

# 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

### Correct the Record

ADDRESS (number and street) 455 Massachusetts Ave NW Ste 660 Washington DC 20001

Check if different than previously reported. (ACC)

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

C C00578997

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)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - 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 01 / 01 / 2016 through 03 / 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.

Type or Print Name of Treasurer Elizabeth Cohen

Signature of Treasurer Elizabeth Cohen [Electronically Filed] Date 04 / 15 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Correct the Record**

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"/>	<input type="text" value="332095.80"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="332095.80"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1647520.96"/>	<input type="text" value="1647520.96"/>
(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="1979616.76"/>	<input type="text" value="1979616.76"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1358640.05"/>	<input type="text" value="1358640.05"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="620976.71"/>	<input type="text" value="620976.71"/>
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

Correct the Record

Report Covering the Period: From: 01 / 01 / 2016 To: 03 / 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).....	0.00	0.00
(ii) Unitemized .....	20.00	20.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	20.00	20.00
(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) .....	20.00	20.00
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	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1647500.96	1647500.96
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))..... ▶	1647520.96	1647520.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1647520.96	1647520.96

**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 .....	35.00	35.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	35.00	35.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50.00	50.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	1358555.05	1358555.05
30. Federal Election Activity (2 U.S.C. §431(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)) ..	1358640.05	1358640.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1358640.05	1358640.05

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	20.00	20.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20.00	20.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	35.00	35.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	35.00	35.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 176
<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

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)  
**Correct the Record**

**A. Heising-Simons Action Fund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 California St  
 Ste 3350  
 City San Francisco State CA Zip Code 94111-4735  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2016  
**Transaction ID : VR05ZFMCP00**  
 Amount of Each Receipt this Period  
 100000.00  
 Memo Item  
 Non-Contribution Account

**B. Pat A. Stryker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 262 E Mountain Ave  
 City Fort Collins State CO Zip Code 80524-2835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Philanthropist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2016  
**Transaction ID : VR05ZGHBNK0**  
 Amount of Each Receipt this Period  
 250000.00  
 Memo Item  
 Non-Contribution Account

**C. Mark Bernstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 30220  
 City Fort Lauderdale State FL Zip Code 33303-0220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Law Offices of Samuel Bernstein Attorney  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 12500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 25 / 2016  
**Transaction ID : VR05ZFGN2P0**  
 Amount of Each Receipt this Period  
 12500.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	362500.00
<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 7 OF 176
<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)  
**Correct the Record**

**A. Barbara Lee**  
Full Name (Last, First, Middle Initial)

Mailing Address 131 Mount Auburn St  
Ste 3

City Cambridge State MA Zip Code 02138-5752

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

Name of Employer Self-Employed Occupation Philanthropic Activist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350000.00

Date of Receipt 02 / 11 / 2016  
**Transaction ID : VR05ZFMAS82**

Amount of Each Receipt this Period 100000.00

Memo Item

Non-Contribution Account

**B. Fair Share Action**  
Full Name (Last, First, Middle Initial)

Mailing Address 218 D St SE  
Ste 205

City Washington State DC Zip Code 20003-1900

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 03 / 11 / 2016  
**Transaction ID : VR05ZGHBN83**

Amount of Each Receipt this Period 50000.00

Memo Item

Non-Contribution Account

**C. Donald Sussman**  
Full Name (Last, First, Middle Initial)

Mailing Address 888 E Las Olas Blvd  
Ste 210

City Fort Lauderdale State FL Zip Code 33301-2396

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

Name of Employer Paloma Partners, LLC Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 03 / 14 / 2016  
**Transaction ID : VR05ZGHBND3**

Amount of Each Receipt this Period 100000.00

Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 176
<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)  
**Correct the Record**

**A. Henry Laufer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 178 Old Field Rd  
 City State Zip Code  
 Setauket NY 11733-1636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Renaissance Technologies Executive  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 18 / 2016  
**Transaction ID : VR05ZFFHAD4**  
 Amount of Each Receipt this Period  
 500000.00  
 Memo Item  
 Non-Contribution Account

**B. Gregory Maguire**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 63 Upland Rd  
 City State Zip Code  
 Concord MA 01742-4001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Writer  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 09 / 2016  
**Transaction ID : VR05ZGHBN75**  
 Amount of Each Receipt this Period  
 10000.00  
 Memo Item  
 Non-Contribution Account

**C. Barbara Lee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 131 Mount Auburn St  
 Ste 3  
 City State Zip Code  
 Cambridge MA 02138-5752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Philanthropic Activist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 11 / 2016  
**Transaction ID : VR05ZFEFX95**  
 Amount of Each Receipt this Period  
 250000.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	760000.00
<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 9 OF 176
<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)  
**Correct the Record**

**A. Jon Stryker**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 51536

City Kalamazoo State MI Zip Code 49005-1536

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

Name of Employer Stream Line Circle Occupation Architect

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 24 / 2016  
**Transaction ID : VR05ZFNFC5**

Amount of Each Receipt this Period  
 100000.00

Memo Item

Non-Contribution Account

**B. Alix Ritchie**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30220

City Fort Lauderdale State FL Zip Code 33303-0220

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

Name of Employer Self-Employed Occupation Media Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2016  
**Transaction ID : VR05ZFMC9H6**

Amount of Each Receipt this Period  
 50000.00

Memo Item

Non-Contribution Account

**C. Fair Share Action**  
Full Name (Last, First, Middle Initial)

Mailing Address 218 D St SE Ste 205

City Washington State DC Zip Code 20003-1900

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 23 / 2016  
**Transaction ID : VR05ZGHBNG7**

Amount of Each Receipt this Period  
 50000.00

Memo Item

Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200000.00
<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 176
<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)  
**Correct the Record**

**A. Mark Headley**  
Full Name (Last, First, Middle Initial)

Mailing Address 4 Embarcadero Ctr  
Ste 550

City San Francisco State CA Zip Code 94111-5912

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

Name of Employer: Matthews International Capital Mngmnt  
Occupation: Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
75000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

**Transaction ID : VR05ZGHBPC8**

Amount of Each Receipt this Period  
75000.00

Memo Item

Non-Contribution Account

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1647500.00

# 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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Ohio Democratic Party

Mailing Address 340 E Fulton St

City Columbus State OH Zip Code 43215-5418

Purpose of Disbursement  
Event Ticket: Contribution Account

012

Candidate Name

**Ohio Democratic Party**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : VQZ6QA6QYJ8

Amount of Each Disbursement this Period

5	0	.	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

		.		
--	--	---	--	--

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

		.		
--	--	---	--	--

Memo Item

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

5	0	.	0	0
---	---	---	---	---

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

5	0	.	0	0
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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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie LLP**

Mailing Address 1201 3rd Ave  
Ste 4900

City Seattle State WA Zip Code 98101-3095

Purpose of Disbursement  
Legal Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2016

Transaction ID : VQZ6QA6QV00

Amount of Each Disbursement this Period

15000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : VQZ6QA70K10

Amount of Each Disbursement this Period

24.56

Memo Item

Full Name (Last, First, Middle Initial)

**C. Connor Shaw**

Mailing Address 244 12th St SE  
Apt A

City Washington State DC Zip Code 20003-1486

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2016

Transaction ID : VQZ6QA6QS20

Amount of Each Disbursement this Period

1281.76

Memo Item

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

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

16306.32

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : VQZ6QA6QQ50

Amount of Each Disbursement this Period

1451.77

Memo Item

Full Name (Last, First, Middle Initial)

**B. Margaret Ann Morgan**

Mailing Address 1300 13th St NW  
Apt 703

City Washington State DC Zip Code 20005-4477

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 08 / 2016

Transaction ID : VQZ6QA70K60

Amount of Each Disbursement this Period

16.25

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 08 / 2016

Transaction ID : VQZ6QA7F880

Amount of Each Disbursement this Period

10.66

Memo Item

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

1468.02

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA7F872

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. DC Health Benefit Exchange Authority**

Mailing Address 1225 I St NW  
Ste 400

City Washington State DC Zip Code 20005-5958

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6CQ70

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6CJB0

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Email Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

Transaction ID : VQZ6QA6CPM0

Amount of Each Disbursement this Period

420.00

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

Transaction ID : VQZ6QA6CP51

Amount of Each Disbursement this Period

521.96

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Peer Choice Awards, LLC**

Mailing Address 3975 University Dr Ste 200

City Fairfax State VA Zip Code 22030-2520

Purpose of Disbursement  
Award Entry Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

Transaction ID : VQZ6QA6CPA1

Amount of Each Disbursement this Period

255.00

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

Transaction ID : VQZ6QA6CPR2

Amount of Each Disbursement this Period

49.99

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Rising Tide**

Mailing Address 1250 H St NW  
Ste 400

City Washington State DC Zip Code 20005-5903

Purpose of Disbursement  
List Aquisition: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

Transaction ID : VQZ6QA6CP44

Amount of Each Disbursement this Period

500.00

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

Transaction ID : VQZ6QA6CPJ4

Amount of Each Disbursement this Period

57.06

Memo Item \*

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

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

0.00



**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Microsoft**

Mailing Address 205 108th Ave NE  
Ste 400

City Bellevue State WA Zip Code 98004-5770

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 12 / 2016

Transaction ID : VQZ6QA6CP85

Amount of Each Disbursement this Period

253.80

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Budget Car Rental**

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-3826

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 12 / 2016

Transaction ID : VQZ6QA6CPD5

Amount of Each Disbursement this Period

25.00

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 12 / 2016

Transaction ID : VQZ6QA6CP36

Amount of Each Disbursement this Period

990.20

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

Transaction ID : VQZ6QA6CPH6

Amount of Each Disbursement this Period

49.99

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. JetBlue**

Mailing Address 2701 Queens Plz N

City Long Island City State NY Zip Code 11101-4021

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

Transaction ID : VQZ6QA6CP77

Amount of Each Disbursement this Period

91.10

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

Transaction ID : VQZ6QA6CPC7

Amount of Each Disbursement this Period

173.10

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Best Buy**

Mailing Address 3100 14th St NW

City Washington State DC Zip Code 20010-2415

Purpose of Disbursement  
Computer: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

**Transaction ID : VQZ6QA6CP28**

Amount of Each Disbursement this Period

1216.11

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

**Transaction ID : VQZ6QA6CP69**

Amount of Each Disbursement this Period

466.20

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109-5210

Purpose of Disbursement  
Equipment: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

**Transaction ID : VQZ6QA6CPB9**

Amount of Each Disbursement this Period

52.95

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Media Matters For America**

Mailing Address 455 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Rent: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA70MC0

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. James McClure**

Mailing Address 5410 Connecticut Ave NW  
Apt 609

City Washington State DC Zip Code 20015-2835

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QPD0

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QRF0

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Media Matters For America**

Mailing Address 455 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Rent: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70MH0**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. CQ Roll Call**

Mailing Address 77 K St NE  
FI 8

City Washington State DC Zip Code 20002-4681

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70KS0**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Rebecca C. Charen**

Mailing Address 1445 Otis PI NW  
Apt 215

City Washington State DC Zip Code 20010-3212

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QRX0**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. LexisNexis**

Mailing Address PO Box 72477090

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70KY0**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement  
Retirement Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4T611**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Group Benefit Service**

Mailing Address PO Box 64802

City Baltimore State MD Zip Code 21264-4802

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70M21**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA79F21

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA79F38

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement  
Retirement Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QP31

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Media Matters For America**

Mailing Address 455 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Rent: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QV41

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA74V41

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Philip J. Shelly**

Mailing Address 398 Knollcrest Dr

City Galesburg State IL Zip Code 61401-1112

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA792D0

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA792J0

Amount of Each Disbursement this Period

1462.81

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Karen Smith-Murphy**

Mailing Address 3101 Edgewood Rd

City Kensington State MD Zip Code 20895-2746

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA791N0

Amount of Each Disbursement this Period

1646.66

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Michael Schub**

Mailing Address 2400 16th St NW  
Apt 122

City Washington State DC Zip Code 20009-6607

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA79231

Amount of Each Disbursement this Period

428.60

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	6

Transaction ID : VQZ6QA792P1

Amount of Each Disbursement this Period

3	8	1	9	.	9	1
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	6

Transaction ID : VQZ6QA792V1

Amount of Each Disbursement this Period

1	4	9	1	.	5
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	6

Transaction ID : VQZ6QA790Y1

Amount of Each Disbursement this Period

1	7	2	6	.	1	2
---	---	---	---	---	---	---

Memo Item

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

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

0	0	0
---	---	---

0	0	0
---	---	---

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Susan E. Madrak**

Mailing Address 4343 E Thompson St  
Apt 2

City Philadelphia State PA Zip Code 19137-1628

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA791S2

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA791Y2

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Justin Price**

Mailing Address 52 Castle Cary Ct

City Columbia State SC Zip Code 29209-4624

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA79223

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Karla Towle**

Mailing Address 2637 16th St NW  
Apt 203

City Washington State DC Zip Code 20009-4219

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA79273

Amount of Each Disbursement this Period

1563.81

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Elizabeth Price**

Mailing Address 220 12th PI NE

City Washington State DC Zip Code 20002-6302

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA792N3

Amount of Each Disbursement this Period

2252.13

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA79114

Amount of Each Disbursement this Period

377.01

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Connor Shaw**

Mailing Address 244 12th St SE  
Apt A

City Washington State DC Zip Code 20003-1486

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA792G4

Amount of Each Disbursement this Period

1281.75

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA791R4

Amount of Each Disbursement this Period

1662.93

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA791X4

Amount of Each Disbursement this Period

1242.01

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Daphne Zhang</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2016
Mailing Address 211 Morgan St NW Apt A		<b>Transaction ID : VQZ6QA792Y4</b>
City Washington	State DC	
Zip Code 20001-1295	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1757.10
Candidate Name	Category/Type	<input checked="" 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. Benjamin Fischbein</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2016
Mailing Address 1350 Florida Ave NW Apt 303		<b>Transaction ID : VQZ6QA79215</b>
City Washington	State DC	
Zip Code 20009-6024	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 2621.27
Candidate Name	Category/Type	<input checked="" 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. Ryan Migeed</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2016
Mailing Address 1810 California St NW Apt 204		<b>Transaction ID : VQZ6QA791K5</b>
City Washington	State DC	
Zip Code 20009-1826	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1304.14
Candidate Name	Category/Type	<input checked="" 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:		

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	6

Transaction ID : VQZ6QA792M5

Amount of Each Disbursement this Period

6	5	0	2	.	0	5
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	6

Transaction ID : VQZ6QA792S5

Amount of Each Disbursement this Period

1	1	7	1	.	4	4
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Elizabeth S. Shappell**

Mailing Address 1718 P St NW  
Apt 213

City Washington State DC Zip Code 20036-1311

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	6

Transaction ID : VQZ6QA792F6

Amount of Each Disbursement this Period

2	9	0	7	.	8	3
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Memo Item

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

0	0	0
---	---	---

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

0	0	0
---	---	---

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA791Q6**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA791W6**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA792X6**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA79207

Amount of Each Disbursement this Period

1351.84

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Shawn C. Drury**

Mailing Address 1 Canterbury Sq  
Apt 201

City Alexandria State VA Zip Code 22304-3073

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA79257

Amount of Each Disbursement this Period

1567.25

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA74V67

Amount of Each Disbursement this Period

161.27

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA792R7

Amount of Each Disbursement this Period

1452.47

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Amanda Taylor**

Mailing Address 1825 Florida Ave NW  
Apt 21

City Washington State DC Zip Code 20009-1745

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA791P8

Amount of Each Disbursement this Period

2177.23

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Rebecca C. Charen**

Mailing Address 1445 Otis PI NW  
Apt 215

City Washington State DC Zip Code 20010-3212

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA791V8

Amount of Each Disbursement this Period

1372.53

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

**Transaction ID : VQZ6QA74V59**

Amount of Each Disbursement this Period

34179.31

Memo Item

Full Name (Last, First, Middle Initial)

**B. Caryn Lenhoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

**Transaction ID : VQZ6QA791H9**

Amount of Each Disbursement this Period

1475.38

Memo Item

Full Name (Last, First, Middle Initial)

**C. Daniel J. Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

**Transaction ID : VQZ6QA792Q9**

Amount of Each Disbursement this Period

413.33

Memo Item

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Margaret Ann Morgan**

Mailing Address 1300 13th St NW  
Apt 703

City Washington State DC Zip Code 20005-4477

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2016

**Transaction ID : VQZ6QA792W9**

Amount of Each Disbursement this Period

6502.05
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Lauren Green**

Mailing Address 1400 E West Hwy  
Apt 919

City Silver Spring State MD Zip Code 20910-3260

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2016

**Transaction ID : VQZ6QA790Z9**

Amount of Each Disbursement this Period

1257.90
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	11	/	2016

**Transaction ID : VQZ6QA6QS61**

Amount of Each Disbursement this Period

6502.05
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Memo Item

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

6502.05
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**TOTAL** This Period (last page this line number only)..... ▶

6502.05
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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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement  
Retirement Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : VQZ6QA70M71

Amount of Each Disbursement this Period

3872.52

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
02 / 12 / 2016

Transaction ID : VQZ6QA6QV91

Amount of Each Disbursement this Period

572.01

Memo Item

Full Name (Last, First, Middle Initial)

**C. Embassy Suites Hotel**

Mailing Address 5055 International Blvd

City North Charleston State SC Zip Code 29418-5963

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
01 / 15 / 2016

Transaction ID : VQZ6QA6QVA9

Amount of Each Disbursement this Period

508.40

Memo Item

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

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

4444.53

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Wild Onion Media**

Mailing Address 217 Camaro Way

City San Marcos State TX Zip Code 78666-3035

Purpose of Disbursement  
Video Consulting and Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : VQZ6QA6QSB1

Amount of Each Disbursement this Period

8217.34

Memo Item

Full Name (Last, First, Middle Initial)

**B. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA70KF1

Amount of Each Disbursement this Period

292.71

Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines, Inc.**

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7FFM0

Amount of Each Disbursement this Period

200.00

Memo Item

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

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

8510.05

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7FFA1

Amount of Each Disbursement this Period

10.51

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7FF02

Amount of Each Disbursement this Period

15.28

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7FF44

Amount of Each Disbursement this Period

16.93

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7FFP6

Amount of Each Disbursement this Period

10.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7FFY7

Amount of Each Disbursement this Period

15.91

Memo Item

Full Name (Last, First, Middle Initial)

**C. West Wing Writers**

Mailing Address 1150 Connecticut Ave NW  
Ste 505

City Washington State DC Zip Code 20036-4138

Purpose of Disbursement  
Communications Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 09 / 2016

Transaction ID : VQZ6QA7B8H1

Amount of Each Disbursement this Period

17000.00

Memo Item

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

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

17000.00



**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 23 / 2016

Transaction ID : VQZ6QA6QXM1

Amount of Each Disbursement this Period

56.09

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FL 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2016

Transaction ID : VQZ6QA6QXQ5

Amount of Each Disbursement this Period

29.14

Memo Item

Full Name (Last, First, Middle Initial)

**C. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : VQZ6QA6QPP1

Amount of Each Disbursement this Period

4521.56

Memo Item

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

4577.65

**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"/> 24	<input type="checkbox"/> 25	<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

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Granholm Mulhern Associates**

Mailing Address 21 Chelsea Ct

City State Zip Code  
Oakland CA 94611-2416

Purpose of Disbursement  
Communications Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 05 / 2016

**Transaction ID : VQZ6QA6CGQ1**

Amount of Each Disbursement this Period

15000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Katherine Paris**

Mailing Address 15830 S Park Blvd

City State Zip Code  
Shaker Heights OH 44120-1671

Purpose of Disbursement  
Strategic Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

**Transaction ID : VQZ6QA70JQ1**

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City State Zip Code  
Alexandria VA 22304-8702

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2016

**Transaction ID : VQZ6QA6QVV1**

Amount of Each Disbursement this Period

4641.90

Memo Item

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

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

22341.90

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2016

Transaction ID : VQZ6QA6S9D0

Amount of Each Disbursement this Period

200.00

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2016

Transaction ID : VQZ6QA6S981

Amount of Each Disbursement this Period

498.20

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2016

Transaction ID : VQZ6QA6S812

Amount of Each Disbursement this Period

236.98

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address 800 K St NW

City Washington State DC Zip Code 20001-8000

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2016

**Transaction ID : VQZ6QA6S9C2**

Amount of Each Disbursement this Period

174.15

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2016

**Transaction ID : VQZ6QA6S9H2**

Amount of Each Disbursement this Period

487.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hotels.com**

Mailing Address 5400 LBJ Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2016

**Transaction ID : VQZ6QA6S753**

Amount of Each Disbursement this Period

31.00

Memo Item

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Expedia, Inc.**

Mailing Address 333 108th Ave NE

City Bellevue State WA Zip Code 98004-5703

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6S704**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Qdoba**

Mailing Address 7244 W Bonfils Ln

City Lakewood State CO Zip Code 80226-3487

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6S8K5**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hotels.com**

Mailing Address 5400 LBJ Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6S6Z6**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2016

Transaction ID : VQZ6QA6S7C7

Amount of Each Disbursement this Period

49.99

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2016

Transaction ID : VQZ6QA6S7Z7

Amount of Each Disbursement this Period

49.99

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. We the Pizza**

Mailing Address 305 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1148

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 06 / 2016

Transaction ID : VQZ6QA6S888

Amount of Each Disbursement this Period

211.15

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. We the Pizza**

Mailing Address 305 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1148

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 01 / 2016

Transaction ID : VQZ6QA6S8V8

Amount of Each Disbursement this Period

158.75

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 05 / 2016

Transaction ID : VQZ6QA6S949

Amount of Each Disbursement this Period

498.20

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Email Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 02 / 2016

Transaction ID : VQZ6QA6S8C9

Amount of Each Disbursement this Period

420.00

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : VQZ6QA70JW1

Amount of Each Disbursement this Period

58.23

Memo Item

Full Name (Last, First, Middle Initial)

**B. Boston Logan International Airport**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128-2907

Purpose of Disbursement  
Parking: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : VQZ6QA7F898

Amount of Each Disbursement this Period

44.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. West Wing Writers**

Mailing Address 1150 Connecticut Ave NW  
Ste 505

City Washington State DC Zip Code 20036-4138

Purpose of Disbursement  
Communications Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : VQZ6QA7B7Y1

Amount of Each Disbursement this Period

47000.00

Memo Item

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

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

47058.23



**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QS12**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70K52**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Central Parking System**

Mailing Address 720 Olive St  
Ste 1650

City Saint Louis State MO Zip Code 63101-2329

Purpose of Disbursement  
Parking: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6CQ62**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : VQZ6QA6QT72

Amount of Each Disbursement this Period

749.36

Memo Item

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 18 / 2016

Transaction ID : VQZ6QA6QTA6

Amount of Each Disbursement this Period

260.98

Memo Item

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2016

Transaction ID : VQZ6QA6QT98

Amount of Each Disbursement this Period

260.98

Memo Item

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

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

749.36

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA70KA2

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6BWB2

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Caryn Lenhoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6BX40

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Michael Schub**

Mailing Address 2400 16th St NW  
Apt 122

City Washington State DC Zip Code 20009-6607

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 14 / 2016

Transaction ID : VQZ6QA6BXJ0

Amount of Each Disbursement this Period

1387.85

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 14 / 2016

Transaction ID : VQZ6QA6BWZ0

Amount of Each Disbursement this Period

1099.64

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 14 / 2016

Transaction ID : VQZ6QA6BX32

Amount of Each Disbursement this Period

1127.04

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6BXH2

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6BWW2

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6BXT3

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 14 / 2016

Transaction ID : VQZ6QA6BXZ3

Amount of Each Disbursement this Period

6484.68

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 14 / 2016

Transaction ID : VQZ6QA6BX24

Amount of Each Disbursement this Period

2603.17

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Daniel J. Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 14 / 2016

Transaction ID : VQZ6QA6BXG4

Amount of Each Disbursement this Period

413.33

Memo Item \*

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

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

0.00

# 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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. MJ Okma

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	6

Transaction ID : VQZ6QA6BXN4

Amount of Each Disbursement this Period

1	4	4	6	3	9
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

### B. Elizabeth Cohen

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	6

Transaction ID : VQZ6QA6BWX4

Amount of Each Disbursement this Period

1	3	0	2	9	5
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

### C. Mary K. Jennings

Mailing Address 1668 Beekman Pl NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	6

Transaction ID : VQZ6QA6BX65

Amount of Each Disbursement this Period

1	9	0	3	9	7
---	---	---	---	---	---

Memo Item

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

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

0	0	0
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0	0	0
---	---	---

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Anthony Baker</b>		Date of Disbursement MM / DD / YYYY 01 / 14 / 2016
Mailing Address 4308 New Hampshire Ave NW		<b>Transaction ID : VQZ6QA6BWR5</b>
City Washington	State DC	
Zip Code 20011-4730	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1712.69
Candidate Name	Category/Type	<input checked="" 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. Elliot Fink</b>		Date of Disbursement MM / DD / YYYY 01 / 14 / 2016
Mailing Address 1036 Paper Mill Ct NW		<b>Transaction ID : VQZ6QA6BX16</b>
City Washington	State DC	
Zip Code 20007-3619	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 353.50
Candidate Name	Category/Type	<input checked="" 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. Benjamin Williams</b>		Date of Disbursement MM / DD / YYYY 01 / 14 / 2016
Mailing Address 2568 Sherman Ave NW Apt 2		<b>Transaction ID : VQZ6QA6BY76</b>
City Washington	State DC	
Zip Code 20001-2237	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1461.86
Candidate Name	Category/Type	<input checked="" 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).....▶	0.00
<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"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 14 / 2016

**Transaction ID : VQZ6QA6BWE6**

Amount of Each Disbursement this Period

111.68

Memo Item

Full Name (Last, First, Middle Initial)

**B. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 14 / 2016

**Transaction ID : VQZ6QA6BXF6**

Amount of Each Disbursement this Period

3802.17

Memo Item

Full Name (Last, First, Middle Initial)

**C. Connor Shaw**

Mailing Address 244 12th St SE  
Apt A

City Washington State DC Zip Code 20003-1486

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 14 / 2016

**Transaction ID : VQZ6QA6BXM6**

Amount of Each Disbursement this Period

1281.75

Memo Item

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	6

**Transaction ID : VQZ6QA6BXA7**

Amount of Each Disbursement this Period

1	4	3	6	9	5
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	6

**Transaction ID : VQZ6QA6BWQ7**

Amount of Each Disbursement this Period

4	5	0	3	8	3
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	6

**Transaction ID : VQZ6QA6BXX7**

Amount of Each Disbursement this Period

1	4	8	5	8	7
---	---	---	---	---	---

Memo Item

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

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

0	0	0
---	---	---

0	0	0
---	---	---

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Karla Towle**

Mailing Address 2637 16th St NW  
Apt 203

City Washington State DC Zip Code 20009-4219

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6BY68**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6BWD8**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6BXR8**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Rebecca C. Charen**

Mailing Address 1445 Otis PI NW  
Apt 215

City Washington State DC Zip Code 20010-3212

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	6

**Transaction ID : VQZ6QA6BWV8**

Amount of Each Disbursement this Period

1	3	6	6	4	2
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	6

**Transaction ID : VQZ6QA6BY19**

Amount of Each Disbursement this Period

2	6	6	5	3	6
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	6

**Transaction ID : VQZ6QA6BXW9**

Amount of Each Disbursement this Period

1	1	5	4	2	9
---	---	---	---	---	---

Memo Item

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

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

0	0	0
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0	0	0
---	---	---

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Wild Onion Media**

Mailing Address 217 Camaro Way

City San Marcos State TX Zip Code 78666-3035

Purpose of Disbursement  
Video Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

**Transaction ID : VQZ6QA70MG2**

Amount of Each Disbursement this Period

7000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

**Transaction ID : VQZ6QA6QPH2**

Amount of Each Disbursement this Period

1726.11

Memo Item

Full Name (Last, First, Middle Initial)

**C. Washington Metropolitan Area Transit Authority**

Mailing Address 600 5th St NW

City Washington State DC Zip Code 20001-2610

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2016

**Transaction ID : VQZ6QA6QVH2**

Amount of Each Disbursement this Period

1030.00

Memo Item

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

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

9756.11

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Blue State Digital**

Mailing Address 406 7th St NW  
FI 3

City Washington State DC Zip Code 20004-2260

Purpose of Disbursement  
Digital Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70KR2**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. DC Health Benefit Exchange Authority**

Mailing Address 1225 I St NW  
Ste 400

City Washington State DC Zip Code 20005-5958

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70KX2**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70K03**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Luca Strategy Group, LLC**

Mailing Address 3007 19th St S

City Arlington State VA Zip Code 22204-5265

Purpose of Disbursement  
Operations Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA79F13**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Management Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70M13**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement  
Retirement Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QP23**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Dewey Square Group</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2016
Mailing Address PO Box 60340		<b>Transaction ID : VQZ6QA6QV33</b>
City Charlotte	State NC	
Zip Code 28260-0340	Purpose of Disbursement Video Consulting and Travel Expenses: Non-Contribution Account	Amount of Each Disbursement this Period 10053.59
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. Benjamin Williams</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2016
Mailing Address 2568 Sherman Ave NW Apt 2		<b>Transaction ID : VQZ6QA6QS53</b>
City Washington	State DC	
Zip Code 20001-2237	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1467.74
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. Dewey Square Group</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2016
Mailing Address PO Box 60340		<b>Transaction ID : VQZ6QA70M63</b>
City Charlotte	State NC	
Zip Code 28260-0340	Purpose of Disbursement Video Consulting and Travel Expenses: Non-Contribution Account	Amount of Each Disbursement this Period 10020.01
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:		

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

21541.34

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Management Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
02 / 12 / 2016

**Transaction ID : VQZ6QA6QV83**

Amount of Each Disbursement this Period

19092.42

Memo Item

Full Name (Last, First, Middle Initial)

**B. Blue State Digital**

Mailing Address 406 7th St NW  
FI 3

City Washington State DC Zip Code 20004-2260

Purpose of Disbursement  
Digital Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
02 / 11 / 2016

**Transaction ID : VQZ6QA6QSA3**

Amount of Each Disbursement this Period

583.21

Memo Item

Full Name (Last, First, Middle Initial)

**C. Karla Towle**

Mailing Address 2637 16th St NW  
Apt 203

City Washington State DC Zip Code 20009-4219

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
02 / 11 / 2016

**Transaction ID : VQZ6QA6QQD3**

Amount of Each Disbursement this Period

1563.80

Memo Item

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

21239.43

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 22 / 2016

Transaction ID : VQZ6QA70KE3

Amount of Each Disbursement this Period

29.05

Memo Item

Full Name (Last, First, Middle Initial)

**B. DC Health Benefit Exchange Authority**

Mailing Address 1225 I St NW Ste 400

City Washington State DC Zip Code 20005-5958

Purpose of Disbursement Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 23 / 2016

Transaction ID : VQZ6QA6QXK3

Amount of Each Disbursement this Period

1960.62

Memo Item

Full Name (Last, First, Middle Initial)

**C. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : VQZ6QA6QPN3

Amount of Each Disbursement this Period

2621.25

Memo Item

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

4610.92

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Database Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6CGP3**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QXR3**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70JV3**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Bonner Group**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2783

Purpose of Disbursement  
Fundraising Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 15 / 2016

Transaction ID : VQZ6QA6CPW3

Amount of Each Disbursement this Period

30000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bonner Group**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2783

Purpose of Disbursement  
Fundraising Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : VQZ6QA79EW3

Amount of Each Disbursement this Period

4491.68

Memo Item

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2016

Transaction ID : VQZ6QA6QYX3

Amount of Each Disbursement this Period

8101.08

Memo Item

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

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

42592.76

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 23 / 2016

Transaction ID : VQZ6QA6S8N0

Amount of Each Disbursement this Period

76.98

Memo Item

Full Name (Last, First, Middle Initial)

**B. United States Postal Service**

Mailing Address 800 K St NW

City Washington State DC Zip Code 20001-8000

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 22 / 2016

Transaction ID : VQZ6QA6S8T0

Amount of Each Disbursement this Period

70.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. Livestream**

Mailing Address 195 Morgan Ave

City Brooklyn State NY Zip Code 11237-1000

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2016

Transaction ID : VQZ6QA6S6X0

Amount of Each Disbursement this Period

399.00

Memo Item

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 25 / 2016

Transaction ID : VQZ6QA6S931

Amount of Each Disbursement this Period

98.19

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 15 / 2016

Transaction ID : VQZ6QA6S6R1

Amount of Each Disbursement this Period

49.99

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Qdoba**

Mailing Address 7244 W Bonfils Ln

City Lakewood State CO Zip Code 80226-3487

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 13 / 2016

Transaction ID : VQZ6QA6S7X1

Amount of Each Disbursement this Period

322.48

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Thinkstock, LLC**

Mailing Address 501 N College St

City Charlotte State NC Zip Code 28202-2213

Purpose of Disbursement  
Graphics Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : VQZ6QA6S862

Amount of Each Disbursement this Period

1	9	7	.	9	6
---	---	---	---	---	---

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	1	6

Transaction ID : VQZ6QA6S7E2

Amount of Each Disbursement this Period

1	1	0	6	.	9	6
---	---	---	---	---	---	---

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : VQZ6QA6S7K2

Amount of Each Disbursement this Period

3	8	2	.	3	9
---	---	---	---	---	---

Memo Item \*

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

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

0	0	0
---	---	---

0	0	0
---	---	---

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. WiseGuys Pizza**

Mailing Address 300 Massachusetts Ave NW  
# 1

City Washington State DC Zip Code 20001-2640

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6S8S2

Amount of Each Disbursement this Period

257.30

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 26 / 2016

Transaction ID : VQZ6QA6S8F3

Amount of Each Disbursement this Period

210.45

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. American Association of Political Consultants**

Mailing Address 8400 Westpark Dr  
Ste 2

City McLean State VA Zip Code 22102-3522

Purpose of Disbursement  
Award Entry Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 22 / 2016

Transaction ID : VQZ6QA6S6Q3

Amount of Each Disbursement this Period

450.00

Memo Item \*

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

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

0.00



**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"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address 800 K St NW

City Washington State DC Zip Code 20001-8000

Purpose of Disbursement Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 22 / 2016

Transaction ID : VQZ6QA6S854

Amount of Each Disbursement this Period

83.85

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. ZippityPrint.com**

Mailing Address 1600 E 23rd St

City Cleveland State OH Zip Code 44114-4208

Purpose of Disbursement Printing: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 21 / 2016

Transaction ID : VQZ6QA6S8A4

Amount of Each Disbursement this Period

809.27

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6S9B4

Amount of Each Disbursement this Period

75.59

Memo Item \*

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

0.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Microsoft**

Mailing Address 205 108th Ave NE  
Ste 400

City Bellevue State WA Zip Code 98004-5770

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	1	6

Transaction ID : VQZ6QA6S7D4

Amount of Each Disbursement this Period

2	5	3	.	8	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. United States Postal Service**

Mailing Address 800 K St NW

City Washington State DC Zip Code 20001-8000

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : VQZ6QA6S7J4

Amount of Each Disbursement this Period

6	.	4	5
---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	1	6

Transaction ID : VQZ6QA6S915

Amount of Each Disbursement this Period

6	.	2	1
---	---	---	---

Memo Item

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

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

0	.	0	0
---	---	---	---

0	.	0	0
---	---	---	---

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 14 / 2016

Transaction ID : VQZ6QA6S965

Amount of Each Disbursement this Period

5.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 17 / 2016

Transaction ID : VQZ6QA6S785

Amount of Each Disbursement this Period

50.58

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 13 / 2016

Transaction ID : VQZ6QA6S8E5

Amount of Each Disbursement this Period

5.40

Memo Item

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Vonage**

Mailing Address PO Box 392415

City Pittsburgh State PA Zip Code 15251-9415

Purpose of Disbursement Telephone: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2016

Transaction ID : VQZ6QA6S846

Amount of Each Disbursement this Period

619.86

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 26 / 2016

Transaction ID : VQZ6QA6S8Q6

Amount of Each Disbursement this Period

36.60

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. JetBlue**

Mailing Address 2701 Queens Plz N

City Long Island City State NY Zip Code 11101-4021

Purpose of Disbursement Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2016

Transaction ID : VQZ6QA6S737

Amount of Each Disbursement this Period

480.00

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address 800 K St NW

City Washington State DC Zip Code 20001-8000

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 25 / 2016

Transaction ID : VQZ6QA6S957

Amount of Each Disbursement this Period

6.45

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 17 / 2016

Transaction ID : VQZ6QA6S838

Amount of Each Disbursement this Period

843.70

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6S998

Amount of Each Disbursement this Period

79.10

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6S7G8**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6S6S8**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6S7Y9**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. West Wing Writers**

Mailing Address 1150 Connecticut Ave NW  
Ste 505

City Washington State DC Zip Code 20036-4138

Purpose of Disbursement  
Communications Consultant and Transcription Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 09 / 2016

Transaction ID : VQZ6QA7B7X3

Amount of Each Disbursement this Period

17845.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : VQZ6QA6QS04

Amount of Each Disbursement this Period

1189.37

Memo Item

Full Name (Last, First, Middle Initial)

**C. Justin Price**

Mailing Address 52 Castle Cary Ct

City Columbia State SC Zip Code 29209-4624

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA79H34

Amount of Each Disbursement this Period

374.43

Memo Item

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

19408.80

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Budget Car Rental**

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-3826

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : VQZ6QA7B472

Amount of Each Disbursement this Period

179.94

Memo Item

Full Name (Last, First, Middle Initial)

**B. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA70K44

Amount of Each Disbursement this Period

105.43

Memo Item

Full Name (Last, First, Middle Initial)

**C. Media Matters For America**

Mailing Address 455 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 26 / 2016

Transaction ID : VQZ6QA6CQ54

Amount of Each Disbursement this Period

1380.00

Memo Item

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

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

1485.43



**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. MBA Consulting Group</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2016
Mailing Address 611 Pennsylvania Ave SE # 143		<b>Transaction ID : VQZ6QA6QT64</b>  Amount of Each Disbursement this Period 5136.75
City Washington State DC Zip Code 20003-4303	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Compliance & Accounting Services: Non-Contribution Account		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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Sean England</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2016
Mailing Address 334 Maryland Ave NE		<b>Transaction ID : VQZ6QA6QQ84</b>  Amount of Each Disbursement this Period 1351.84
City Washington State DC Zip Code 20002-5712	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Salary: Non-Contribution Account		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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Rebecca C. Charen</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1445 Otis PI NW Apt 215		<b>Transaction ID : VQZ6QA70K94</b>  Amount of Each Disbursement this Period 26.11
City Washington State DC Zip Code 20010-3212	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Reimbursement, See Below If Itemized: Non-Contribution Account		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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6514.70
<b>TOTAL</b> This Period (last page this line number only).....	6514.70

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA7F3Q6

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA7F3P9

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Franklin Forum**

Mailing Address 455 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA70MA4

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Michael Schub**

Mailing Address 2400 16th St NW  
Apt 122

City Washington State DC Zip Code 20009-6607

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QRD4**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Perkins Coie LLP**

Mailing Address 1201 3rd Ave  
Ste 4900

City Seattle State WA Zip Code 98101-3095

Purpose of Disbursement  
Legal Services and Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70MF4**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6BWF4**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6BY50

Amount of Each Disbursement this Period

2269.59

Memo Item

Full Name (Last, First, Middle Initial)

**B. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6BY90

Amount of Each Disbursement this Period

1467.74

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6BXQ0

Amount of Each Disbursement this Period

1246.45

Memo Item

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Connor Shaw**

Mailing Address 244 12th St SE  
Apt A

City Washington State DC Zip Code 20003-1486

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6BY01

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6BX81

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6BXD1

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6BWT1

Amount of Each Disbursement this Period

1726.12

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6BXV1

Amount of Each Disbursement this Period

1452.48

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6BY42

Amount of Each Disbursement this Period

1462.81

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6BY82

Amount of Each Disbursement this Period

2954.58

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6BWG2

Amount of Each Disbursement this Period

29497.17

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Daniel J. Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6BXP2

Amount of Each Disbursement this Period

413.33

Memo Item \*

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

0.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : VQZ6QA6BX73

Amount of Each Disbursement this Period

1	4	5	1	.	7	7
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. Caryn Lenhoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : VQZ6QA6BXC3

Amount of Each Disbursement this Period

1	4	7	5	.	3	8
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : VQZ6QA6BWS3

Amount of Each Disbursement this Period

4	5	2	1	.	5	5
---	---	---	---	---	---	---

Memo Item

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

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

0	0	0
---	---	---

0	0	0
---	---	---



**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6BY34

Amount of Each Disbursement this Period

1491.16

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6BXB5

Amount of Each Disbursement this Period

1127.04

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Michael Schub**

Mailing Address 2400 16th St NW  
Apt 122

City Washington State DC Zip Code 20009-6607

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : VQZ6QA6BXS5

Amount of Each Disbursement this Period

1389.76

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : VQZ6QA6BXY5**

Amount of Each Disbursement this Period

1	0	5	6	.	0	8
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. Rebecca C. Charen**

Mailing Address 1445 Otis Pl NW  
Apt 215

City Washington State DC Zip Code 20010-3212

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : VQZ6QA6BWW6**

Amount of Each Disbursement this Period

1	3	7	2	.	5	4
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : VQZ6QA6BY27**

Amount of Each Disbursement this Period

6	5	0	2	.	0	6
---	---	---	---	---	---	---

Memo Item

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

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

0	0	0
---	---	---

0	0	0
---	---	---

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 28 / 2016

Transaction ID : VQZ6QA6BX57

Amount of Each Disbursement this Period

1614.72

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 28 / 2016

Transaction ID : VQZ6QA6BX08

Amount of Each Disbursement this Period

1351.84

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Karla Towle**

Mailing Address 2637 16th St NW  
Apt 203

City Washington State DC Zip Code 20009-4219

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 28 / 2016

Transaction ID : VQZ6QA6BYA8

Amount of Each Disbursement this Period

1563.80

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 28 / 2016

Transaction ID : VQZ6QA6BXX8

Amount of Each Disbursement this Period

3819.91

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 28 / 2016

Transaction ID : VQZ6QA6BX99

Amount of Each Disbursement this Period

2621.27

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 28 / 2016

Transaction ID : VQZ6QA6BXE9

Amount of Each Disbursement this Period

3263.02

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6BWH9

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QPG4

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QVG4

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Payroll Data Processing</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2016
Mailing Address 4224 Henderson Blvd		<b>Transaction ID : VQZ6QA6R330</b>
City Tampa	State FL	
Purpose of Disbursement Payroll Services: Non-Contribution Account		Amount of Each Disbursement this Period 111.68
Candidate Name		<input checked="" 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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Payroll Data Processing</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2016
Mailing Address 4224 Henderson Blvd		<b>Transaction ID : VQZ6QA6R322</b>
City Tampa	State FL	
Purpose of Disbursement Payroll Taxes: Non-Contribution Account		Amount of Each Disbursement this Period 28646.08
Candidate Name		<input checked="" 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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Central Parking System</b>		Date of Disbursement MM / DD / YYYY 03 / 22 / 2016
Mailing Address 720 Olive St Ste 1650		<b>Transaction ID : VQZ6QA70KQ4</b>
City Saint Louis	State MO	
Purpose of Disbursement Parking: Non-Contribution Account		Amount of Each Disbursement this Period 360.00
Candidate Name		<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:	Category/Type	

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

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

360.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Quick Messenger Service**

Mailing Address 4829 Fairmont Ave  
Ste B

City Bethesda State MD Zip Code 20814-6097

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QTS4**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70KW4**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA7BG11**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA7BFV3

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Peer Choice Awards**

Mailing Address 3975 University Dr  
Ste 200

City Fairfax State VA Zip Code 22030-2520

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA7BF85

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA7BET5

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Email Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA7BF77**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA7BER9**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Rebecca C. Charen**

Mailing Address 1445 Otis PI NW  
Apt 215

City Washington State DC Zip Code 20010-3212

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QXW4**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QY71

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QY63

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Dewey Square Group**

Mailing Address PO Box 60340

City Charlotte State NC Zip Code 28260-0340

Purpose of Disbursement  
Video Consulting and Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA70M05

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement Retirement Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 25 / 2016

Transaction ID : VQZ6QA6CQ05

Amount of Each Disbursement this Period

3682.49

Memo Item

Full Name (Last, First, Middle Initial)

**B. Karla Towle**

Mailing Address 2637 16th St NW Apt 203

City Washington State DC Zip Code 20009-4219

Purpose of Disbursement Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : VQZ6QA6QT15

Amount of Each Disbursement this Period

28.21

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

Transaction ID : VQZ6QA6QT30

Amount of Each Disbursement this Period

10.05

Memo Item

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

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

3710.70

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2016

Transaction ID : VQZ6QA6QT56

Amount of Each Disbursement this Period

6.41

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2016

Transaction ID : VQZ6QA6QT48

Amount of Each Disbursement this Period

6.86

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Washington Metropolitan Area Transit Authority**

Mailing Address 600 5th St NW

City Washington State DC Zip Code 20001-2610

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : VQZ6QA70M55

Amount of Each Disbursement this Period

1270.00

Memo Item

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

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

1270.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. LexisNexis**

Mailing Address PO Box 72477090

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2016

Transaction ID : VQZ6QA6QV75

Amount of Each Disbursement this Period

2109.71

Memo Item

Full Name (Last, First, Middle Initial)

**B. Lauren Green**

Mailing Address 1400 E West Hwy Apt 919

City Silver Spring State MD Zip Code 20910-3260

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA70KD5

Amount of Each Disbursement this Period

261.54

Memo Item

Full Name (Last, First, Middle Initial)

**C. Budget**

Mailing Address 141 Industrial Park Rd

City Greer State SC Zip Code 29651-6628

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7FEE0

Amount of Each Disbursement this Period

216.03

Memo Item

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

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

2371.25

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QSE5

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QSG0

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QSJ6

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

**Transaction ID : VQZ6QA6QTF5**

Amount of Each Disbursement this Period

111.46

Memo Item

Full Name (Last, First, Middle Initial)

**B. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement Management Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

**Transaction ID : VQZ6QA6CGN5**

Amount of Each Disbursement this Period

19092.42

Memo Item

Full Name (Last, First, Middle Initial)

**C. West Wing Writers**

Mailing Address 1150 Connecticut Ave NW  
Ste 505

City Washington State DC Zip Code 20036-4138

Purpose of Disbursement Communications Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 09 / 2016

**Transaction ID : VQZ6QA7B7Q5**

Amount of Each Disbursement this Period

27000.00

Memo Item

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

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

46203.88

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Joseph O'Connell</b>		Date of Disbursement MM / DD / YYYY 01 / 12 / 2016
Mailing Address 85 Manchester St Apt 107		<b>Transaction ID : VQZ6QA6CGT5</b>
City Concord	State NH	
Purpose of Disbursement Reimbursement, See Below If Itemized: Non-Contribution Account		Amount of Each Disbursement this Period 217.57
Candidate Name		<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. Joseph O'Connell</b>		Date of Disbursement MM / DD / YYYY 03 / 22 / 2016
Mailing Address 85 Manchester St Apt 107		<b>Transaction ID : VQZ6QA70JT5</b>
City Concord	State NH	
Purpose of Disbursement Reimbursement, See Below If Itemized: Non-Contribution Account		Amount of Each Disbursement this Period 152.50
Candidate Name		<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. Boston Logan International Airport</b>		Date of Disbursement MM / DD / YYYY 03 / 22 / 2016
Mailing Address 1 Harborside Dr		<b>Transaction ID : VQZ6QA7FE83</b>
City Boston	State MA	
Purpose of Disbursement Travel: Non-Contribution Account		Amount of Each Disbursement this Period 58.00
Candidate Name		<input checked="" 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).....▶	370.07
<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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. LexisNexis**

Mailing Address PO Box 72477090

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

Transaction ID : VQZ6QA6CPV5

Amount of Each Disbursement this Period

2109.71

Memo Item

Full Name (Last, First, Middle Initial)

**B. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement  
Retirement Contribution: Non-Contribution Account

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2016

Transaction ID : VQZ6QA79EV5

Amount of Each Disbursement this Period

4542.51

Memo Item

Full Name (Last, First, Middle Initial)

**C. Caryn Lenhoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : VQZ6QA6QPY5

Amount of Each Disbursement this Period

1475.38

Memo Item

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

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

8127.60

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 22 / 2016

Transaction ID : VQZ6QA70JZ5

Amount of Each Disbursement this Period

140.53

Memo Item

Full Name (Last, First, Middle Initial)

**B. Budget Car Rental**

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-3826

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 22 / 2016

Transaction ID : VQZ6QA7FCF4

Amount of Each Disbursement this Period

101.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : VQZ6QA6QQ26

Amount of Each Disbursement this Period

1462.82

Memo Item

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

1603.35

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70K36**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6CJ36**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QS46**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : VQZ6QA6QQ76

Amount of Each Disbursement this Period

354.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA70K86

Amount of Each Disbursement this Period

447.71

Memo Item

Full Name (Last, First, Middle Initial)

**C. Enterprise Rent a Car**

Mailing Address 1200 Airport Dr

City South Burlington State VT Zip Code 05403-6028

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7FEV3

Amount of Each Disbursement this Period

349.89

Memo Item

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

801.71

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70M96**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA79130**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Susan E. Madrak**

Mailing Address 4343 E Thompson St  
Apt 2

City Philadelphia State PA Zip Code 19137-1628

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA79180**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth S. Shappell**

Mailing Address 1718 P St NW  
Apt 213

City Washington State DC Zip Code 20036-1311

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 11 / 2016

Transaction ID : VQZ6QA791T0

Amount of Each Disbursement this Period

1221.43

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 11 / 2016

Transaction ID : VQZ6QA79281

Amount of Each Disbursement this Period

1452.48

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Justin Price**

Mailing Address 52 Castle Cary Ct

City Columbia State SC Zip Code 29209-4624

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 11 / 2016

Transaction ID : VQZ6QA791C1

Amount of Each Disbursement this Period

1793.10

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	6

**Transaction ID : VQZ6QA791G1**

Amount of Each Disbursement this Period

1	3	5	1	8	3
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. Caryn Lenhoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	6

**Transaction ID : VQZ6QA79122**

Amount of Each Disbursement this Period

1	4	7	5	3	8
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amanda Taylor**

Mailing Address 1825 Florida Ave NW  
Apt 21

City Washington State DC Zip Code 20009-1745

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	6

**Transaction ID : VQZ6QA79172**

Amount of Each Disbursement this Period

1	4	5	0	5	9
---	---	---	---	---	---

Memo Item

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

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

0	0	0
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0	0	0
---	---	---

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Margaret Ann Morgan</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2016
Mailing Address 1300 13th St NW Apt 703		<b>Transaction ID : VQZ6QA792C2</b>
City Washington	State DC	
Zip Code 20005-4477		Amount of Each Disbursement this Period 1693.57
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<input checked="" type="checkbox"/> Memo Item *
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:		

Full Name (Last, First, Middle Initial) <b>B. Joseph R. Wiley</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2016
Mailing Address 719 Euclid St NW Apt 3		<b>Transaction ID : VQZ6QA792H2</b>
City Washington	State DC	
Zip Code 20001-2200		Amount of Each Disbursement this Period 1491.16
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<input checked="" type="checkbox"/> Memo Item *
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:		

Full Name (Last, First, Middle Initial) <b>C. Joseph O'Connell</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2016
Mailing Address 85 Manchester St Apt 107		<b>Transaction ID : VQZ6QA791B3</b>
City Concord	State NH	
Zip Code 03301-5125		Amount of Each Disbursement this Period 1989.37
Purpose of Disbursement Salary & Mileage: Non-Contribution Account	Category/Type	<input checked="" type="checkbox"/> Memo Item *
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Karla Towle**

Mailing Address 2637 16th St NW  
Apt 203

City Washington State DC Zip Code 20009-4219

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA791M3**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA792T3**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Lauren Green**

Mailing Address 1400 E West Hwy  
Apt 919

City Silver Spring State MD Zip Code 20910-3260

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA790X3**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA79164**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA792B4**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA79265**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Benjamin Fischbein</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2016
Mailing Address 1350 Florida Ave NW Apt 303		<b>Transaction ID : VQZ6QA791F5</b>
City Washington	State DC	
Zip Code 20009-6024		Amount of Each Disbursement this Period 2621.25
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<input checked="" type="checkbox"/> Memo Item *
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:		

Full Name (Last, First, Middle Initial) <b>B. Anthony Baker</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2016
Mailing Address 4308 New Hampshire Ave NW		<b>Transaction ID : VQZ6QA790W5</b>
City Washington	State DC	
Zip Code 20011-4730		Amount of Each Disbursement this Period 1726.11
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<input checked="" type="checkbox"/> Memo Item *
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:		

Full Name (Last, First, Middle Initial) <b>C. Karen Smith-Murphy</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2016
Mailing Address 3101 Edgewood Rd		<b>Transaction ID : VQZ6QA79156</b>
City Kensington	State MD	
Zip Code 20895-2746		Amount of Each Disbursement this Period 1806.80
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<input checked="" type="checkbox"/> Memo Item *
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Rebecca C. Charen**

Mailing Address 1445 Otis PI NW  
Apt 215

City Washington State DC Zip Code 20010-3212

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	6

Transaction ID : VQZ6QA791A6

Amount of Each Disbursement this Period

1	3	7	2	.	5	4
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. Elizabeth Price**

Mailing Address 220 12th PI NE

City Washington State DC Zip Code 20002-6302

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	6

Transaction ID : VQZ6QA792A6

Amount of Each Disbursement this Period

2	2	5	2	.	1	3
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	6

Transaction ID : VQZ6QA79107

Amount of Each Disbursement this Period

1	4	5	1	.	7	7
---	---	---	---	---	---	---

Memo Item

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

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

0	0	0
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0	0	0
---	---	---

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : VQZ6QA74V27**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Shawn C. Drury**

Mailing Address 1 Canterbury Sq  
Apt 201

City Alexandria State VA Zip Code 22304-3073

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : VQZ6QA791E7**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Michael Schub**

Mailing Address 2400 16th St NW  
Apt 122

City Washington State DC Zip Code 20009-6607

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : VQZ6QA791J7**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daphne Zhang**

Mailing Address 211 Morgan St NW  
Apt A

City Washington State DC Zip Code 20001-1295

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA792K7**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA790V7**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. John Brammer**

Mailing Address 1483 Newton St NW  
Apt 204

City Washington State DC Zip Code 20010-3229

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA79148**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA79198**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA79298**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA792E8**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : VQZ6QA74V19**

Amount of Each Disbursement this Period

34276.18

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Daniel J. Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : VQZ6QA79249**

Amount of Each Disbursement this Period

413.33

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : VQZ6QA791D9**

Amount of Each Disbursement this Period

1242.01

Memo Item \*

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

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

0.00



**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"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Connor Shaw**

Mailing Address 244 12th St SE  
Apt A

City Washington State DC Zip Code 20003-1486

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : VQZ6QA791Z9**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QPF6**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QVM6**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QVP1

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QVN3

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6QVS5

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2016

Transaction ID : VQZ6QA6QVQ9

Amount of Each Disbursement this Period

19.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. Allenswood Group**

Mailing Address 2001 N Kenilworth St

City Arlington State VA Zip Code 22205-3130

Purpose of Disbursement  
Video Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

Transaction ID : VQZ6QA70KP6

Amount of Each Disbursement this Period

11500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Central Parking System**

Mailing Address 720 Olive St  
Ste 1650

City Saint Louis State MO Zip Code 63101-2329

Purpose of Disbursement  
Parking: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

Transaction ID : VQZ6QA70KV6

Amount of Each Disbursement this Period

180.00

Memo Item

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

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

11680.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA70M47

Amount of Each Disbursement this Period

16236.90

Memo Item

Full Name (Last, First, Middle Initial)

**B. Budget Car Rental**

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-3826

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BF10

Amount of Each Disbursement this Period

68.89

Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFF0

Amount of Each Disbursement this Period

560.20

Memo Item

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

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

16236.90

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA7BFR0

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Budget Car Rental**

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-3826

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA7BEW0

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA7BF51

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Budget Car Rental**

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-3826

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFW1

Amount of Each Disbursement this Period

47.27

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BF02

Amount of Each Disbursement this Period

406.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFK2

Amount of Each Disbursement this Period

69.88

Memo Item

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFQ2

Amount of Each Disbursement this Period

353.70

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109-5210

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BEV2

Amount of Each Disbursement this Period

543.51

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BG03

Amount of Each Disbursement this Period

55.06

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Hotels.com**

Mailing Address 5400 LBJ Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BF93

Amount of Each Disbursement this Period

968.40

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Best Buy**

Mailing Address 3100 14th St NW

City Washington State DC Zip Code 20010-2415

Purpose of Disbursement  
Hardware: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFE3

Amount of Each Disbursement this Period

7525.93

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BF44

Amount of Each Disbursement this Period

568.20

Memo Item \*

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

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

0.00



**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFJ4

Amount of Each Disbursement this Period

673.70

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFP4

Amount of Each Disbursement this Period

11.16

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Extended Stay America**

Mailing Address 11525 N Community House Rd  
Ste 100

City Charlotte State NC Zip Code 28277-3610

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7BEZ4

Amount of Each Disbursement this Period

492.53

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FL 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFD5

Amount of Each Disbursement this Period

22.59

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFT5

Amount of Each Disbursement this Period

67.56

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Budget Car Rental**

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-3826

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFZ5

Amount of Each Disbursement this Period

48.75

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA7BF36**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines, Inc.**

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA7BFH6**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA7BFN6**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Microsoft**

Mailing Address 205 108th Ave NE  
Ste 400

City Bellevue State WA Zip Code 98004-5770

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA7BEY6**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Qdoba**

Mailing Address 7244 W Bonfils Ln

City Lakewood State CO Zip Code 80226-3487

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA7BFC7**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA7BES7**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address 800 K St NW

City Washington State DC Zip Code 20001-8000

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFS7

Amount of Each Disbursement this Period

96.75

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Orbitz**

Mailing Address 500 W Madison St Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFY7

Amount of Each Disbursement this Period

81.08

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Budget Car Rental**

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-3826

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : VQZ6QA7BFG8

Amount of Each Disbursement this Period

22.95

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Chop't**

Mailing Address 730 7th St NW

City Washington State DC Zip Code 20001-3716

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

**Transaction ID : VQZ6QA7BEX8**

Amount of Each Disbursement this Period

350.40

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

**Transaction ID : VQZ6QA7BF69**

Amount of Each Disbursement this Period

767.20

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

**Transaction ID : VQZ6QA7BFX9**

Amount of Each Disbursement this Period

73.91

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Granholm Mulhern Associates**

Mailing Address 21 Chelsea Ct

City State Zip Code  
Oakland CA 94611-2416

Purpose of Disbursement  
Communications Consulting and Travel Expenses: Non-Contribution Account

Candidate Name

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

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 12 / 2016

Transaction ID : VQZ6QA6QV67

Amount of Each Disbursement this Period

16922.92

Memo Item

Full Name (Last, First, Middle Initial)

**B. Granholm Mulhern Associates**

Mailing Address 21 Chelsea Ct

City State Zip Code  
Oakland CA 94611-2416

Purpose of Disbursement  
Travel Expenses: Non-Contribution Account

Candidate Name

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

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 11 / 2016

Transaction ID : VQZ6QA6QS87

Amount of Each Disbursement this Period

1336.60

Memo Item

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City State Zip Code  
Alexandria VA 22304-8702

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

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

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 23 / 2016

Transaction ID : VQZ6QA6QY97

Amount of Each Disbursement this Period

10147.10

Memo Item

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

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

28406.62

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6S720

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109-5210

Purpose of Disbursement  
Equipment: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6S870

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109-5210

Purpose of Disbursement  
Equipment: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6S7F0

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2016

Transaction ID : VQZ6QA6S9J0

Amount of Each Disbursement this Period

87.52

Memo Item

Full Name (Last, First, Middle Initial)

**B. Budget Car Rental**

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-3826

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : VQZ6QA6S761

Amount of Each Disbursement this Period

137.93

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2016

Transaction ID : VQZ6QA6S9P1

Amount of Each Disbursement this Period

25.04

Memo Item

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Chop't</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2016
Mailing Address 730 7th St NW		<b>Transaction ID : VQZ6QA6S712</b>
City Washington	State DC	
Zip Code 20001-3716		Amount of Each Disbursement this Period 381.20
Purpose of Disbursement Meals: Non-Contribution Account	Category/Type	<input checked="" type="checkbox"/> Memo Item *
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:		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2016
Mailing Address 4333 Amon Carter Blvd		<b>Transaction ID : VQZ6QA6S8Y2</b>
City Ft Worth	State TX	
Zip Code 76155-2605		Amount of Each Disbursement this Period 228.10
Purpose of Disbursement Travel: Non-Contribution Account	Category/Type	<input checked="" type="checkbox"/> Memo Item *
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:		

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2016
Mailing Address PO Box 20706		<b>Transaction ID : VQZ6QA6S973</b>
City Atlanta	State GA	
Zip Code 30320-6001		Amount of Each Disbursement this Period 519.20
Purpose of Disbursement Travel: Non-Contribution Account	Category/Type	<input checked="" type="checkbox"/> Memo Item *
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2016

Transaction ID : VQZ6QA6S9N3

Amount of Each Disbursement this Period

16.05

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. United States Postal Service**

Mailing Address 800 K St NW

City Washington State DC Zip Code 20001-8000

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2016

Transaction ID : VQZ6QA6S9G4

Amount of Each Disbursement this Period

90.30

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Thinkstock, LLC**

Mailing Address 501 N College St

City Charlotte State NC Zip Code 28202-2213

Purpose of Disbursement  
Graphics Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2016

Transaction ID : VQZ6QA6S8X4

Amount of Each Disbursement this Period

197.96

Memo Item \*

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

0.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	1	6

Transaction ID : VQZ6QA6S9M5

Amount of Each Disbursement this Period

9	0	.	4	5
---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. Budget Car Rental**

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-3826

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	1	6

Transaction ID : VQZ6QA6S896

Amount of Each Disbursement this Period

1	5	.	1	8	3
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	1	6

Transaction ID : VQZ6QA6S9A6

Amount of Each Disbursement this Period

4	9	.	9	9
---	---	---	---	---

Memo Item

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

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

0	0	0
---	---	---

0	0	0
---	---	---

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6S9F6

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Best Buy**

Mailing Address 3100 14th St NW

City Washington State DC Zip Code 20010-2415

Purpose of Disbursement  
Hardware: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6S6T6

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6S8W6

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 410 Terry Ave N

City State Zip Code  
Seattle WA 98109-5210

Purpose of Disbursement  
Equipment: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

**Transaction ID : VQZ6QA6S907**

Amount of Each Disbursement this Period

110.04
--------

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. United Airlines, Inc.**

Mailing Address 233 S Wacker Dr

City State Zip Code  
Chicago IL 60606-7147

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2016

**Transaction ID : VQZ6QA6S8D7**

Amount of Each Disbursement this Period

763.20
--------

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City State Zip Code  
Atlanta GA 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

**Transaction ID : VQZ6QA6S8J7**

Amount of Each Disbursement this Period

794.60
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Memo Item \*

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

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

0.00
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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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2016

**Transaction ID : VQZ6QA6S9K7**

Amount of Each Disbursement this Period

38.99
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2016

**Transaction ID : VQZ6QA6S7T7**

Amount of Each Disbursement this Period

1146.20
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St  
Ste 1000

City Chicago State IL Zip Code 60661-2559

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2016

**Transaction ID : VQZ6QA6S9E8**

Amount of Each Disbursement this Period

76.31
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Memo Item

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

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

0.00
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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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Vonage**

Mailing Address PO Box 392415

City Pittsburgh State PA Zip Code 15251-9415

Purpose of Disbursement Telephone: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 16 / 2016

Transaction ID : VQZ6QA6S8P8

Amount of Each Disbursement this Period

619.86

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Buca di Beppo**

Mailing Address 1825 Connecticut Ave NW

City Washington State DC Zip Code 20009-5708

Purpose of Disbursement Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2016

Transaction ID : VQZ6QA6S6Y8

Amount of Each Disbursement this Period

446.12

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Expedia, Inc.**

Mailing Address 333 108th Ave NE

City Bellevue State WA Zip Code 98004-5703

Purpose of Disbursement Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 19 / 2016

Transaction ID : VQZ6QA6S779

Amount of Each Disbursement this Period

58.47

Memo Item \*

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

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

0.00



**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City State Zip Code  
Ft Worth TX 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 05 / 2016

Transaction ID : VQZ6QA6S9Q9

Amount of Each Disbursement this Period

25.04

Memo Item

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City State Zip Code  
San Jose CA 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 15 / 2016

Transaction ID : VQZ6QA6S8Z9

Amount of Each Disbursement this Period

49.99

Memo Item

Full Name (Last, First, Middle Initial)

**C. Angelo Carusone**

Mailing Address 2501 Porter St NW  
Apt 520

City State Zip Code  
Washington DC 20008-1253

Purpose of Disbursement  
Digital Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 03 / 2016

Transaction ID : VQZ6QA6QPA7

Amount of Each Disbursement this Period

13740.00

Memo Item

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

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

13740.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Lauren Green**

Mailing Address 1400 E West Hwy  
Apt 919

City Silver Spring State MD Zip Code 20910-3260

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA79GA7**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QQB7**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Rebecca C. Charen**

Mailing Address 1445 Otis Pl NW  
Apt 215

City Washington State DC Zip Code 20010-3212

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70KC7**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

Transaction ID : VQZ6QA7F3N1

Amount of Each Disbursement this Period

8.02

Memo Item

Full Name (Last, First, Middle Initial)

**B. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 29 / 2016

Transaction ID : VQZ6QA6QYE7

Amount of Each Disbursement this Period

78250.67

Memo Item

Full Name (Last, First, Middle Initial)

**C. Connor Shaw**

Mailing Address 244 12th St SE  
Apt A

City Washington State DC Zip Code 20003-1486

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 29 / 2016

Transaction ID : VQZ6QA6R490

Amount of Each Disbursement this Period

1281.75

Memo Item

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

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

78250.67

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel J. Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2016

Transaction ID : VQZ6QA6R4J1

Amount of Each Disbursement this Period

413.32

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2016

Transaction ID : VQZ6QA6R3Z1

Amount of Each Disbursement this Period

353.99

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2016

Transaction ID : VQZ6QA6R432

Amount of Each Disbursement this Period

1614.73

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. David Brock</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 2310 California St NW		<b>Transaction ID : VQZ6QA6R482</b>
City Washington State DC Zip Code 20008-1637	Amount of Each Disbursement this Period 4521.56	
Purpose of Disbursement Salary: Non-Contribution Account	Category/ Type	* <input checked="" type="checkbox"/> Memo Item
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. Payroll Data Processing</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 4224 Henderson Blvd		<b>Transaction ID : VQZ6QA6R363</b>
City Tampa State FL Zip Code 33629-5611	Amount of Each Disbursement this Period 111.68	
Purpose of Disbursement Payroll Services: Non-Contribution Account	Category/ Type	* <input checked="" type="checkbox"/> Memo Item
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. Adrienne Watson</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 440 K St NW Apt 714		<b>Transaction ID : VQZ6QA6R4H3</b>
City Washington State DC Zip Code 20001-2890	Amount of Each Disbursement this Period 3559.67	
Purpose of Disbursement Salary: Non-Contribution Account	Category/ Type	* <input checked="" type="checkbox"/> Memo Item
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6R3S3**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Caryn Lenhoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA709W3**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6R3Y3**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Ryan Migeed</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 1810 California St NW Apt 204		<b>Transaction ID : VQZ6QA6R474</b>
City Washington	State DC	
Zip Code 20009-1826	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1189.37
Candidate Name	Category/Type	<input checked="" 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. Camden Weber</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 1001 N Vermont St Apt 810		<b>Transaction ID : VQZ6QA6R4C4</b>
City Arlington	State VA	
Zip Code 22201-4767	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1171.44
Candidate Name	Category/Type	<input checked="" 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. Elizabeth Price</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 220 12th PI NE		<b>Transaction ID : VQZ6QA6Z5M4</b>
City Washington	State DC	
Zip Code 20002-6302	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 2252.13
Candidate Name	Category/Type	<input checked="" 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).....▶	0.00
<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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Rebecca C. Charen**

Mailing Address 1445 Otis PI NW  
Apt 215

City Washington State DC Zip Code 20010-3212

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6R425**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6R355**

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Karla Towle**

Mailing Address 2637 16th St NW  
Apt 203

City Washington State DC Zip Code 20009-4219

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6R4G5**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6R3X5**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6R4B6**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6R417**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6R4F7

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Lauren Green**

Mailing Address 1400 E West Hwy  
Apt 919

City Silver Spring State MD Zip Code 20910-3260

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA709T7

Amount of Each Disbursement this Period

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6R3W7

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Samuel F. Ritzman</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 2201 L St NW Apt 518		<b>Transaction ID : VQZ6QA6R458</b>
City Washington	State DC	
Zip Code 20037-1412	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 3819.91
Candidate Name	Category/Type	<input checked="" 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. Benjamin Williams</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 2568 Sherman Ave NW Apt 2		<b>Transaction ID : VQZ6QA6R4A8</b>
City Washington	State DC	
Zip Code 20001-2237	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1467.74
Candidate Name	Category/Type	<input checked="" 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. Michael Schub</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 2400 16th St NW Apt 122		<b>Transaction ID : VQZ6QA6Z5J8</b>
City Washington	State DC	
Zip Code 20009-6607	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1389.76
Candidate Name	Category/Type	<input checked="" 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).....▶	0.00
<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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2016

**Transaction ID : VQZ6QA6R409**

Amount of Each Disbursement this Period

2621.25

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2016

**Transaction ID : VQZ6QA6R4E9**

Amount of Each Disbursement this Period

6502.05

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2016

**Transaction ID : VQZ6QA6R3V9**

Amount of Each Disbursement this Period

1451.76

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

**Transaction ID : VQZ6QA6QQG7**

Amount of Each Disbursement this Period

1127.04

Memo Item

Full Name (Last, First, Middle Initial)

**B. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 23 / 2016

**Transaction ID : VQZ6QA6QXH7**

Amount of Each Disbursement this Period

297.33

Memo Item

Full Name (Last, First, Middle Initial)

**C. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2016

**Transaction ID : VQZ6QA6BWJ7**

Amount of Each Disbursement this Period

151.67

Memo Item

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

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

1576.04

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA70JS7

Amount of Each Disbursement this Period

72.43

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7F3S2

Amount of Each Disbursement this Period

15.84

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7F423

Amount of Each Disbursement this Period

12.41

Memo Item

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

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

72.43

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7F415

Amount of Each Disbursement this Period

8.86

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA7F3V8

Amount of Each Disbursement this Period

10.32

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Comet Ping Pong**

Mailing Address 5037 Connecticut Ave NW

City Washington State DC Zip Code 20008-2024

Purpose of Disbursement  
Catering: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 06 / 2016

Transaction ID : VQZ6QA6CGS7

Amount of Each Disbursement this Period

3584.64

Memo Item

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

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

3584.64

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Group Benefit Service**

Mailing Address PO Box 64802

City Baltimore State MD Zip Code 21264-4802

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA6CPT7

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Elizabeth Price**

Mailing Address 220 12th PI NE

City Washington State DC Zip Code 20002-6302

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA70JY7

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Westin Southfield Detroit**

Mailing Address 1500 Town Ctr

City Southfield State MI Zip Code 48075-1141

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA7FFH7

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Westin Southfield Detroit**

Mailing Address 1500 Town Ctr

City Southfield State MI Zip Code 48075-1141

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2016

**Transaction ID : VQZ6QA7FFX9**

Amount of Each Disbursement this Period

224.87

Memo Item

Full Name (Last, First, Middle Initial)

**B. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Management Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 21 / 2016

**Transaction ID : VQZ6QA6CPZ7**

Amount of Each Disbursement this Period

19092.42

Memo Item

Full Name (Last, First, Middle Initial)

**C. Group Benefit Service**

Mailing Address PO Box 64802

City Baltimore State MD Zip Code 21264-4802

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 22 / 2016

**Transaction ID : VQZ6QA70KZ7**

Amount of Each Disbursement this Period

1157.28

Memo Item

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

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

20249.70

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. John Brammer**

Mailing Address 1483 Newton St NW  
Apt 204

City Washington State DC Zip Code 20010-3229

Purpose of Disbursement  
Refunded Retirement Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : VQZ6QA79EZ7**

Amount of Each Disbursement this Period

63.44

Memo Item

Full Name (Last, First, Middle Initial)

**B. Daniel J. Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2016

**Transaction ID : VQZ6QA6QQ18**

Amount of Each Disbursement this Period

413.32

Memo Item

Full Name (Last, First, Middle Initial)

**C. Justin Price**

Mailing Address 52 Castle Cary Ct

City Columbia State SC Zip Code 29209-4624

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : VQZ6QA70K28**

Amount of Each Disbursement this Period

53.62

Memo Item

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

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

530.38

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : VQZ6QA6QS38

Amount of Each Disbursement this Period

2954.58

Memo Item

Full Name (Last, First, Middle Initial)

**B. Washington Metropolitan Area Transit Authority**

Mailing Address 600 5th St NW

City Washington State DC Zip Code 20001-2610

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 25 / 2016

Transaction ID : VQZ6QA6CQ38

Amount of Each Disbursement this Period

1030.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lauren Green**

Mailing Address 1400 E West Hwy  
Apt 919

City Silver Spring State MD Zip Code 20910-3260

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 08 / 2016

Transaction ID : VQZ6QA70K78

Amount of Each Disbursement this Period

102.51

Memo Item

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

4087.09

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA7B498**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Budget Car Rental**

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-3826

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA7B4P1**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Boston Logan International Airport**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128-2907

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA7B4S5**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Wild Onion Media**

Mailing Address 217 Camaro Way

City San Marcos State TX Zip Code 78666-3035

Purpose of Disbursement  
Video Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70MD8**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bonner Group**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2783

Purpose of Disbursement  
Fundraising Consulting and Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QVF8**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Blue State Digital**

Mailing Address 406 7th St NW  
FI 3

City Washington State DC Zip Code 20004-2260

Purpose of Disbursement  
Digital Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QVK8**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Bonner Group**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2783

Purpose of Disbursement  
Fundraising Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
03 / 08 / 2016

**Transaction ID : VQZ6QA70KN8**

Amount of Each Disbursement this Period

72156.25

Memo Item

Full Name (Last, First, Middle Initial)

**B. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
02 / 11 / 2016

**Transaction ID : VQZ6QA6QTQ8**

Amount of Each Disbursement this Period

379.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. Anchorage Inn**

Mailing Address 108 Dorset St

City Burlington State VT Zip Code 05408-1908

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
02 / 07 / 2016

**Transaction ID : VQZ6QA6QTR6**

Amount of Each Disbursement this Period

379.50

Memo Item

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

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

72535.75

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Union Source**

Mailing Address PO Box 15084

City Washington State DC Zip Code 20003-0084

Purpose of Disbursement  
Printing: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QTW8**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Granholm Mulhern Associates**

Mailing Address 21 Chelsea Ct

City Oakland State CA Zip Code 94611-2416

Purpose of Disbursement  
Communications Consulting and Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA70M39**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Allenswood Group**

Mailing Address 2001 N Kenilworth St

City Arlington State VA Zip Code 22205-3130

Purpose of Disbursement  
Video Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA6QV59**

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Allenswood Group</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2016
Mailing Address 2001 N Kenilworth St		<b>Transaction ID : VQZ6QA6QS79</b>
City Arlington	State VA	
Zip Code 22205-3130	Purpose of Disbursement Video Consulting: Non-Contribution Account	Amount of Each Disbursement this Period 11500.00
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. Perkins Coie LLP</b>		Date of Disbursement MM / DD / YYYY 03 / 22 / 2016
Mailing Address 1201 3rd Ave Ste 4900		<b>Transaction ID : VQZ6QA70M89</b>
City Seattle	State WA	
Zip Code 98101-3095	Purpose of Disbursement Legal Services: Non-Contribution Account	Amount of Each Disbursement this Period 15000.00
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. Joseph R. Wiley</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2016
Mailing Address 719 Euclid St NW Apt 3		<b>Transaction ID : VQZ6QA6QQA9</b>
City Washington	State DC	
Zip Code 20001-2200	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1491.16
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).....▶	27991.16
<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"/> 24	<input type="checkbox"/> 25	<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

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : VQZ6QA70KB9

Amount of Each Disbursement this Period

1731.04

Memo Item

Full Name (Last, First, Middle Initial)

**B. MBA Consulting Group**

Mailing Address 611 Pennsylvania Ave SE # 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement  
Compliance & Accounting Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 26 / 2016

Transaction ID : VQZ6QA6QYD9

Amount of Each Disbursement this Period

5141.17

Memo Item

Full Name (Last, First, Middle Initial)

**C. Katherine Paris**

Mailing Address 15830 S Park Blvd

City Shaker Heights State OH Zip Code 44120-1671

Purpose of Disbursement  
Strategic Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2016

Transaction ID : VQZ6QA70JR9

Amount of Each Disbursement this Period

10800.00

Memo Item

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

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

17672.21

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address 200 Vesey St

City New York State NY Zip Code 10281-1013

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : VQZ6QA70WS9

Amount of Each Disbursement this Period

790.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address 200 Vesey St

City New York State NY Zip Code 10281-1013

Purpose of Disbursement  
Membership Fees: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : VQZ6QA70WW3

Amount of Each Disbursement this Period

395.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address 200 Vesey St

City New York State NY Zip Code 10281-1013

Purpose of Disbursement  
Membership Fees: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : VQZ6QA70WV5

Amount of Each Disbursement this Period

395.00

Memo Item

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

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

790.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. West Wing Writers**

Mailing Address 1150 Connecticut Ave NW  
Ste 505

City Washington State DC Zip Code 20036-4138

Purpose of Disbursement  
Communications Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 09 / 2016

Transaction ID : VQZ6QA7B7T9

Amount of Each Disbursement this Period

17000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2016

Transaction ID : VQZ6QA6QWX9

Amount of Each Disbursement this Period

851.43

Memo Item

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2016

Transaction ID : VQZ6QA6QX61

Amount of Each Disbursement this Period

8.00

Memo Item

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

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

17851.43

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Budget**

Mailing Address 1 Airport Rd

City Manchester State NH Zip Code 03103-7450

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2016

**Transaction ID : VQZ6QA6QXA2**

Amount of Each Disbursement this Period

216.60

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Holiday Inn Nashua**

Mailing Address 9 Northeastern Blvd

City Nashua State NH Zip Code 03062-3112

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2016

**Transaction ID : VQZ6QA6QXF2**

Amount of Each Disbursement this Period

222.36

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2016

**Transaction ID : VQZ6QA6QX53**

Amount of Each Disbursement this Period

8.00

Memo Item \*

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

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

0.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 06 / 2016

Transaction ID : VQZ6QA6QX86

Amount of Each Disbursement this Period

13.92

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Holiday Inn Nashua**

Mailing Address 9 Northeastern Blvd

City Nashua State NH Zip Code 03062-3112

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2016

Transaction ID : VQZ6QA6QXD6

Amount of Each Disbursement this Period

299.41

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Reimbursement, See Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 08 / 2016

Transaction ID : VQZ6QA70JX9

Amount of Each Disbursement this Period

68.00

Memo Item

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

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

68.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Boston Logan International Airport**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128-2907

Purpose of Disbursement  
Parking: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA7F8G3

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Union Source**

Mailing Address PO Box 15084

City Washington State DC Zip Code 20003-0084

Purpose of Disbursement  
Printing: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA79EY9

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 175 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Correct the Record**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>West Wing Writers</b>	Nature of Debt (Purpose): Communications Consultant
Mailing Address 1150 Connecticut Ave NW Ste 505	
City State Zip Code Washington DC 20036-4138	

Outstanding Balance Beginning This Period 27000.00	<b>Transaction ID : VQX879H8GR2</b>	
Amount Incurred This Period 0.00	Payment This Period 27000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>West Wing Writers</b>	Nature of Debt (Purpose): Communications Consultant
Mailing Address 1150 Connecticut Ave NW Ste 505	
City State Zip Code Washington DC 20036-4138	

Outstanding Balance Beginning This Period 17000.00	<b>Transaction ID : VQX879H8GQ4</b>	
Amount Incurred This Period 0.00	Payment This Period 17000.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>West Wing Writers</b>	Nature of Debt (Purpose): Communications Consultant and Transcription Services
Mailing Address 1150 Connecticut Ave NW Ste 505	
City State Zip Code Washington DC 20036-4138	

Outstanding Balance Beginning This Period 17845.00	<b>Transaction ID : VQX879H8GP6</b>	
Amount Incurred This Period 0.00	Payment This Period 17845.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 176 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Correct the Record**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>West Wing Writers</b>	Nature of Debt (Purpose): Communications Consultant
Mailing Address 1150 Connecticut Ave NW Ste 505	
City State Zip Code Washington DC 20036-4138	

Outstanding Balance Beginning This Period 47000.00	<b>Transaction ID : VQX879H8GN8</b>	
Amount Incurred This Period 0.00	Payment This Period 47000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	0.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	