
(ii) "Levin" Share. $\qquad$
(b) Federal Election Activity Paid Entirely With Federal Funds $\qquad$
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).
.... $\downarrow$

|  | 0.00 |
| :---: | :---: |
|  | 0.00 |
|  | , 0.00 |
|  | 0.00 |


|  | 0.00 |
| :---: | :---: |
|  | 0.00 |
|  | ,$\quad 0.00$ |
|  | , 0.00 |

31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..

32. Total Federal Disbursements
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).............................................


DETAILED SUMMARY PAGE
of Disbursements

Page 5
FEC Form 3X (Rev. 02/2003)

## III. Net Contributions/Operating Expenditures

33. Total Contributions (other than loans) (from Line 11(d), page 3)
34. Total Contribution Refunds (from Line 28(d))
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))
37. Offsets to Operating Expenditures (from Line 15, page 3) $\qquad$
38. Net Operating Expenditures (subtract Line 37 from Line 36) $\qquad$

COLUMN A Total This Period

COLUMN B Calendar Year-to-Date


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

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

FOR LINE NUMBER: $\quad$ PAGE 6 OF 26 (check only one)


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)
Peninsula PAC

| Full Name (Last, First, Middle Initial)A. Kim Koontz Bayliss |  | Date of Receipt |
| :---: | :---: | :---: |
| Mailing Address 3214 Klingle Road, NW |  | M / D D |
| City | State Zip Code | Transaction ID : INCA648 |
| Washington | DC 20008 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer <br> Grayling | Occupation <br> Managing Principal |  |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date |  |


| Full Name (Last, First, Middle Initial) <br> B. Ari Fitzgerald |  | Date of Receipt |
| :---: | :---: | :---: |
| Mailing Address 9210 Midwood Road |  |  |
| City | State Zip Code |  |
| Silver Spring | MD 20910 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $250.00$ |
| Name of Employer Hogan Lovells | Occupation <br> Partner |  |
|  | Aggregate Year-to-Date $\square$ |  |

Full Name (Last, First, Middle Initial)
C. Nick Kolovos

Mailing Address 1634 I Street, NW, \#1200

| City <br> Washington | State <br> DC | Zip Code <br> 20006 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| Ryan, MacKinnon, Vasapoli \& Berzok LLP | Partner |  |

Date of Receipt


Transaction ID : INCA649
Amount of Each Receipt this Period
250.00
$0,1500.00$

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

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

FOR LINE NUMBER: $\quad$ PAGE 7 OF 26 (check only one)


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NAME OF COMMITTEE (In Full)
Peninsula PAC

| Full Name (Last, First, Middle Initial) <br> A. R. Gerard Salemme |  | Date of Recei |
| :---: | :---: | :---: |
| Mailing Address 4409 36th Street, North |  |  |
| City | State Zip Code | Transaction ID : INCA635 |
| Arlington | VA 22207 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $500.00$ |
| Name of Employer <br> Pendrell Corporation | Occupation <br> Chief Strategy Officer |  |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date |  |

B.

Mailing Address
City $\quad$ State $\quad$ Zip Code

FEC ID number of contributing
federal political committee.

| Name of Employer | Occupation |
| :--- | :--- |
| Receipt For: |  |
| $\square$Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{\nabla}$ | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |

Date of Receipt


Amount of Each Receipt this Period
$\square$

Date of Receipt


Amount of Each Receipt this Period


An

FEC ID number of contributing federal political committee.

Name of Employer



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

Mailing Address

| City | State Zip Code |
| :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |
| Name of Employer | Occupation |
| Receipt For:  <br> $\square$ Primary $\square$ General <br> Other (specify) $\boldsymbol{\nabla}$  |  |


| SUBTOTAL of Receipts This Page (optional)................................................................ | 500.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)......................................................... | $2000.00$ |

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

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

FOR LINE NUMBER: $\quad$ PAGE 8 OF 26 (check only one)


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NAME OF COMMITTEE (In Full)
Peninsula PAC

| Full Name (Last, First, Middle Initial) |  |  |
| :---: | :---: | :---: |
| A. Charter Communications, Inc. PAC |  | Date of Receipt |
| Mailing Address 400 Atlantic Street, 10th Floor |  | M-M / D-D , Y-Y-Y-Y |
| City Stamford | State Zip Code | Transaction ID : INCA647 |
|  | CT 06901 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $1000.00$ |
| Name of Employer | Occupation |  |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ <br> 1000.00 |  |



Date of Receipt


Transaction ID : INCA631
Amount of Each Receipt this Period
1500.00


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

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

FOR LINE NUMBER: $\quad$ PAGE 9 OF 26 (check only one)


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NAME OF COMmITTEE (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)

| Full Name (Last, First, Middle Initial) |  |  |
| :---: | :---: | :---: |
| A. Echostar Corporation and Dish Network Corporation PAC |  | Date of Receipt |
| Mailing Address 1110 Vermont Avenue, NW, \#750 |  | M-M / D D / Y Y Y Y Y |
| City | State Zip Code | Transaction ID : INCA632 |
| Washington | DC 20005 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1500.00 |
| Name of Employer | Occupation |  |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ Other (specify) $\nabla$ | Aggregate Year-to-Date $\square$ <br> 1500.00 |  |

Full Name (Last, First, Middle Initial)
B. iHeartMedia, Inc. - Clear Channel Outdoor PAC

Mailing Address 200 East Bass Road

| City | State Zip Code |
| :---: | :---: |
| San Antonio | TX 78209 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
|  | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : INCA651
Amount of Each Receipt this Period
$\square 1500.00$

Date of Receipt
c. Level 3 Communications, Inc. Political Action Committee

Mailing Address 1025 El Dorado Blvd.

| City <br> Broomfield | State <br> CO | Zip Code <br> 80021 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| Receipt For: |  |  |
| $\square$ Primary $\square$ General | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |  |
| $\square$ Other (specify) $\boldsymbol{V}$ |  |  |



Transaction ID : INCA652
Amount of Each Receipt this Period
1000.00
$0,4000.00$

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

| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) |  |  | PAGE 10 OF 26 |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | $\square \begin{aligned} & 11 a \\ & 13 \end{aligned}$ | $11 \mathrm{~b}$ | X 1 |  |  |  |  |  |

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NAME OF COMMITTEE (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)

| Full Name (Last, First, Middle Initial) <br> A. National Cable and Telecommunications Association PAC (NCTA PAC) |  | Date of Receipt <br> 06 <br> 15 <br> 2015 <br> Transaction ID : INCA636 |
| :---: | :---: | :---: |
|  |  |  |
| City | State Zip Code |  |
| Washington | DC 20001 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $2000.00$ |
| Name of Employer | Occupation |  |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ Other (specify) $\nabla$ | Aggregate Year-to-Date $2000.00$ |  |

Full Name (Last, First, Middle Initial)
B. PG\&E Corporation Employees EnergyPAC

Mailing Address 77 Beale Street, Mail Code: B29H

| City <br> San Francisco | State <br> CA | Zip Code <br> 94177 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| Receipt For: <br> $\square$ <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ | Aggregate Year-to-Date $\mathbf{\nabla}$ |  |

Date of Receipt


Transaction ID : INCA633
Amount of Each Receipt this Period
1500.00


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

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

FOR LINE NUMBER: PAGE 11 OF 26 (check only one)


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NAME OF COMMITTEE (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)

| Full Name (Last, First, Middle Initial) |  |  |
| :---: | :---: | :---: |
| A. Sprint Corporation Political Action Committee |  | Date of Receipt |
| Mailing Address 12502 Sunrise Valley Drive |  | M-M / DED / Y Y Y Y Y |
| City | State Zip Code | Transaction ID : INCA650 |
| Reston | VA 20196 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $1000.00$ |
| Name of Employer | Occupation |  |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ <br> 1000.00 |  |

Full Name (Last, First, Middle Initial)
B. Time Warner Cable Federal PAC

Mailing Address 901 F Street, \#800

| City <br> Washington | State <br> DC |
| :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | Zip Code <br> 20004 |
| Name of Employer | C |

Date of Receipt


Transaction ID : INCA637
Amount of Each Receipt this Period
2500.00

Date of Receipt
Full Name (Last, First, Middle Initial)
c. T-Mobile USA, Inc. Political Action Committee (T-PAC)
Mailing Address 601 Pennsylvania Ave., NW, \#800N

| City <br> Washington | State <br> DC | Zip Code <br> 20004 |
| :--- | :---: | :---: |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| Receipt For: |  |  |
| $\square$Primary <br> Other (specify) $\boldsymbol{V}$ | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |  |



Transaction ID : INCA646
Amount of Each Receipt this Period
1000.00


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

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

FOR LINE NUMBER: PAGE 12 OF 26 (check only one)


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NAME OF COMMITTEE (In Full)
Peninsula PAC

| Full Name (Last, First, Middle Initial) <br> A. XO Communications PAC |  | Date of Receipt |
| :---: | :---: | :---: |
| Mailing Address 13865 Sunrise Valley Drive |  | M-M / D D ' Y Y Y Y |
| City Herndon | State Zip Code <br> VA 20171 | Transaction ID : INCA653 |
|  |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  | $1000.00$ |
| Name of Employer | Occupation |  |
|  | Aggregate Year-to-Date |  |
| Full Name (Last, First, Middle Initial) |  | Date of Receipt |
| B. |  |  |
| Mailing Address |  | M-M / DD D / $\mathrm{Y}-\mathrm{Y}-\mathrm{Y}-\mathrm{Y}$ |
| City State Zip Code |  |  |
|  |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  |  |
| Name of Employer ${ }^{\text {accupation }}$ |  |  |
|  | Aggregate Year-to-Date |  |
| Full Name (Last, First, Middle Initial) |  |  |
| C. |  | Date of Receipt |
| Mailing Address |  |  |
| City State Zip Code |  |  |
|  |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  | - , \\| , \| \| |
| Name of Employer ${ }^{\text {a }}$ Occupation |  |  |
|  | Aggregate Year-to-Date |  |
| SUBTOTAL of Receipts This Page (optional)................................................................ |  | 1000.00  <br> , 17500.00 |
| 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: $\quad$ PAGE 13 OF 26 (check only one)


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```
    NAME OF COMMITTEE (In Full)
    Peninsula PAC
```

Full Name (Last, First, Middle Initial)
A. Fiorello Consulting


Full Name (Last, First, Middle Initial)
B. Fiorello Consulting

| Mailing Address 3914 Barcroft Mews Court |  |  |  | 01 28 2015 |
| :---: | :---: | :---: | :---: | :---: |
| City <br> Falls Church |  | State Zip Code <br> VA 22041 |  | Transaction ID : EXPB603 <br> Amount of Each Disbursement this Period |
| Purpose of Disb Fundraising C | rsement sulting |  | 003 |  |
| Candidate Nam |  |  | Category/ Type | $1500.00$ |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |  |

Full Name (Last, First, Middle Initial)
C. Fiorello Consulting

| Mailing Address 3914 Barcroft Mews Court |  |  |  |
| :---: | :---: | :---: | :---: |
| City |  | State Zip Code |  |
| Falls Church |  | VA 22041 |  |
| Purpose of Disbursement Fundraising Consulting |  |  | 003 |
| Candidate Name |  |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |

Date of Disbursement


Transaction ID : EXPB610

Amount of Each Disbursement this Period


SUBTOTAL of Disbursements This Page (optional)
$0,4500.00$

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



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NAME OF COMMITTEE (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)
A. Fiorello Consulting

| Mailing Address 3914 Barcroft Mews Court |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| City <br> Falls Church |  | State Zip Code <br> VA 22041 |  | Transaction ID : EXPB614 <br> Amount of Each Disbursement this Period |
| Purpose of Dis Fundraising | sement ulting |  | 003 |  |
| Candidate Nam |  |  | Category/ Type | $1500.00$ |
| Office Sought: <br> State: | $\square$ House <br> Senate <br> $\square$ President |  |  |  |

Full Name (Last, First, Middle Initial)
B. Fiorello Consulting


Full Name (Last, First, Middle Initial)
C. Fiorello Consulting

| Mailing Address 3914 Barcroft Mews Court |  |  |  |
| :---: | :---: | :---: | :---: |
| City State Zip Code <br> Falls Church VA 22041 <br> Purpose of Disbursement   <br> Fundraising Consulting   |  |  |  |
|  |  |  |  |
|  |  |  | 003 |
| Candidate Nam |  |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |

Date of Disbursement


## Transaction ID : EXPB626

Amount of Each Disbursement this Period


| SUBTOTAL of Disbursements This Page (optional)........................................................ | $4500.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)....................................................... | , |

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



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NAME OF COMMITTEE (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)
A. Fiorello Consulting


Full Name (Last, First, Middle Initial)
B. Hughes \& Company

| Mailing Address 555 Bryant Street, \#241 |  |  |  | 01 09 2015 |
| :---: | :---: | :---: | :---: | :---: |
| City <br> Palo Alto |  | State Zip Code <br> CA 94301 |  | Transaction ID : EXPB594 <br> Amount of Each Disbursement this Period |
| Purpose of Disbursement Political Strategy and Consulting |  |  | $001$ |  |
| Candidate Name |  |  | Category/ Type | 1500.00 |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |  |

Full Name (Last, First, Middle Initial)
C. Hughes \& Company

| Mailing Address 555 Bryant Street, \#241 |  |  |  |
| :---: | :---: | :---: | :---: |
| City |  | State Zip Code |  |
| Palo Alto |  | CA 94301 |  |
| Purpose of Disbursement Political Strategy and Consulting |  |  | 001 |
| Candidate Name |  |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President | Disbursement For: Primary General Other (specify) |  |

Date of Disbursement


## Transaction ID : EXPB602

Amount of Each Disbursement this Period


SUBTOTAL of Disbursements This Page (optional).
$0,4500.00$

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



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name of committee (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)
A. Hughes \& Company

| Mailing Address 555 Bryant Street, \#241 |  |  |  | 02 26 |
| :---: | :---: | :---: | :---: | :---: |
| City <br> Palo Alto |  | State Zip Code <br> CA 94301 |  | Transaction ID : EXPB609 <br> Amount of Each Disbursement this Period |
| Purpose of Dis Political Strat | ursement and Consulting |  | 001 |  |
| Candidate Nam |  |  | Category/ Type | $1500.00$ |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President <br> District:  | Disbursement For: Primary General Other (specify) |  |  |

Full Name (Last, First, Middle Initial)
B. Hughes \& Company

C. Hughes \& Company

Mailing Address 555 Bryant Street, \#241

| City |  | State Zip Code |  |
| :---: | :---: | :---: | :---: |
| Palo Alto |  | CA 94301 |  |
| Purpose of Dis Political Strate | sement and Consulting |  | 001 |
| Candidate Nam |  |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |

Date of Disbursement


Transaction ID : EXPB618

Amount of Each Disbursement this Period


SUBTOTAL of Disbursements This Page (optional)
$\square, 4500.00$

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



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NAME OF COMMITTEE (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)
A. Hughes \& Company


Full Name (Last, First, Middle Initial)
B. Hughes \& Company

| Mailing Address 555 Bryant Street, \#241 |  |  |  | 06 29 2015 |
| :---: | :---: | :---: | :---: | :---: |
| City <br> Palo Alto |  | State Zip Code <br> CA 94301 |  | Transaction ID : EXPB641 <br> Amount of Each Disbursement this Period |
| Purpose of Disb Political Strate | ursement y and Consulting |  | 001 |  |
| Candidate Nam |  |  | Category/ Type | $1500.00$ |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |  |

Full Name (Last, First, Middle Initial)
C. Occasions Caterers

| Mailing Address 655 Taylor Street, NE |  |  |  |
| :---: | :---: | :---: | :---: |
| City State Zip Code <br> Washington DC 20017 <br> Purpose of Disbursement   <br> Meeting Catering   |  |  |  |
|  |  |  |  |
|  |  |  | 001 |
| Candidate Name |  |  | Category/ Type |
| Office Sought: <br> State: | $\square$ House <br> Senate ,President |  |  |

Date of Disbursement


## Transaction ID : EXPB600

Amount of Each Disbursement this Period
$\square \quad 354.26$

SUBTOTAL of Disbursements This Page (optional) $\qquad$

|  | 3354.26 |
| :---: | :---: |

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



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NAme of committee (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)
A. Occasions Caterers


Full Name (Last, First, Middle Initial)
B. Olson Hagel \& Fishburn LLP

| Mailing Address 555 Capitol Mall, \#1425 |  |  |  | 01 15 2015 |
| :---: | :---: | :---: | :---: | :---: |
| City Sacramento |  | State Zip Code <br> CA 95814 |  | Transaction ID : EXPB595 <br> Amount of Each Disbursement this Period |
| Purpose of Disbursement Legal and Reporting Services |  |  | 001 |  |
| Candidate Name |  |  | Category/ Type | $909.11$ |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |  |

c. Olson Hagel \& Fishburn LLP

| Mailing Address 555 Capitol Mall, \#1425 |  |  |  |
| :---: | :---: | :---: | :---: |
| City |  | State Zip Code |  |
| Sacramento |  | CA 95814 |  |
| Purpose of Disbursement Legal and Reporting Services |  |  | 001 |
| Candidate Name |  |  | Category/ Type |
| Office Sought: <br> State: | $\square$ House <br> Senate <br> $\square$ President |  |  |

Date of Disbursement


## Transaction ID : EXPB606

Amount of Each Disbursement this Period
$\square \quad 858.40$

SUBTOTAL of Disbursements This Page (optional)
$\square, 2952.46$

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



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NAME OF COMMITTEE (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)
A. Olson Hagel \& Fishburn LLP

| Mailing Address 555 Capitol Mall, \#1425 |  |  |  |
| :---: | :---: | :---: | :---: |
| City <br> Sacramento |  | State Zip Code <br> CA 95814 |  |
|  |  |  |  |
| Purpose of Disbursement Legal and Reporting Services |  |  | 001 |
| Candidate Nam |  |  | Category/ Type |
| Office Sought: <br> State: | $\square$ House <br> Senate <br> $\square$ President |  |  |

Date of Disbursement

| $03$ | , | 13 | ' | $2015$ |
| :---: | :---: | :---: | :---: | :---: |

## Transaction ID : EXPB612

Amount of Each Disbursement this Period
$\square \quad 838.70$

Date of Disbursement

| $04$ | $\begin{array}{r} D \quad D \\ 15 \end{array}$ | $2015$ |
| :---: | :---: | :---: |

## Transaction ID : EXPB617

Amount of Each Disbursement this Period
$\square 358.50$

Date of Disbursement

| $05$ | $\begin{gathered} D \quad D \\ 15 \end{gathered}$ | $\begin{array}{ll} Y & Y \\ 2015 \end{array}$ |
| :---: | :---: | :---: |
|  |  |  |

Transaction ID : EXPB623

Amount of Each Disbursement this Period
$\square \quad 243.70$

| SUBTOTAL of Disbursements This Page (optional)........................................................ | 1440.90 |
| :---: | :---: |
| 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: $\quad$ PAGE 20 OF 26 (check only one)

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name of committee (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)
A. Olson Hagel \& Fishburn LLP

| Mailing Address 555 Capitol Mall, \#1425 |  |  |  |
| :---: | :---: | :---: | :---: |
| City <br> Sacramento |  | State Zip Code <br> CA 95814 |  |
|  |  |  |  |
| Purpose of Disbursement Legal and Reporting Services |  |  | 001 |
| Candidate Nam |  |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |

Date of Disbursement

| 06 | $15$ | 2015 |
| :---: | :---: | :---: |

## Transaction ID : EXPB630

Amount of Each Disbursement this Period
$\square \quad 358.19$

Date of Disbursement


Transaction ID : EXPB608

Amount of Each Disbursement this Period
$\square 900.00$

Date of Disbursement


Transaction ID : EXPB605

Amount of Each Disbursement this Period
$\square \quad 35.00$

State:
District:
State Zip Code
Sacramento CA 95814

| Purpose of Disbursement Bank Fee |  |  | 001 |
| :---: | :---: | :---: | :---: |
| Candidate Name |  |  |  |
| Office Sought: | House |  |  |
|  | Senate |  |  |
|  | President |  |  |
| State: | District: |  |  |

$\square, 1293.19$

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

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

FOR LINE NUMBER: $\quad$ PAGE 21 OF 26 (check only one)

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NAME OF COMMITTEE (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)
A. Wells Fargo Bank

| Mailing Address 400 Capitol Mall |  |  |  |
| :---: | :---: | :---: | :---: |
| City <br> Sacramento |  | State Zip Code <br> CA 95814 |  |
|  |  |  |  |
| Purpose of Disbursement Bank Fee |  |  | 001 |
| Candidate Name |  |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Senate <br>   <br> President  |  |  |
| Full Name (Last, First, Middle Initial) Wells Fargo Bank |  |  |  |

Date of Disbursement

| Mailing Addres | 400 Capitol Mall |  |  | 03 11 2015 |
| :---: | :---: | :---: | :---: | :---: |
| City <br> Sacramento |  | State Zip Code <br> CA 95814 |  | Transaction ID : EXPB616 <br> Amount of Each Disbursement this Period |
| Purpose of Dis Bank Fee | ursement |  | 001 |  |
| Candidate Nam |  |  | Category/ Type | $35.00$ |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |  |

Full Name (Last, First, Middle Initial)
C. Wells Fargo Bank

| Mailing Address 400 Capitol Mall |  |  |  |
| :---: | :---: | :---: | :---: |
| City <br> Sacramento |  | State Zip Code <br> CA 95814 |  |
|  |  |  |  |
| Purpose of Disbursement Bank Fee |  |  | 001 |
| Candidate Name |  |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |

Date of Disbursement


Transaction ID : EXPB620

Amount of Each Disbursement this Period
$\square 35.00$

| SUBTOTAL of Disbursements This Page (optional)........................................................ | $105.00$ |
| :---: | :---: |
| 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: $\quad$ PAGE 22 OF 26 (check only one)

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NAME OF COMMITTEE (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)
A. Wells Fargo Bank

| Mailing Address 400 Capitol Mall |  |  |  |
| :---: | :---: | :---: | :---: |
| City <br> Sacramento |  | State Zip Code <br> CA 95814 |  |
|  |  |  |  |
| Purpose of Disbursement Bank Fee |  |  | 001 |
| Candidate Name |  |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |
| Full Name (Last, First, Middle Initial) Wells Fargo Bank |  |  |  |

Date of Disbursement

| Mailing Addres | 400 Capitol Mall |  |  | 06 10 2015 |
| :---: | :---: | :---: | :---: | :---: |
| City <br> Sacramento |  | State Zip Code <br> CA 95814 |  | Transaction ID : EXPB654 <br> Amount of Each Disbursement this Period |
| Purpose of Dis Bank Fee | ursement |  | 001 |  |
| Candidate Nam |  |  | Category/ Type | $35.00$ |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |  |

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

Mailing Address


Date of Disbursement


Amount of Each Disbursement this Period


| SUBTOTAL of Disbursements This Page (optional)........................................................ | , 70.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)....................................................... | $27215.81$ |

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

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


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NAME OF COMMITTEE (In Full)
Peninsula PAC
Full Name (Last, First, Middle Initial)
A. Boyle, Citizens for

| Mailing Address 499 S. Capitol St | W, \#422 |  | 06 24 2015 |
| :---: | :---: | :---: | :---: |
| City <br> Washington | State Zip Code <br> DC 20003 |  | Transaction ID : EXPB638 |
| Purpose of Disbursement Contribution |  | 011 | Amount of Each Disbursement this Period |
| Candidate Name Brendan Boyle |  | Category/ Type | $5000.00$ |
| Office Sought: X House <br> Senate <br> Sent   <br> President   |  |  |  |

Full Name (Last, First, Middle Initial)
B. Fattah for Congress


Full Name (Last, First, Middle Initial)
C. Hastings for Congress

| Mailing Address P.O. Box 100277 |  |  |
| :---: | :---: | :---: |
| City | State Zip Code |  |
| Fort Lauderdale | FL 33310 |  |
| Purpose of Disbursement Check uncashed |  | 011 |
| Candidate Name Alcee Hastings |  | Category/ Type |
| Office Sought: $X$House <br> Senate <br> President <br> State: FL District: 20 |  |  |

Date of Disbursement

| M. M | $\begin{array}{ll} D \\ 0 \\ 0 \end{array}$ | $\begin{array}{ll} Y & Y \\ 2015 \end{array}$ |
| :---: | :---: | :---: |
|  |  |  |

## Transaction ID : EXPB628

Amount of Each Disbursement this Period
$\square-1000.00$

| SUBTOTAL of Disbursements This Page (optional)....................................................... | $9000.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

##  <br> Form/Schedule: SB23 <br> Transaction ID : EXPB628

Check uncashed; see July 20, 2014 Monthly Report

Form/Schedule:
Transaction ID:

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



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```
NAME OF COMMITTEE (In Full)
Peninsula PAC
```

Full Name (Last, First, Middle Initial)
A. Hastings for Congress


Full Name (Last, First, Middle Initial)
B. Thompson for Congress, Mike

C. Wilson for Congress, Frederica S.


Date of Disbursement

| $\begin{gathered} M \\ 06 \end{gathered}$ | , | 26 |  | 2015 |
| :---: | :---: | :---: | :---: | :---: |

## Transaction ID : EXPB640

Amount of Each Disbursement this Period
$\square 1000.00$

| SUBTOTAL of Disbursements This Page (optional).......................................................... | 4700.00 |  |
| :--- | :--- | :--- |
| TOTAL This Period (last page this line number only)........................................................... |  | 13700.00 |

## SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

## Excluding Loans

| (Use separate <br> schedule(s) <br> for each | FOR LINE NUMBER: <br> (check only one) | $\boxed{y} 9$ |
| :---: | :--- | :--- | :--- | :--- |
| numbered line) |  |  |

nAme of committee (In Full) Peninsula PAC


