

# 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**  
Nixon Peabody LLP PAC

ADDRESS (number and street) 1300 Clinton Square  
Check if different than previously reported. (ACC) Rochester NY 14604

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00404178 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y  
07 01 2018 through 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.  
MULLEN, STEPHEN, B.,  
Type or Print Name of Treasurer

Signature of Treasurer MULLEN, STEPHEN, B., [Electronically Filed] Date 10 09 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

**Nixon Peabody LLP 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="2018"/>	<input type="text" value="17111.43"/>	<input type="text" value="17111.43"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="13163.51"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="8796.00"/>	<input type="text" value="45806.00"/>
(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="21959.51"/>	<input type="text" value="62917.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11637.99"/>	<input type="text" value="52595.91"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10321.52"/>	<input type="text" value="10321.52"/>
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

**Nixon Peabody LLP PAC**

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).....	7300.00	33806.00
(ii) Unitemized .....	1496.00	9500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8796.00	43306.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	8796.00	43306.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	2500.00
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)).....▶	8796.00	45806.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8796.00	45806.00

**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 .....	887.99	2345.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	887.99	2345.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10750.00	50250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	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)) ..	11637.99	52595.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11637.99	52595.91

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	8796.00	43306.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8796.00	43306.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	887.99	2345.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	887.99	2345.91

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

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

FOR LINE NUMBER: PAGE 6 OF 32  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Nixon Peabody LLP PAC**

**A. BAND, GARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13608 MOUNT PROSPECT DRIVE  
 City ROCKVILLE State MD Zip Code 20850  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt **07 / 31 / 2018**  
**Transaction ID : SA11AI.13395**  
 Amount of Each Receipt this Period 143.00  
 Memo Item

**B. BAND, GARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13608 MOUNT PROSPECT DRIVE  
 City ROCKVILLE State MD Zip Code 20850  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 573.00

Date of Receipt **08 / 31 / 2018**  
**Transaction ID : SA11AI.13458**  
 Amount of Each Receipt this Period 143.00  
 Memo Item

**C. BAND, GARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13608 MOUNT PROSPECT DRIVE  
 City ROCKVILLE State MD Zip Code 20850  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 716.00

Date of Receipt **09 / 28 / 2018**  
**Transaction ID : SA11AI.13484**  
 Amount of Each Receipt this Period 143.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 429.00  
**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 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. BANGHART, STEVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 235 81ST STREET  
 City BURR RIDGE State IL Zip Code 60527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 303.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11AI.13396**  
 Amount of Each Receipt this Period 54.00  
 Memo Item

**B. BANGHART, STEVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 235 81ST STREET  
 City BURR RIDGE State IL Zip Code 60527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt 08 / 31 / 2018  
**Transaction ID : SA11AI.13459**  
 Amount of Each Receipt this Period 54.00  
 Memo Item

**C. BANGHART, STEVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 235 81ST STREET  
 City BURR RIDGE State IL Zip Code 60527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA11AI.13485**  
 Amount of Each Receipt this Period 54.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	162.00
<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: PAGE 8 OF 32  
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 11a    11b    11c    12  
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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. BURNHAM, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1003 KIEFER RIDGE DRIVE  
 City BALLWIN State MO Zip Code 63021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 343.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11AI.13399**  
 Amount of Each Receipt this Period 63.00  
 Memo Item

**B. BURNHAM, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1003 KIEFER RIDGE DRIVE  
 City BALLWIN State MO Zip Code 63021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 406.00

Date of Receipt 08 / 31 / 2018  
**Transaction ID : SA11AI.13461**  
 Amount of Each Receipt this Period 63.00  
 Memo Item

**C. BURNHAM, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1003 KIEFER RIDGE DRIVE  
 City BALLWIN State MO Zip Code 63021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 469.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA11AI.13487**  
 Amount of Each Receipt this Period 63.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 189.00  
**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 32
	<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)  
**Nixon Peabody LLP PAC**

**A. CLANCY, SEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11972 GREY OAKS PARK ROAD  
 City GLEN ALLEN State VA Zip Code 23059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt 08 / 31 / 2018  
**Transaction ID : SA11AI.13463**  
 Amount of Each Receipt this Period 51.00  
 Memo Item

**B. CLANCY, SEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11972 GREY OAKS PARK ROAD  
 City GLEN ALLEN State VA Zip Code 23059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA11AI.13489**  
 Amount of Each Receipt this Period 51.00  
 Memo Item

**C. COGEN, RICHARD, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 815 RIVERVIEW ROAD  
 City REXFORD State NY Zip Code 12148  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA11AI.13490**  
 Amount of Each Receipt this Period 31.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 133.00  
**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 32  
(check only one)  
 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. COHEN, ALLAN, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 56 KATHLEEN DR  
 City SYOSSET State NY Zip Code 11791  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 557.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13404**  
 Amount of Each Receipt this Period 176.00  
 Memo Item

**B. COHEN, LAURIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 178 BARD ROAD  
 City BENNINGTON State VT Zip Code 05201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 303.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13405**  
 Amount of Each Receipt this Period 105.00  
 Memo Item

**C. COHEN, LAWRENCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 LAURUS LANE  
 City NEWTON State MA Zip Code 02459  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13406**  
 Amount of Each Receipt this Period 427.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 708.00  
**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 11 OF 32  
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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. COHEN, MICHAEL, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2896 BAYVIEW AVENUE  
 City WANTAGH State NY Zip Code 11793  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13407**  
 Amount of Each Receipt this Period 82.00  
 Memo Item

**B. COLLIER, STACIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 DOWNING STREET  
 City EAST GREENWICH State RI Zip Code 20818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA11Al.13491**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**C. COONEY, MICHAEL, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 218 PARK STREET NE  
 City VIENNA State VA Zip Code 22180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 393.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13409**  
 Amount of Each Receipt this Period 158.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 277.00  
**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 12 OF 32  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. ERWIN, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1012 BENTHAM DRIVE  
 City RALEIGH State NC Zip Code 27614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt **07 / 31 / 2018**  
**Transaction ID : SA11Al.13413**  
 Amount of Each Receipt this Period 112.00  
 Memo Item

**B. ERWIN, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1012 BENTHAM DRIVE  
 City RALEIGH State NC Zip Code 27614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 448.00

Date of Receipt **08 / 31 / 2018**  
**Transaction ID : SA11Al.13467**  
 Amount of Each Receipt this Period 112.00  
 Memo Item

**C. ERWIN, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1012 BENTHAM DRIVE  
 City RALEIGH State NC Zip Code 27614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt **09 / 28 / 2018**  
**Transaction ID : SA11Al.13493**  
 Amount of Each Receipt this Period 112.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 336.00  
**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 32
	<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)  
**Nixon Peabody LLP PAC**

**A. FAHEY, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9421 S WINCHESTER  
 City CHICAGO State IL Zip Code 60643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13415**  
 Amount of Each Receipt this Period 99.00  
 Memo Item

**B. FEIRMAN, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1101 HALESWORTH DRIVE  
 City POTOMAC State MD Zip Code 20854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13416**  
 Amount of Each Receipt this Period 56.00  
 Memo Item

**C. FEIRMAN, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1101 HALESWORTH DRIVE  
 City POTOMAC State MD Zip Code 20854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt 08 / 31 / 2018  
**Transaction ID : SA11Al.13468**  
 Amount of Each Receipt this Period 56.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	211.00
<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: PAGE 14 OF 32  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. FEIRMAN, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1101 HALESWORTH DRIVE  
 City POTOMAC State MD Zip Code 20854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA11Al.13494**  
 Amount of Each Receipt this Period 56.00  
 Memo Item

**B. GILBERT, ADAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 COWDIN CIRCLE  
 City CHAPPAQUA State NY Zip Code 10514  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 529.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13418**  
 Amount of Each Receipt this Period 264.00  
 Memo Item

**C. GOLDMAN, MICHAEL, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12628 GREENBRIAR ROAD  
 City POTOMAC State MD Zip Code 20854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 622.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13420**  
 Amount of Each Receipt this Period 185.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 505.00  
**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 15 OF 32  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. GORDON, JILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 530 S HEWITT ST, APT 143  
 City LOS ANGELES State CA Zip Code 90013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **07 / 31 / 2018**  
**Transaction ID : SA11Al.13421**  
 Amount of Each Receipt this Period 159.00  
 Memo Item

**B. GORDON, JILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 530 S HEWITT ST, APT 143  
 City LOS ANGELES State CA Zip Code 90013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 584.00

Date of Receipt **08 / 31 / 2018**  
**Transaction ID : SA11Al.13470**  
 Amount of Each Receipt this Period 159.00  
 Memo Item

**C. GORDON, JILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 530 S HEWITT ST, APT 143  
 City LOS ANGELES State CA Zip Code 90013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 742.00

Date of Receipt **09 / 28 / 2018**  
**Transaction ID : SA11Al.13496**  
 Amount of Each Receipt this Period 158.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 476.00  
**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 16 OF 32  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. HOLMES, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22353 LINDEN DRIVE  
 City BARRINGTON State IL Zip Code 60010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 604.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11AI.13423**  
 Amount of Each Receipt this Period 223.00  
 Memo Item

**B. HUANG, JINJIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3832 SPRINGFIELD COMMON  
 City FREMONT State CA Zip Code 94555  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11AI.13424**  
 Amount of Each Receipt this Period 105.00  
 Memo Item

**C. JONES, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 148 MONTEROY ROAD  
 City ROCHESTER State NY Zip Code 14618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11AI.13425**  
 Amount of Each Receipt this Period 58.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 386.00  
**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 32
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. JONES, STEPHEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 148 MONTEROY ROAD

City ROCHESTER	State NY	Zip Code 14618
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
279.00

Date of Receipt  

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

**Transaction ID : SA11AI.13471**

Amount of Each Receipt this Period  

58.00
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 Memo Item

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

Mailing Address 148 MONTEROY ROAD

City ROCHESTER	State NY	Zip Code 14618
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
337.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2018

**Transaction ID : SA11AI.13497**

Amount of Each Receipt this Period  

58.00
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 Memo Item

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

Mailing Address 10052 COWAN HEIGHTS DRIVE

City NORTH TUSTIN	State CA	Zip Code 92705
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
258.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2018

**Transaction ID : SA11AI.13428**

Amount of Each Receipt this Period  

86.00
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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	202.00
<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: PAGE 18 OF 32  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. MALIK, SHAHZAD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10052 COWAN HEIGHTS DRIVE  
 City NORTH TUSTIN State CA Zip Code 92705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 344.00

Date of Receipt 08 / 31 / 2018  
**Transaction ID : SA11Al.13473**  
 Amount of Each Receipt this Period 86.00  
 Memo Item

**B. MALIK, SHAHZAD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10052 COWAN HEIGHTS DRIVE  
 City NORTH TUSTIN State CA Zip Code 92705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA11Al.13499**  
 Amount of Each Receipt this Period 86.00  
 Memo Item

**C. MASON, CHRISTOPHER, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 320 E. 72ND STREET APT. 11B  
 City NEW YORK State NY Zip Code 10021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLY Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13429**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 364.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 32
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
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	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. MCAVOY, DANIEL, , ,</b>		Date of Receipt
Mailing Address 50 LEXINGTON AVE APT 23E		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2018"/>
City NEW YORK	State NY	Zip Code 10016
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : <b>SA11AI.13500</b>
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="41.00"/>
Occupation (for Individual) ATTORNEY		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="205.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. MCCREARY, JEAN, H, ,</b>		Date of Receipt
Mailing Address 55 BARCHAN DUNE RISE		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2018"/>
City VICTOR	State NY	Zip Code 14564
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : <b>SA11AI.13431</b>
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="78.00"/>
Occupation (for Individual) ATTORNEY		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="264.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. MORENO, EVELYN, V, ,</b>		Date of Receipt
Mailing Address 5 CATLIN ROAD		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2018"/>
City BROOKLINE	State MA	Zip Code 02445
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : <b>SA11AI.13435</b>
Name of Employer (for Individual) NIXON PEABODY LLP		Amount of Each Receipt this Period <input type="text" value="170.00"/>
Occupation (for Individual) ATTORNEY		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="455.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="289.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 20 OF 32
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. ORTEGO, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 109 FIFTH STREET  
 City GARDEN CITY State NY Zip Code 11530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 08 / 31 / 2018  
**Transaction ID : SA11AI.13477**  
 Amount of Each Receipt this Period 52.00  
 Memo Item

**B. ORTEGO, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 109 FIFTH STREET  
 City GARDEN CITY State NY Zip Code 11530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA11AI.13503**  
 Amount of Each Receipt this Period 52.00  
 Memo Item

**C. PRESCOTT, ANDREW, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 BONNET SHORES ROAD  
 City NARRAGANSETT State RI Zip Code 02882  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11AI.13442**  
 Amount of Each Receipt this Period 67.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	171.00
<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 21 OF 32
	<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)  
**Nixon Peabody LLP PAC**

**A. PRICE, RICHARD, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9117 ROUEN DRIVE  
 City POTOMAC State MD Zip Code 20854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13443**  
 Amount of Each Receipt this Period 186.00  
 Memo Item

**B. ROBINSON, WILLIAM, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 218 RIVO ALTO  
 City LONG BEACH State CA Zip Code 90803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13445**  
 Amount of Each Receipt this Period 73.00  
 Memo Item

**C. ROBINSON, WILLIAM, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 218 RIVO ALTO  
 City LONG BEACH State CA Zip Code 90803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 08 / 31 / 2018  
**Transaction ID : SA11Al.13479**  
 Amount of Each Receipt this Period 73.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	332.00
<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 22 OF 32
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

**A. ROBINSON, WILLIAM, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 218 RIVO ALTO  
 City LONG BEACH State CA Zip Code 90803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 453.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA11Al.13505**  
 Amount of Each Receipt this Period 73.00  
 Memo Item

**B. ROSE, ANDREW, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 STONEWALL LANE  
 City DELMAR State NY Zip Code 12054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11Al.13446**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. ROSE, ANDREW, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 STONEWALL LANE  
 City DELMAR State NY Zip Code 12054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 08 / 31 / 2018  
**Transaction ID : SA11Al.13480**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	173.00
<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 23 OF 32
	<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)  
**Nixon Peabody LLP PAC**

**A. ROSE, ANDREW, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 STONEWALL LANE  
 City DELMAR State NY Zip Code 12054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA11AI.13506**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. ROSENBAUM, JAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 62 MASSAPOAG AVENUE  
 City SHARON State MA Zip Code 02067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11AI.13447**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. ROSENBAUM, JAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 62 MASSAPOAG AVENUE  
 City SHARON State MA Zip Code 02067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2018  
**Transaction ID : SA11AI.13481**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<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 24 OF 32
	<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)  
**Nixon Peabody LLP PAC**

**A. ROSENBAUM, JAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 62 MASSAPOAG AVENUE  
 City SHARON State MA Zip Code 02067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA11AI.13507**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. ROTHCHILD, BARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 LASALLE AVENUE  
 City CRANFORD State NJ Zip Code 07016  
 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 ▼ 322.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11AI.13448**  
 Amount of Each Receipt this Period 79.00  
 Memo Item

**C. ROTHCHILD, BARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 LASALLE AVENUE  
 City CRANFORD State NJ Zip Code 07016  
 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 ▼ 401.00

Date of Receipt 08 / 31 / 2018  
**Transaction ID : SA11AI.13482**  
 Amount of Each Receipt this Period 79.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	233.00
<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: PAGE 25 OF 32  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ROTHCHILD, BARRY, , ,**

Mailing Address **22 LASALLE AVENUE**

City **CRANFORD**    State **NJ**    Zip Code **07016**

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 ▼ **480.00**

Date of Receipt  
**09 / 28 / 2018**  
**Transaction ID : SA11AI.13508**

Amount of Each Receipt this Period  
**79.00**

Memo Item

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

Mailing Address **13 MACINTYRE DRIVE**

City **NORTH READING**    State **MA**    Zip Code **01864**

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

Name of Employer (for Individual) **NIXON PEABODY LLP**    Occupation (for Individual) **ATTORNEY**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **558.00**

Date of Receipt  
**07 / 31 / 2018**  
**Transaction ID : SA11AI.13449**

Amount of Each Receipt this Period  
**279.00**

Memo Item

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

Mailing Address **9 COLONIAL STREET**

City **EAST NORTHPORT**    State **NY**    Zip Code **11731**

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

Name of Employer (for Individual) **NIXON PEABODY LLP**    Occupation (for Individual) **ATTORNEY**

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt  
**08 / 31 / 2018**  
**Transaction ID : SA11AI.13483**

Amount of Each Receipt this Period  
**40.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **398.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 32
	<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)  
**Nixon Peabody LLP PAC**

**A. SCHNIPPER, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 COLONIAL STREET  
 City EAST NORTHPORT State NY Zip Code 11731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : SA11AI.13509**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. SCHRIER, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 614 BLACKSTONE  
 City SAN RAFAEL State CA Zip Code 94903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11AI.13451**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**C. SILVERBERG, KENNETH, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8165 SHIPS CURVE LANE  
 City ALEXANDRIA State VA Zip Code 22307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : SA11AI.13453**  
 Amount of Each Receipt this Period 120.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	310.00
<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 27 OF 32
	<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)  
**Nixon Peabody LLP PAC**

**A. STEIN, RICHARD, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 74 KIRKSTALL ROAD  
 City NEWTONVILLE State MA Zip Code 02460  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1294.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2018  
**Transaction ID : SA11AI.13454**  
 Amount of Each Receipt this Period  
 647.00  
 Memo Item

**B. ZUBIAGO, STEPHEN, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 56 MIST OAK DRIVE  
 City EACH GREENWICH State RI Zip Code 02818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NIXON PEABODY LLU Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2018  
**Transaction ID : SA11AI.13457**  
 Amount of Each Receipt this Period  
 169.00  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	816.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7300.00

**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)  
**Nixon Peabody LLP PAC**

Full Name (Last, First, Middle Initial) <b>A. JP MORGAN CHASE BANK</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2018
Mailing Address CHASE SQUARE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.13378</b> Amount of Each Disbursement this Period 78.98
City ROCHESTER	State NY	Zip Code 14692
Purpose of Disbursement BANK FEE		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. JP MORGAN CHASE BANK</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2018
Mailing Address CHASE SQUARE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.13375</b> Amount of Each Disbursement this Period 74.81
City ROCHESTER	State NY	Zip Code 14692
Purpose of Disbursement BANK FEE		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>C. JP MORGAN CHASE BANK</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2018
Mailing Address CHASE SQUARE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.13376</b> Amount of Each Disbursement this Period 79.81
City ROCHESTER	State NY	Zip Code 14692
Purpose of Disbursement BANK FEE		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: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	233.60
<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 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)  
**Nixon Peabody LLP PAC**

Full Name (Last, First, Middle Initial)

**A. JP MORGAN CHASE BANK**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2018

Mailing Address CHASE SQUARE

FEC Identification Number

C
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**Transaction ID : SB21B.13377**  
Amount of Each Disbursement this Period

74.39
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Memo Item

City ROCHESTER State NY Zip Code 14692

Purpose of Disbursement  
BANK FEE

001
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. NIXON PEABODY LLP**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2018

Mailing Address 1300 CLINTON SQUARE

FEC Identification Number

C
---

**Transaction ID : SB21B.13379**  
Amount of Each Disbursement this Period

580.00
--------

Memo Item

City ROCHESTER State NY Zip Code 14604

Purpose of Disbursement  
PROFESSIONAL FEES

001
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

FEC Identification Number

C
---

Amount of Each Disbursement this Period

--

Memo Item

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

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

654.39
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887.99
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**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)  
**Nixon Peabody LLP PAC**

Full Name (Last, First, Middle Initial)  
**A. BILL CASSIDY FOR US SENATE**

Mailing Address PO BOX 80505

City BATON ROUGE State LA Zip Code 70898

Purpose of Disbursement CONTRIBUTION

Candidate Name CASSIDY, WILLIAM M, , ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: LA District: 00

Date of Disbursement: 09 / 21 / 2018

FEC Identification Number: C00543983  
Transaction ID : SB23.13391  
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. CARLOS CURBELO CONGRESS**

Mailing Address 8724 SUNSET DR #355

City MIAMI State FL Zip Code 33173

Purpose of Disbursement CONTRIBUTION

Candidate Name CURBELO, CARLOS MR., , ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: FL District: 26

Date of Disbursement: 08 / 10 / 2018

FEC Identification Number: C00546846  
Transaction ID : SB23.13381  
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. DR. JIM MAXWELL FOR CONGRESS**

Mailing Address PO BOX 10133

City ROCHESTER State NY Zip Code 14610

Purpose of Disbursement CONTRIBUTION

Candidate Name MAXWELL, JAMES T. DR., , ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: NY District: 25

Date of Disbursement: 09 / 24 / 2018

FEC Identification Number: C00666164  
Transaction ID : SB23.13392  
Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

Full Name (Last, First, Middle Initial)  
**A. JOHN KINGSTON FOR SENATE INC**

Date of Disbursement:  /  /

Mailing Address: 331 MONTVALE AVE

City: WOBURN State: MA Zip Code: 01801

Purpose of Disbursement: CONTRIBUTION Category/Type:

Candidate Name: KINGSTON, JOHN MR, , ,

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

State: MA District: 00

FEC Identification Number:   
Transaction ID : **SB23.13385**  
Amount of Each Disbursement this Period:   
 Memo Item

Full Name (Last, First, Middle Initial)  
**B. PORTMAN FOR SENATE COMMITTEE**

Date of Disbursement:  /  /

Mailing Address: 9856 ARCHER LANE

City: DUBLIN State: OH Zip Code: 43017

Purpose of Disbursement: CONTRIBUTION Category/Type:

Candidate Name: PORTMAN, ROB THE HONORA, , ,

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

State: OH District: 00

FEC Identification Number:   
Transaction ID : **SB23.13384**  
Amount of Each Disbursement this Period:   
 Memo Item

Full Name (Last, First, Middle Initial)  
**C. PORTMAN FOR SENATE COMMITTEE**

Date of Disbursement:  /  /

Mailing Address: 9856 ARCHER LANE

City: DUBLIN State: OH Zip Code: 43017

Purpose of Disbursement: CONTRIBUTION Category/Type:

Candidate Name: PORTMAN, ROB THE HONORA, , ,

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

State: OH District: 00

FEC Identification Number:   
Transaction ID : **SB23.13388**  
Amount of Each Disbursement this Period:   
 Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Nixon Peabody LLP PAC**

Full Name (Last, First, Middle Initial) <b>A. STABENOW FOR US SENATE</b>		Date of Disbursement MM / DD / YYYY 09 / 21 / 2018
Mailing Address P.O. BOX 4945		FEC Identification Number C 000344473 <b>Transaction ID : SB23.13390</b>
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement CONTRIBUTION		Category/Type 011
Candidate Name <b>STABENOW, DEBBIE, , ,</b>		Amount of Each Disbursement this Period 2500.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MI	District: 00	

Full Name (Last, First, Middle Initial) <b>B. TOM REED FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2018
Mailing Address PO BOX 10847		FEC Identification Number C 000464032 <b>Transaction ID : SB23.13380</b>
City ROCHESTER	State NY	Zip Code 14610
Purpose of Disbursement CONTRIBUTION		Category/Type 011
Candidate Name <b>REED, THOMAS W, , ,</b>		Amount of Each Disbursement this Period 750.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 23	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	

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

3250.00

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

10750.00