

# 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

L PAC

ADDRESS (number and street) 1001 G Street, NW  
Suite 800  
 Check if different than previously reported. (ACC) Washington DC 20001

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

C C00519413

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 11 / 29 / 2016 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2016

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

Rosen, Hilary, , ,

Type or Print Name of Treasurer

Signature of Treasurer Rosen, Hilary, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 31 / 2017

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

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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

L PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="92680.76"/>	<input type="text" value="92680.76"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="119065.56"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2445.32"/>	<input type="text" value="1279623.57"/>
(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="121510.88"/>	<input type="text" value="1372304.33"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="55688.62"/>	<input type="text" value="1306482.07"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="65822.26"/>	<input type="text" value="65822.26"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

**L PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
11 / 29 / 2016 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2016

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).....	290.32	91885.52
(ii) Unitemized .....	45.00	6394.01
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	335.32	98279.53
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	11147.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	335.32	109426.53
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	35616.82
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2110.00	1132080.22
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)).....▶	2445.32	1279623.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2445.32	1279623.57

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1996.79	158754.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1996.79	158754.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	138994.72
24. Independent Expenditures (use Schedule E) .....	0.00	27022.27
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).....	52691.83	981710.39
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)) ..	55688.62	1306482.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	55688.62	1306482.07

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	335.32	109426.53
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	335.32	109426.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1996.79	158754.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	35616.82
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1996.79	123137.87

**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 24
	<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Filardi, Del, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1203  
 PO Box1203  
 City Truro State MA Zip Code 02666-1203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Sculptor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2016  
**Transaction ID : VNW3HF0M2K7**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. York, Beverly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 Bean Creek Rd  
 Unit 35  
 City Scotts Valley State CA Zip Code 95066-4136  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 262.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2016  
**Transaction ID : VNW3HF0N1W2**  
 Amount of Each Receipt this Period  
 20.16  
 Memo Item

**C. York, Beverly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 Bean Creek Rd  
 Unit 35  
 City Scotts Valley State CA Zip Code 95066-4136  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 262.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2016  
**Transaction ID : VNW3HF0N237**  
 Amount of Each Receipt this Period  
 20.16  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	290.32
<b>TOTAL</b> This Period (last page this line number only).....	290.32

**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 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Felicio, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39 Westchester Rd  
 Address Line 2  
 City Jamaica Plain State MA Zip Code 02130-3451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Community Catalyst Occupation (for Individual) Fundraiser  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2016  
**Transaction ID : VNW3HF0FCM7**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non Contribution Account

**B. Haycox, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 374 7th St  
 # 403  
 City Jersey City State NJ Zip Code 07302-1805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Habitat for Humanity NYC Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2016  
**Transaction ID : VNW3HF0MCH3**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Non Contribution Account

**C. Hunt, Kim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5514 S Woodlawn Ave  
 City Chicago State IL Zip Code 60637-1636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AIDS Foundation of Chicago Occupation (for Individual) Activist  
 Receipt For:  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  
 11 / 29 / 2016  
**Transaction ID : VNW3HEZSD58**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Non contribution account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	285.00
<b>TOTAL</b> 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 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Lewis, Catherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 Bluhm Rd  
 City Fairport State NY Zip Code 14450-9450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 12 / 08 / 2016  
**Transaction ID : VNW3HF0D1M7**  
 Amount of Each Receipt this Period 5.00  
 Memo Item  
 Non Contribution Account

**B. Newstat, Joyce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 California St # 27  
 City San Francisco State CA Zip Code 94109-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Policy consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 27475.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : VNW3HF0GYX4**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
 Non Contribution Account

**C. Pawlitschek, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1621 65th St Apt D3  
 City Brooklyn State NY Zip Code 11204-3620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-employed, The Jasprizza Group Occupation (for Individual) Communications Training  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : VNW3HF02JM8**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Non Contribution Account

**SUBTOTAL** of Receipts This Page (optional).....▶ 130.00  
**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 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Podlodowski, Tina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1620 7th Ave W  
 City Seattle State WA Zip Code 98119-2919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 08 / 2016**  
**Transaction ID : VNW3HF0D2A0**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non Contribution Account

**B. Podlodowski, Tina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1620 7th Ave W  
 City Seattle State WA Zip Code 98119-2919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **12 / 14 / 2016**  
**Transaction ID : VNW3HF0FJ10**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
 Non Contribution Account

**C. Shepardson, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 79 Warren St Apt 3  
 City New Haven State CT Zip Code 06511-5765  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Yale Occupation (for Individual) Development Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 03 / 2016**  
**Transaction ID : VNW3HF0D7T7**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Non contribution account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	625.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Stark, Martha, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 21 / 2016
Mailing Address 920 Union St Apt 2D			<b>Transaction ID : VNW3HF0MGV1</b>
City Brooklyn	State NY	Zip Code 11215-1619	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Baruch College City University		Occupation (for Individual) Attorney/Professor	Non Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1050.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Thibeault, Kim, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2016
Mailing Address 8 High St Apt 4			<b>Transaction ID : VNW3HF0E522</b>
City Medway	State MA	Zip Code 02053-1654	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self-employed		Occupation (for Individual) Barber	Non Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	1590.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. First Data - Merchant Services**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Western Maryland Pkwy

City Hagerstown State MD Zip Code 21740-5146

Purpose of Disbursement Credit card processing fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2016

FEC Identification Number: C

Transaction ID : VNV499V806!

Amount of Each Disbursement this Period: 262.72

Memo Item

**B. Harmon, Curran, Spielberg & Eisenberg, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1726 M St NW Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement Legal Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 16 / 2016

FEC Identification Number: C

Transaction ID : VNV499V809!

Amount of Each Disbursement this Period: 633.51

Memo Item

**C. PCMS, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1050 17th St NW Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement Accounting services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 16 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80C

Amount of Each Disbursement this Period: 996.88

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1893.11
<b>TOTAL</b> This Period (last page this line number only).....▶	1893.11

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. PRAMILA FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 20753

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2016

City  
Seattle

State  
WA

Zip Code  
98102-1753

FEC Identification Number

Purpose of Disbursement  
Candidate Contribution (debt retirement)

C	C00605592
---	-----------

Candidate Name  
**JAYAPAL, PRAMILA, , ,**

Category/  
Type

**Transaction ID : VNV499V80S**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: WA District: 07

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

1000.00
---------

General Debt 2016

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City

State

Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

--

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City

State

Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

--

Memo Item

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

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

1000.00
---------

1000.00
---------

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net</b>		Date of Disbursement MM / DD / YYYY 12 / 03 / 2016
Mailing Address PO Box 8999		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V7ZS</b> Amount of Each Disbursement this Period [REDACTED] 40.70
City San Francisco	State CA	Zip Code 94128-8999
Purpose of Disbursement Credit card processing fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement MM / DD / YYYY 12 / 07 / 2016
Mailing Address 700 13th St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V7ZT</b> Amount of Each Disbursement this Period [REDACTED] 15.00
City Washington	State DC	Zip Code 20005-3950
Purpose of Disbursement Bank fee		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Carefirst Bluecross/Blueshield</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2016
Mailing Address 840 1st St NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V7ZZ</b> Amount of Each Disbursement this Period [REDACTED] 694.26
City Washington	State DC	Zip Code 20065-0003
Purpose of Disbursement Health Insurance		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

[REDACTED] 749.96

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial)

**A. Carr Workplace**

Mailing Address 1101 Connecticut Ave NW  
Ste 450

City Washington State DC Zip Code 20036-4359

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2016

FEC Identification Number: C

Transaction ID : VNV499V800f

Amount of Each Disbursement this Period: 2814.26

Memo Item

Full Name (Last, First, Middle Initial)

**B. ClickMeeting**

Mailing Address ul. Arkonska 6  
A4 80-387

City Gdansk State Po Zip Code

Purpose of Disbursement website

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : VNV499V801f

Amount of Each Disbursement this Period: 81.37

Memo Item

Full Name (Last, First, Middle Initial)

**C. Collective Conscience, LLC**

Mailing Address 2112 8th St NW  
Apt 524

City Washington State DC Zip Code 20001-8208

Purpose of Disbursement Digital Communications

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 16 / 2016

FEC Identification Number: C

Transaction ID : VNV499V802

Amount of Each Disbursement this Period: 6000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8895.63

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Collective Conscience, LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 16 / 2016
Mailing Address 2112 8th St NW Apt 524		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V803</b> Amount of Each Disbursement this Period 1386.86
City Washington	State DC	Zip Code 20001-8208
Purpose of Disbursement Digital Communications		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. First Data - Merchant Services</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2016
Mailing Address 1 Western Maryland Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V807</b> Amount of Each Disbursement this Period 84.69
City Hagerstown	State MD	Zip Code 21740-5146
Purpose of Disbursement Credit card processing fee		Category/Type [REDACTED]
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Google</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2016
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V808</b> Amount of Each Disbursement this Period 35.00
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Internet		Category/Type [REDACTED]
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1506.55
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Harmon, Curran, Spielberg &amp; Eisenberg, LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 16 / 2016
Mailing Address 1726 M St NW Ste 600		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V80A</b> Amount of Each Disbursement this Period [REDACTED] 366.00
City Washington	State DC	Zip Code 20036-4523
Purpose of Disbursement Legal Fees		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Kaiser HPS</b>		Date of Disbursement MM / DD / YYYY 12 / 01 / 2016
Mailing Address 1615 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V80E</b> Amount of Each Disbursement this Period [REDACTED] 209.66
City Washington	State DC	Zip Code 20036-5610
Purpose of Disbursement Health Insurance		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Kight, Kate, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address 1629 L St NE Unit 303		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V7ZV</b> Amount of Each Disbursement this Period [REDACTED] 1278.14
City Washington	State DC	Zip Code 20002-3055
Purpose of Disbursement Payroll		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

1853.80

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Kight, Kate, , ,</b>			Date of Disbursement MM / DD / YYYY 12 / 15 / 2016	
Mailing Address 1629 L St NE Unit 303			FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V7ZX</b> Amount of Each Disbursement this Period [REDACTED] 1278.14	
City Washington	State DC	Zip Code 20002-3055	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Payroll		Category/ Type 001		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Kight, Kate, , ,</b>			Date of Disbursement MM / DD / YYYY 12 / 30 / 2016	
Mailing Address 1629 L St NE Unit 303			FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V8Y6I</b> Amount of Each Disbursement this Period [REDACTED] 1278.15	
City Washington	State DC	Zip Code 20002-3055	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Payroll		Category/ Type 001		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Maestro Conference</b>			Date of Disbursement MM / DD / YYYY 12 / 13 / 2016	
Mailing Address 1025 3rd St			FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V80F</b> Amount of Each Disbursement this Period [REDACTED] 97.00	
City Oakland	State CA	Zip Code 94607-2507	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Conference line service		Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

2653.29

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Micioni, Maria, , ,</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2016
Mailing Address 68 Bradhurst Ave Apt 7M		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499V80G</b> Amount of Each Disbursement this Period 300.00
City New York	State NY	
Zip Code 10039-3311		Memo Item <input type="checkbox"/>
Purpose of Disbursement Event expense - Interpreter		
Candidate Name		Category/Type <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mida, Jason, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address 526 12th St NE		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499V64Zi</b> Amount of Each Disbursement this Period 10000.00
City Washington	State DC	
Zip Code 20002-6310		Memo Item <input type="checkbox"/>
Purpose of Disbursement Fundraising consultant		
Candidate Name		Category/Type <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. New York Times</b>		Date of Disbursement MM / DD / YYYY 12 / 13 / 2016
Mailing Address 620 8th Ave		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499V80J</b> Amount of Each Disbursement this Period 37.01
City New York	State NY	
Zip Code 10018-1618		Memo Item <input type="checkbox"/>
Purpose of Disbursement Subscription		
Candidate Name		Category/Type <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

10337.01

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Nopa Kitchen</b>		Date of Disbursement MM / DD / YYYY 12 / 13 / 2016	
Mailing Address 800 F St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V80K</b> Amount of Each Disbursement this Period [REDACTED] 578.40	
City Washington	State DC	Zip Code 20004-1505	Category/ Type [REDACTED]
Purpose of Disbursement Meals		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Olive Street Design</b>		Date of Disbursement MM / DD / YYYY 12 / 15 / 2016	
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V80M</b> Amount of Each Disbursement this Period [REDACTED] 25.00	
City Villa Park	State IL	Zip Code 60181-5502	Category/ Type [REDACTED]
Purpose of Disbursement Website services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499V52J</b> Amount of Each Disbursement this Period [REDACTED] 98.20	
City Rochester	State NY	Zip Code 14625-2311	Category/ Type 001
Purpose of Disbursement Payroll processing fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 701.60
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement Payroll taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2016

FEC Identification Number: C

Transaction ID : VNV499V64T

Amount of Each Disbursement this Period: 2369.32

Memo Item

**B. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement Payroll taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80N

Amount of Each Disbursement this Period: 2209.09

Memo Item

**C. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement Payroll processing fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80P

Amount of Each Disbursement this Period: 148.20

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4726.61

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement Payroll processing fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 27 / 2016

FEC Identification Number: C

Transaction ID : VNV499V8YN

Amount of Each Disbursement this Period: 98.20

Memo Item

**B. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement Payroll taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 27 / 2016

FEC Identification Number: C

Transaction ID : VNV499V8YP

Amount of Each Disbursement this Period: 1723.48

Memo Item

**C. PCMS, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1050 17th St NW Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement Accounting services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 16 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80R

Amount of Each Disbursement this Period: 1935.11

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3756.79

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Practice Makes Progress**

Full Name (Last, First, Middle Initial)

Mailing Address 1875 Connecticut Ave NW  
FI 10

City Washington State DC Zip Code 20009-5728

Purpose of Disbursement Digital strategy consultant

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 16 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80C

Amount of Each Disbursement this Period: 10000.00

Memo Item

**B. Practice Makes Progress**

Full Name (Last, First, Middle Initial)

Mailing Address 1875 Connecticut Ave NW  
FI 10

City Washington State DC Zip Code 20009-5728

Purpose of Disbursement Void check issued 11/15

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 16 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80D

Amount of Each Disbursement this Period: -5000.00

Memo Item

**C. Seamless**

Full Name (Last, First, Middle Initial)

Mailing Address 1065 Avenue Of The Americas

City New York State NY Zip Code 10018-1878

Purpose of Disbursement Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 14 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80T

Amount of Each Disbursement this Period: 490.51

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5490.51

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

Full Name (Last, First, Middle Initial) <b>A. Shipp, Elizabeth, , ,</b>		Date of Disbursement MM / DD / YYYY <b>11 / 30 / 2016</b>	
Mailing Address <b>15955 Frederick Rd 1308</b>		FEC Identification Number <b>C</b>	
City <b>Rockville</b>	State <b>MD</b>	Zip Code <b>20855-2286</b>	<b>Transaction ID : VNV499V64X</b>
Purpose of Disbursement <b>Payroll</b>		<b>001</b>	Amount of Each Disbursement this Period <b>3374.47</b>
Candidate Name		Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Shipp, Elizabeth, , ,</b>		Date of Disbursement MM / DD / YYYY <b>12 / 14 / 2016</b>	
Mailing Address <b>15955 Frederick Rd 1308</b>		FEC Identification Number <b>C</b>	
City <b>Rockville</b>	State <b>MD</b>	Zip Code <b>20855-2286</b>	<b>Transaction ID : VNV499V8Y4</b>
Purpose of Disbursement <b>Payroll</b>		<b>001</b>	Amount of Each Disbursement this Period <b>3454.55</b>
Candidate Name		Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Shipp, Elizabeth, , ,</b>		Date of Disbursement MM / DD / YYYY <b>12 / 30 / 2016</b>	
Mailing Address <b>15955 Frederick Rd 1308</b>		FEC Identification Number <b>C</b>	
City <b>Rockville</b>	State <b>MD</b>	Zip Code <b>20855-2286</b>	<b>Transaction ID : VNV499V8Y5</b>
Purpose of Disbursement <b>Payroll</b>		<b>001</b>	Amount of Each Disbursement this Period <b>3697.39</b>
Candidate Name		Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<b>10526.41</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**L PAC**

**A. Simple Texting**

Full Name (Last, First, Middle Initial)

Mailing Address 18851 NE 29th Ave  
Ste 700

City Miami State FL Zip Code 33180-2845

Purpose of Disbursement Phones

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 19 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80V

Amount of Each Disbursement this Period: 45.00

Memo Item

**B. SkipJack**

Full Name (Last, First, Middle Initial)

Mailing Address 8500 Governors Hill Dr

City Symmes Twp State OH Zip Code 45249-1384

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 01 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80W

Amount of Each Disbursement this Period: 1185.62

Memo Item

**C. VSP**

Full Name (Last, First, Middle Initial)

Mailing Address 3333 Quality Dr

City Rancho Cordova State CA Zip Code 95670-7985

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 19 / 2016

FEC Identification Number: C

Transaction ID : VNV499V80Y

Amount of Each Disbursement this Period: 28.88

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1259.50
<b>TOTAL</b> This Period (last page this line number only).....▶	52457.66