



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**4 MA PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value=""/>	<input type="text" value="11094.96"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="18960.01"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="51637.00"/>	<input type="text" value="146687.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="70597.01"/>	<input type="text" value="157781.96"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="52078.37"/>	<input type="text" value="139263.32"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="18518.64"/>	<input type="text" value="18518.64"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**4 MA PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y 11 / 24 / 2014

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).....	40337.00	127787.00
(ii) Unitemized .....	100.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	40437.00	127987.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	17500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	50437.00	145487.00
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).....	1200.00	1200.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	51637.00	146687.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	51637.00	146687.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	4678.37	14263.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4678.37	14263.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	45400.00	123000.00
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 .....	2000.00	2000.00
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)) ..	52078.37	139263.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	52078.37	139263.32

**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) .....	50437.00	145487.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	50437.00	145487.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4678.37	14263.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1200.00	1200.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3478.37	13063.32

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

to disclose additional in-kind contribution.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 33  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**4 MA PAC**

**A. Josh Bekenstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52 High Rock Rd  
 City Wayland State MA Zip Code 01778-3608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Bain Capital Occupation Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2014  
**Transaction ID : VNHWQD7K2F0**  
 Amount of Each Receipt this Period  
 5000.00

**B. Joshua Boger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 243 Old Pickard Rd  
 City Concord State MA Zip Code 01742-4727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2014  
**Transaction ID : VNHWQD91XG9**  
 Amount of Each Receipt this Period  
 2500.00

**C. Constance Boland**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 490 W End Ave Apt 4A  
 City New York State NY Zip Code 10024-4330  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Nixon Peabody, LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 564.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2014  
**Transaction ID : VNHWQD6TTY2**  
 Amount of Each Receipt this Period  
 564.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8064.00  
**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 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**4 MA PAC**

**A. Joseph L Boren**  
Full Name (Last, First, Middle Initial)

Mailing Address 380 W 12th St  
Apt 3A

City New York State NY Zip Code 10014-7212

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

Name of Employer Ironshore Environmental Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 24 / 2014  
**Transaction ID : VNHWQD5XD34**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 50 Winslow St

City Cambridge State MA Zip Code 02138-6735

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

Name of Employer Broad Institute Occupation Biotech

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
10 / 28 / 2014  
**Transaction ID : VNHWQD6TV73**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 59 Highland Ave

City Sudbury State MA Zip Code 01776-3318

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

Name of Employer Waterville Consulting Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
10 / 27 / 2014  
**Transaction ID : VNHWQD8V4T6**

Amount of Each Receipt this Period  
2500.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**4 MA PAC**

**A. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
14500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 11 / 2014  
**Transaction ID : VNHWQD8V4T6E**

Amount of Each Receipt this Period  
 2500.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B. Winston Henderson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 70 Northampton St  
Apt 101

City Boston	State MA	Zip Code 02118-1826
----------------	-------------	------------------------

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

Name of Employer Nano Terra, Inc.	Occupation Vice President
	Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2014  
**Transaction ID : VNHWQD6M876**

Amount of Each Receipt this Period  
 2500.00

\* Earmarked Contribution: See Below

**C. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
14500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2014  
**Transaction ID : VNHWQD6M876E**

Amount of Each Receipt this Period  
 2500.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 33  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)  
**A. Jonathan Lavine**

Mailing Address 56 Chestnut St

City State Zip Code  
Weston MA 02493-1533

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

Name of Employer Occupation  
Bain Capital, LLC Investor

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 19 / 2014

**Transaction ID : VNHWQD91XJ5**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 111 Wayland Ave  
The Mayforth Group

City State Zip Code  
Providence RI 02906-4371

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

Name of Employer Occupation  
The Mayforth Group Principal

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
523.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 23 / 2014

**Transaction ID : VNHWQD9MRW2**

Amount of Each Receipt this Period  
523.00

\* In-Kind: In-kind: event catering

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

Mailing Address 110 Yarmouth Rd

City State Zip Code  
Chestnut Hill MA 02467-2800

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

Name of Employer Occupation  
Brigham and Women's Hospital President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 28 / 2014

**Transaction ID : VNHWQD8V4V3**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6523.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**4 MA PAC**

**A. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
14500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	11	/	2014

**Transaction ID : VNHWQD8V4V3E**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B. Bryan F Rafanelli**  
Full Name (Last, First, Middle Initial)  
Mailing Address 90 E Brookline St  
Unit 1

City Boston	State MA	Zip Code 02118-2302
----------------	-------------	------------------------

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

Name of Employer Rafanelli Events	Occupation CEO
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2014

**Transaction ID : VNHWQD8V4S8**

Amount of Each Receipt this Period  
2500.00

\* Earmarked Contribution: See Below

**C. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
14500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	11	/	2014

**Transaction ID : VNHWQD8V4S8E**

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<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 12 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**4 MA PAC**

**A. Jeffrey Robbins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 76 Shade St  
 City Lexington State MA Zip Code 02421-7721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Mintz Levin Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 20 / 2014  
**Transaction ID : VNHWQD6M850**  
 Amount of Each Receipt this Period 2500.00  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 14500.00

Date of Receipt 10 / 28 / 2014  
**Transaction ID : VNHWQD6M850E**  
 Amount of Each Receipt this Period 2500.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C. Michael Rosenblatt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 876 Beacon St Apt 5  
 City Newton Center State MA Zip Code 02459-1835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Merck Occupation Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2014  
**Transaction ID : VNHWQD6TVB4**  
 Amount of Each Receipt this Period 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2750.00
<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 13 OF 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**4 MA PAC**

**A. Gerald Schuster**  
Full Name (Last, First, Middle Initial)

Mailing Address 101 Jungle Rd

City State Zip Code  
Palm Beach FL 33480-4809

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

Name of Employer Occupation  
Continental Wingate Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2014

**Transaction ID : VNHWQD6TVF6**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 1570 E Mountain Dr

City State Zip Code  
Santa Barbara CA 93108-1302

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

Name of Employer Occupation  
Global Green USA environmental consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2014

**Transaction ID : VNHWQD6M884**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City State Zip Code  
West Somerville MA 02144-0031

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
14500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2014

**Transaction ID : VNHWQD6M884E**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)  
**A. Kevin Tabb**

Mailing Address **64 Beethoven Ave**

City **Waban** State **MA** Zip Code **02468-1729**

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

Name of Employer **BIDMC** Occupation **Physician**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2014**

**Transaction ID : VNHWQD6M868**

Amount of Each Receipt this Period  
**2500.00**

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation  
 Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **14500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 28 / 2014**

**Transaction ID : VNHWQD6M868E**

Amount of Each Receipt this Period  
**2500.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**c. Christopher Vitale**

Mailing Address **10 Acacia Rd**

City **Bristol** State **RI** Zip Code **02809-1367**

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

Name of Employer **Capitol City Group** Occupation **Attorney**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 28 / 2014**

**Transaction ID : VNHWQD6T458**

Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>40337.00</b>

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

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

FOR LINE NUMBER: PAGE 15 OF 33  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)  
**A. LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC**

Mailing Address 905 16th St NW  
FI 2

City Washington State DC Zip Code 20006-1703

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2014  
**Transaction ID : VNHWQD6TVD0**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. NIXON PEABODY LLP PAC**

Mailing Address 1300 Clinton Sq

City Rochester State NY Zip Code 14604-1707

FEC ID number of contributing federal political committee. **C** C00404178

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2014  
**Transaction ID : VNHWQD6TV08**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**C. RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 Wilson Blvd  
Ste 1500

City Arlington State VA Zip Code 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 11 / 2014  
**Transaction ID : VNHWQD8V5Q5**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10000.00

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

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

FOR LINE NUMBER: PAGE 16 OF 33  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**4 MA PAC**

**A. JOHN TIERNEY FOR CONGRESS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9 Main St  
Ste 4  
City Peabody State MA Zip Code 01960-5558  
FEC ID number of contributing federal political committee. **C** C00318196  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 11 / 2014  
**Transaction ID : VNHWQD8V545**  
Amount of Each Receipt this Period  
1200.00  
Contribution refund

**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  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

**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  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1200.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. 4C Partners, LLC**

Mailing Address 185 Devonshire St  
Ste 601

City Boston State MA Zip Code 02110-1414

Purpose of Disbursement  
Fundraising consulting

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  
11 / 11 / 2014

Transaction ID : VNGXF9TJ5C3

Amount of Each Disbursement this Period

1800.00

Full Name (Last, First, Middle Initial)

**B. ACTBLUE**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Fees Expense

Candidate Name

**ACTBLUE**

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  
10 / 28 / 2014

Transaction ID : VNGXF9TJ4F4

Amount of Each Disbursement this Period

335.75

Full Name (Last, First, Middle Initial)

**C. ACTBLUE**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Fees Expense

Candidate Name

**ACTBLUE**

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  
11 / 11 / 2014

Transaction ID : VNGXF9TJ4J8

Amount of Each Disbursement this Period

237.00

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

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

2372.75

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement  
Fees Expense

Candidate Name  
**ACTBLUE**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 19 / 2014

**Transaction ID : VNGXF9TJ4P0**

Amount of Each Disbursement this Period

296.25

Full Name (Last, First, Middle Initial)

**B. Chick Montana Group, LLC**

Mailing Address 202 Bonham Rd

City Dedham State MA Zip Code 02026-5404

Purpose of Disbursement  
Compliance & accounting services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 11 / 2014

**Transaction ID : VNGXF9TJ5G5**

Amount of Each Disbursement this Period

1214.10

Full Name (Last, First, Middle Initial)

**C. Chick Montana Group, LLC**

Mailing Address 202 Bonham Rd

City Dedham State MA Zip Code 02026-5404

Purpose of Disbursement  
Postage & Delivery Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 11 / 2014

**Transaction ID : VNGXF9TJ5H3**

Amount of Each Disbursement this Period

272.27

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

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

1782.62

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**4 MA PAC**

Full Name (Last, First, Middle Initial) <b>A. Richard McAuliffe</b>		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014
Mailing Address 111 Wayland Ave The Mayforth Group		<b>Transaction ID : VNHWQD9MRW2I</b>
City Providence State RI Zip Code 02906-4371	Amount of Each Disbursement this Period 523.00	
Purpose of Disbursement In-kind: event catering	Category/Type	* In-Kind Received
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.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/Type	
Purpose of Disbursement		
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.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/Type	
Purpose of Disbursement		
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).....▶	523.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4678.37

**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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. ALMA ADAMS FOR CONGRESS**

Mailing Address PO Box 20622

City Greensboro State NC Zip Code 27420-0622

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Alma Shealey Adams**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: NC District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

**Transaction ID : VNGXF9TJ5E9**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. BONNIE WATSON COLEMAN FOR CONGRESS**

Mailing Address 180 Upland Ave

City Ewing State NJ Zip Code 08638-2330

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Bonnie Watson Coleman**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: NJ District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

**Transaction ID : VNGXF9TJ574**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Brad Ashford For Congress**

Mailing Address PO Box 24023

City Omaha State NE Zip Code 68124-0023

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Brad Ashford**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: NE District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

**Transaction ID : VNGXF9TJ463**

Amount of Each Disbursement this Period

500.00
--------

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

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

1500.00
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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 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial) <b>A. Brad Ashford For Congress</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address PO Box 24023		Transaction ID : VNGXF9TJ471  Amount of Each Disbursement this Period 500.00
City Omaha	State NE	
Zip Code 68124-0023	Category/ Type	
Purpose of Disbursement Candidate Contribution		
Candidate Name <b>Brad Ashford</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NE District: 02	

Full Name (Last, First, Middle Initial) <b>B. BRENDA LAWRENCE FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address PO Box 3060		Transaction ID : VNGXF9TJ590  Amount of Each Disbursement this Period 500.00
City Southfield	State MI	
Zip Code 48037-3060	Category/ Type	
Purpose of Disbursement Candidate Contribution		
Candidate Name <b>Brenda Lulenar Lawrence</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MI District: 14	

Full Name (Last, First, Middle Initial) <b>C. Citizens for Boyle</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address PO Box 11545		Transaction ID : VNGXF9TJ5D1  Amount of Each Disbursement this Period 500.00
City Philadelphia	State PA	
Zip Code 19116-0545	Category/ Type	
Purpose of Disbursement Candidate Contribution		
Candidate Name <b>Brendan F Boyle</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: PA District: 13	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1500.00
<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 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial) <b>A. Democratic Congressional Campaign Cttee</b>		Date of Disbursement MM / DD / YYYY 10 / 24 / 2014
Mailing Address 430 S Capitol St SE		<b>Transaction ID : VNGXF9TJ497</b>
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period 15000.00	
Purpose of Disbursement Party Contribution	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Democratic Party of Georgia</b>		Date of Disbursement MM / DD / YYYY 10 / 27 / 2014
Mailing Address PO Box 20442		<b>Transaction ID : VNGXF9TJ4D8</b>
City Atlanta State GA Zip Code 30325-0442	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Party Contribution	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DONALD NORCROSS FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address PO Box 160		<b>Transaction ID : VNGXF9TJ558</b>
City Collingswood State NJ Zip Code 08108-0160	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Candidate Contribution	Candidate Name <b>Donald Norcross</b>	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	16500.00
<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 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF DAN MAFFEI**

Mailing Address PO Box 230

City State Zip Code  
Syracuse NY 13201-0230

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**DANIEL BENJAMIN MR. MAFFEI**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: NY District: 24

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	1	4

Transaction ID : VNGXF9TJ4Y3

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JEANNE SHAHEEN**

Mailing Address 105 N State St

City State Zip Code  
Concord NH 03301-4334

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**JEANNE SHAHEEN**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: NH District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	1	4

Transaction ID : VNGXF9TJ4G2

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF LOIS CAPPS**

Mailing Address PO Box 23940

City State Zip Code  
Santa Barbara CA 93121-3940

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**LOIS CAPPS**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: CA District: 24

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	1	4

Transaction ID : VNGXF9TJ4X5

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

5	0	0	0	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 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Renteria**

Mailing Address PO Box 655

City Sanger State CA Zip Code 93657-0655

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**Amanda Renteria**

Office Sought:  House  
 Senate  
 President  
State: CA District: 21

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2014

**Transaction ID : VNGXF9TJ516**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. GALLEGO FOR ARIZONA**

Mailing Address PO Box 1710

City Phoenix State AZ Zip Code 85001-1710

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**Ruben Gallego**

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2014

**Transaction ID : VNGXF9TJ5A8**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Graham for Congress**

Mailing Address PO Box 310

City Tallahassee State FL Zip Code 32302-0310

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**Gwen Graham**

Office Sought:  House  
 Senate  
 President  
State: FL District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2014

**Transaction ID : VNGXF9TJ4T1**

Amount of Each Disbursement this Period

500.00

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

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

1500.00

**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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES LEE WITT FOR CONGRESS**

Mailing Address PO Box 36

City Dardanelle State AR Zip Code 72834-0036

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**James Lee Witt**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: AR District: 04

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2014

**Transaction ID : VNGXF9TJ540**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. JOE GARCIA FOR CONGRESS**

Mailing Address PO Box 330871

City Miami State FL Zip Code 33233-0871

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**JOE GARCIA**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: FL District: 26

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2014

**Transaction ID : VNGXF9TJ4V9**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. JULIA BROWNLEY FOR CONGRESS**

Mailing Address PO Box 2018

City Thousand Oaks State CA Zip Code 91358-2018

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**JULIA BROWNLEY**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: CA District: 26

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2014

**Transaction ID : VNGXF9TJ4S3**

Amount of Each Disbursement this Period

1000.00

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

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

2000.00

**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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. Kathleen Rice for Congress**

Mailing Address 410 Jericho Tpk  
Ste 200

City Jericho State NY Zip Code 11753-1318

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Kathleen Rice**

Office Sought:  House  Senate  President  
State: NY District: 04

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
10 / 30 / 2014

Transaction ID : VNGXF9TJ582

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. KUSTER FOR CONGRESS, INC.**

Mailing Address PO Box 1498

City Concord State NH Zip Code 03302-1498

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**ANN MCLANE KUSTER**

Office Sought:  House  Senate  President  
State: NH District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
10 / 28 / 2014

Transaction ID : VNGXF9TJ4E6

Amount of Each Disbursement this Period

2800.00

Full Name (Last, First, Middle Initial)

**C. KYRSTEN SINEMA FOR CONGRESS**

Mailing Address PO Box 25879

City Tempe State AZ Zip Code 85285-5879

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**KYRSTEN SINEMA**

Office Sought:  House  Senate  President  
State: AZ District: 09

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
10 / 30 / 2014

Transaction ID : VNGXF9TJ4R5

Amount of Each Disbursement this Period

1000.00

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

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

4300.00

**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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. LOEBSACK FOR CONGRESS**

Mailing Address PO Box 3013

City Iowa City State IA Zip Code 52244-3013

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**DAVID WAYNE LOEBSACK**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IA District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2014			

**Transaction ID : VNGXF9TJ4Q7**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. MARK DESAULNIER FOR CONGRESS**

Mailing Address 5429 Madison Ave

City Sacramento State CA Zip Code 95841-3111

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**Mark Desaulnier**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2014			

**Transaction ID : VNGXF9TJ566**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Mark Takai for Congress**

Mailing Address PO Box 2267

City Pearl City State HI Zip Code 96782-9267

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**Mark Takai**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: HI District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2014			

**Transaction ID : VNGXF9TJ532**

Amount of Each Disbursement this Period

500.00
--------

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

2000.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. Mass Democratic State Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Mailing Address 77 Summer St  
FI 10

**Transaction ID : VNGXF9TJ4H0**

City Boston State MA Zip Code 02110-1006

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Party Contribution

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Mass Democratic State Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Mailing Address 77 Summer St  
FI 10

**Transaction ID : VNGXF9TJ4N2**

City Boston State MA Zip Code 02110-1006

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Party Contribution

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. PAT MURPHY FOR IOWA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Mailing Address PO Box 692

**Transaction ID : VNGXF9TJ5J1**

City Dubuque State IA Zip Code 52004-0692

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Candidate contribution

--

Candidate Name

Category/  
Type

**Patrick Joseph Murphy**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IA District: 01

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

5500.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial) <b>A. PAT MURPHY FOR IOWA</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address PO Box 692		<b>Transaction ID : VNGXF9TJ455</b>
City Dubuque	State IA	
Zip Code 52004-0692	Purpose of Disbursement Candidate Contribution	Amount of Each Disbursement this Period 500.00
Candidate Name <b>Patrick Joseph Murphy</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 01		

Full Name (Last, First, Middle Initial) <b>B. Patrick Henry Hays For Congress</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address PO Box 94886		<b>Transaction ID : VNGXF9TJ4W7</b>
City North Little Rock	State AR	
Zip Code 72190-4886	Purpose of Disbursement Candidate Contribution	Amount of Each Disbursement this Period 500.00
Candidate Name <b>Patrick Henry Hays</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AR District: 02		

Full Name (Last, First, Middle Initial) <b>C. PETE AGUILAR FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address PO Box 10954		<b>Transaction ID : VNGXF9TJ509</b>
City San Bernardino	State CA	
Zip Code 92423-0954	Purpose of Disbursement Candidate Contribution	Amount of Each Disbursement this Period 500.00
Candidate Name <b>PETE AGUILAR</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 31		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1500.00
<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 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. RECCHIA FOR CONGRESS**

Mailing Address 172 Gravesend Neck Rd

City State Zip Code  
Brooklyn NY 11223-4707

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**DOMENIC M JR RECCHIA**

Office Sought:  House  
 Senate  
 President  
State: NY District: 13

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 30 / 2014

**Transaction ID : VNGXF9TJ524**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. RON BARBER FOR CONGRESS**

Mailing Address PO Box 57715

City State Zip Code  
Tucson AZ 85732-7715

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**RONALD BARBER**

Office Sought:  House  
 Senate  
 President  
State: AZ District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2014

**Transaction ID : VNGXF9TJ4A5**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. RON BARBER FOR CONGRESS**

Mailing Address PO Box 57715

City State Zip Code  
Tucson AZ 85732-7715

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**RONALD BARBER**

Office Sought:  House  
 Senate  
 President  
State: AZ District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2014

**Transaction ID : VNGXF9TJ4C1**

Amount of Each Disbursement this Period

1000.00

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

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

2500.00

**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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. SCHNEIDER FOR CONGRESS**

Mailing Address PO Box 1318

City State Zip Code  
Deerfield IL 60015-6005

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**BRADLEY SCOTT SCHNEIDER**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : VNGXF9TJ4K6

Amount of Each Disbursement this Period

2400.00
---------

Full Name (Last, First, Middle Initial)

**B. SCOTT PETERS FOR CONGRESS**

Mailing Address PO Box 70980

City State Zip Code  
Washington DC 20024-0980

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**SCOTT PETERS**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: CA District: 52

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : VNGXF9TJ4Z1

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. SEAN PATRICK MALONEY FOR CONGRESS**

Mailing Address 18 W Main St

City State Zip Code  
Beacon NY 12508-2512

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**SEAN PATRICK MALONEY**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: NY District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : VNGXF9TJ489

Amount of Each Disbursement this Period

1200.00
---------

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

4100.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. TED LIEU FOR CONGRESS**

Mailing Address 6380 Wilshire Blvd  
Ste 1612

City Los Angeles State CA Zip Code 90048-5018

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Ted Lieu**

Office Sought:  House  
 Senate  
 President  
State: CA District: 33

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2014			

Transaction ID : VNGXF9TJ5F7

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

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) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

500.00
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45400.00
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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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. Mike Michaud for Governor**

Mailing Address PO Box 1590

City Portland State ME Zip Code 04104-1590

Purpose of Disbursement  
Non-Federal Contribution Expense

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
10		30		2014

Transaction ID : VNGXF9TJ4M4

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Ron Barber Recount Fund**

Mailing Address 412 1st St SE  
Ste 100

City Washington State DC Zip Code 20003-1804

Purpose of Disbursement  
Non-Federal Contribution Expens

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
11		11		2014

Transaction ID : VNGXF9TJ5B5

Amount of Each Disbursement this Period

1000.00
---------

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

M M M	/	D D D	/	Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

2000.00
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2000.00
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