

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

L PAC

ADDRESS (number and street) 2120 L St NW  
Suite 850  
 Check if different than previously reported. (ACC) Washington DC 20037

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

C C00519413

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on M M / D D / Y Y Y Y Y Y in the State of  

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2019 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2019

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

Rosen, Hilary, , ,

Type or Print Name of Treasurer

Signature of Treasurer Rosen, Hilary, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 21 / 2020

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

|                 |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**L PAC**

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

|  | COLUMN A<br>This Period                | COLUMN B<br>Calendar Year-to-Date      |
|--|--|--|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2019"/>  | <input type="text"/>                   | <input type="text" value="31455.86"/>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="33909.42"/>  |  |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="204635.72"/> | <input type="text" value="547877.23"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="238545.14"/> | <input type="text" value="579333.09"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="229047.03"/> | <input type="text" value="569834.98"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="9498.11"/>   | <input type="text" value="9498.11"/>   |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>      |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="0.00"/>      |  |

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

**L PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2019 To: M M / D D / Y Y Y Y 12 / 31 / 2019

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 77700.00                      | 180275.00                         |
| (ii) Unitemized .....   | 3038.00                       | 5072.00                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 80738.00                      | 185347.00                         |
| (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) .....  | 80738.00                      | 185347.00                         |
| 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                          | 7647.51                           |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 123897.72                     | 354882.72                         |
| 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)).....▶                         | 204635.72                     | 547877.23                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 204635.72                     | 547877.23                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 60667.70                      | 108695.84                         |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 60667.70                      | 108695.84                         |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 15000.00                      | 17500.00                          |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 153379.33                     | 443639.14                         |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 229047.03                     | 569834.98                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 229047.03                     | 569834.98                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 80738.00                              | 185347.00                                 |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 80738.00                              | 185347.00                                 |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 60667.70                              | 108695.84                                 |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 7647.51                                   |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 60667.70                              | 101048.33                                 |

**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 224   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input 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)  
**L PAC**

**A. Aberly, Naomi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 Derne St  
 Apt 5A  
 City Boston State MA Zip Code 02114-4212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 10 / 2019  
**Transaction ID : VNW3HH4C947**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Adams, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 117 Leabrook Ln  
 City Princeton State NJ Zip Code 08540-3621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Princeton University Occupation (for Individual) Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 19 / 2019  
**Transaction ID : VNW3HH4C9N1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Allee, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 265 Riverside Dr  
 Apt 10E  
 City New York State NY Zip Code 10025-5249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United Nations Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 07 / 2019  
**Transaction ID : VNW3HH4C921**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1000.00 |
| <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 224                |
|   | <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)  
**L PAC**

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Allee, Susan, , ,</b>                  |   | Date of Receipt<br>MM / DD / YYYY<br>12 / 02 / 2019 |
| Mailing Address 265 Riverside Dr<br>Apt 10E   |   | <b>Transaction ID : VNW3HH5KE26</b>                 |
| City<br>New York  | State<br>NY                             | Zip Code<br>10025-5249                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer (for Individual)<br>United Nations   | Occupation (for Individual)<br>Attorney | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>750.00      |   |

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Alvarez, Donald, , ,</b>               |   | Date of Receipt<br>MM / DD / YYYY<br>11 / 18 / 2019 |
| Mailing Address 555 10Th Ave<br>Apt 35F   |   | <b>Transaction ID : VNW3HH5HHV3</b>                 |
| City<br>New York  | State<br>NY                               | Zip Code<br>10018-0512                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer (for Individual)<br>ICSC   | Occupation (for Individual)<br>VP Finance | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00        |   |

|   |  |   |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Bennetts, Geni, , ,</b>              |  | Date of Receipt<br>MM / DD / YYYY<br>07 / 08 / 2019 |
| Mailing Address 10 Lupine Hill Rd   |  | <b>Transaction ID : VNW3HGXH0N4</b>                 |
| City<br>Napa  | State<br>CA                              | Zip Code<br>94558-3819                              |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>1000.00       |
| Name of Employer (for Individual)<br>Self   | Occupation (for Individual)<br>Physician | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br>1000.00      |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 2000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 8 OF 224   |
| <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)  
**L PAC**

**A. Birch, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4455 Connecticut Ave NW  
 1002  
 City Washington State DC Zip Code 20008-2324  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CBRE Occupation (for Individual) Broker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt **09 / 12 / 2019**  
**Transaction ID : VNW3HH1T9S6**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Bloch, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 225 N Columbus Dr  
 Apt 5203  
 City Chicago State IL Zip Code 60601-5233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dowd, Bloch, Bennett, Cervone, Auerbac Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 25 / 2019**  
**Transaction ID : VNW3HH0JTW1**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Boll, Monica, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 W 81St St  
 Apt 313  
 City New York State NY Zip Code 10024-7225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Accenture Occupation (for Individual) Managing Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 05 / 2019**  
**Transaction ID : VNW3HH5BAP1**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**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 224   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><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)  
**L PAC**

**A. Brisbane, Maria, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 120 E 75Th St  
 City New York State NY Zip Code 10021-3240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BAML Occupation (for Individual) Investments  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2019  
**Transaction ID : VNW3HH5RYA3**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Brown, Deanna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 404 Sunridge St  
 City Playa Del Rey State CA Zip Code 90293-7754  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TYT Network Occupation (for Individual) Media  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2019  
**Transaction ID : VNW3HH5BAB4**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Burke, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 81 Cleveland Ln  
 City Princeton State NJ Zip Code 08540-3079  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Burke Foundation Occupation (for Individual) Foundation President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2019  
**Transaction ID : VNW3HH4C9F3**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 750.00 |
| <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 224               |
|   | <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)  
**L PAC**

**A. Byrne, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 155 W 18Th St  
 Apt 304  
 City New York State NY Zip Code 10011-4170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Quinn Emanuel Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 10 / 2019  
**Transaction ID : VNW3HH3R5A8**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Carrig, Danielle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1128 W Kensington Rd  
 City Los Angeles State CA Zip Code 90026-4354  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VMG Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 21 / 2019  
**Transaction ID : VNW3HH5HJ02**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Cavanaugh, Teri, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 353 Ocean Ave  
 Apt 4F  
 City Brooklyn State NY Zip Code 11226-1310  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Sales  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2019  
**Transaction ID : VNW3HH4C970**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1750.00 |
| <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 11 OF 224  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><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)  
**L PAC**

**A. Chaisson, Maryann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Campbell St  
 City Quincy State MA Zip Code 02169-1415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Elizabeth Stone House Occupation (for Individual) Director Of Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2019  
**Transaction ID : VNW3HGYD8D8**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Cherry, Elyse, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 46 Cotswold Rd  
 City Brookline State MA Zip Code 02445-5837  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BlueHub Capital Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 03 / 2019  
**Transaction ID : VNW3HGX8RF9**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Cogneau, Christel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 149 Doherty Dr  
 City Clifton State NJ Zip Code 07013-3339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BNP Paribas Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 09 / 2019  
**Transaction ID : VNW3HH4C913**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1500.00 |
| <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 224               |
|   | <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             | <input type="checkbox"/> 17  |

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

**A. Cogneau, Christel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 149 Doherty Dr  
 City Clifton State NJ Zip Code 07013-3339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BNP Paribas Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 13 / 2019  
**Transaction ID : VNW3HH5GEA7**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Davis, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 131 Dudley St Apt 314  
 City Jersey City State NJ Zip Code 07302-4609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Citi Occupation (for Individual) Banking  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 04 / 2019  
**Transaction ID : VNW3HH525V1**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. Davis, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 131 Dudley St Apt 314  
 City Jersey City State NJ Zip Code 07302-4609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Citi Occupation (for Individual) Banking  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 06 / 2019  
**Transaction ID : VNW3HH5BAF6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3250.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 13 OF 224               |
|   | <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)  
**L PAC**

**A. Davis, Martha, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 030220  
 City Fort Lauderdale State FL Zip Code 33303-0220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Artist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 12 / 2019  
**Transaction ID : VNW3HGZN7A9**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Dawson, Cat, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 225 Eastern Pkwy Apt 2B  
 City Brooklyn State NY Zip Code 11238-6310  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Diver Collective LLC Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 25 / 2019  
**Transaction ID : VNW3HH5RXX0**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Dawson, Catherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 225 Eastern Pkwy Apt 2B  
 City Brooklyn State NY Zip Code 11238-6310  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Diver Collective Occupation (for Individual) Content Strategy Lead  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 03 / 2019  
**Transaction ID : VNW3HH5RY87**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 5500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER: PAGE 14 OF 224  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Delmont, Jacqueline, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 179 Canterbury Gate  
 City Lynbrook State NY Zip Code 11563-2928  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 12 / 2019  
**Transaction ID : VNW3HH5GEE8**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Desmond, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 W Oak St 15A  
 City Chicago State IL Zip Code 60610-8721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 11 / 26 / 2019  
**Transaction ID : VNW3HH5HDD6**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. Dolan, Jill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 E Shore Dr  
 City Princeton State NJ Zip Code 08540-7410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Princeton University Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 19 / 2019  
**Transaction ID : VNW3HH4C9H9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00  
**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 15 OF 224               |
|   | <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             | <input type="checkbox"/> 17  |

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

**A. Douglas, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 345 E 84Th St  
 Apt 1  
 City New York State NY Zip Code 10028-4434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Psychiatrist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 22 / 2019  
**Transaction ID : VNW3HH5HJ10**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Edelstein, Miriam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5127 Webster St  
 City Philadelphia State PA Zip Code 19143-2618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 17 / 2019  
**Transaction ID : VNW3HH4C9M3**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Epstein, Fran, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3400 Galt Ocean Dr  
 Apt 1106S  
 City Fort Lauderdale State FL Zip Code 33308-7022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 30 / 2019  
**Transaction ID : VNW3HGYYRE4**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1250.00 |
| <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 16 OF 224  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Epstein, Fran, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3400 Galt Ocean Dr  
 Apt 1106S  
 City Fort Lauderdale State FL Zip Code 33308-7022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2019  
**Transaction ID : VNW3HH492K6**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Felicio, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39 Westchester Rd  
 Westchester Road  
 City Jamaica Plain State MA Zip Code 02130-3451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Community Catalyst Occupation (for Individual) Interim Executive Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 15 / 2019  
**Transaction ID : VNW3HGXSJC4**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Felicio, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39 Westchester Rd  
 Westchester Road  
 City Jamaica Plain State MA Zip Code 02130-3451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Community Catalyst Occupation (for Individual) Interim Executive Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 26 / 2019  
**Transaction ID : VNW3HGYPQB9**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4050.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 17 OF 224  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><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)  
**L PAC**

**A. Field, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Central Park W  
 City New York State NY Zip Code 10023-6006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Field Real Estate Holdings Occupation (for Individual) Real Estate Consultant  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1000.00

Date of Receipt **07 / 30 / 2019**  
**Transaction ID : VNW3HGYF3F9**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Fischel,Carolynn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12239 Ash St  
 City Overland Park State KS Zip Code 66209-3513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt **09 / 09 / 2019**  
**Transaction ID : VNW3HH17C04**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Francis, Stefanie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 107 Sterling Pl  
 City Brooklyn State NY Zip Code 11217-3304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hootology/OnTheLine/Happy Camper Occupation (for Individual) Entrepreneur  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt **11 / 27 / 2019**  
**Transaction ID : VNW3HH5RY12**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1500.00 |
| <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 18 OF 224               |
|   | <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)  
**L PAC**

|   |  |   |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Gaines, Barbara, , ,</b>               |  | Date of Receipt<br>MM / DD / YYYY<br>11 / 08 / 2019 |
| Mailing Address 105 W 13Th St<br>Apt 6C   |  | <b>Transaction ID : VNW3HH5BAH2</b>                 |
| City<br>New York  | State<br>NY                            | Zip Code<br>10011-7841                              |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer (for Individual)<br>Information Requested  | Occupation (for Individual)<br>Retired | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00     |   |

|   |  |   |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Gibson, Gayle, , ,</b>                 |  | Date of Receipt<br>MM / DD / YYYY<br>11 / 08 / 2019 |
| Mailing Address 1 Bayberry Close  |  | <b>Transaction ID : VNW3HH584C0</b>                 |
| City<br>Newark  | State<br>DE                            | Zip Code<br>19711-6201                              |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>5000.00       |
| Name of Employer (for Individual)<br>Retired  | Occupation (for Individual)<br>Retired | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00    |   |

|   |  |   |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Giske, Emily, , ,</b>                |  | Date of Receipt<br>MM / DD / YYYY<br>11 / 04 / 2019 |
| Mailing Address 440 W 24Th St<br>Apt 3F   |  | <b>Transaction ID : VNW3HH5BAN3</b>                 |
| City<br>New York  | State<br>NY  | Zip Code<br>10011-1350                              |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>1000.00       |
| Name of Employer (for Individual)<br>Bolton St. Johns   | Occupation (for Individual)<br>New York State Lobbyist | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br>1000.00                    |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 6250.00 |
| <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 19 OF 224               |
|   | <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)  
**L PAC**

**A. Griffin, Donna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 312 Windermere Ave  
 City Interlaken State NJ Zip Code 07712-4432  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 14 / 2019**  
**Transaction ID : VNW3HH4C9J7**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Guthman, Maureen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 395 Riverside Dr Apt 11F  
 City New York State NY Zip Code 10025-1892  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BET Networks Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **09 / 16 / 2019**  
**Transaction ID : VNW3HH21JV4**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Haase, Natasha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 Bank St  
 City Princeton State NJ Zip Code 08542-3756  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Management Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 18 / 2019**  
**Transaction ID : VNW3HH7M951**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1500.00 |
| <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 20 OF 224               |
|   | <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)  
**L PAC**

**A. Harrington, Nora, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 124 Canton Ave  
 City Milton State MA Zip Code 02186-3507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Commonwealth Psychology Associates Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 01 / 2019**  
**Transaction ID : VNW3HGZ0W08**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Hatch, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 165 Mercer St  
 City Trenton State NJ Zip Code 08611-1723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Clarke Caton Hintz Occupation (for Individual) Architect  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 07 / 2019**  
**Transaction ID : VNW3HH4C9E6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Haycox, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 374 7Th St Apt 403  
 City Jersey City State NJ Zip Code 07302-1877  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Habitat For Humanity Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 26 / 2019**  
**Transaction ID : VNW3HH5RY54**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 21 OF 224               |
|   | <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)  
**L PAC**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Honor, Leslie, , ,</b>                 |                                    | Date of Receipt<br>MM / DD / YYYY<br>12 / 02 / 2019 |
| Mailing Address 208 E 84Th St<br>1A   |                                    | <b>Transaction ID : VNW3HH5RY79</b>                 |
| City<br>New York  | State<br>NY                        | Zip Code<br>10028-2925                              |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer (for Individual)<br>Sloan Kettering  | Occupation (for Individual)<br>RN  | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00 |   |

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Hood, Victoria, , ,</b>                |   | Date of Receipt<br>MM / DD / YYYY<br>10 / 15 / 2019 |
| Mailing Address 57 Marion St  |   | <b>Transaction ID : VNW3HH3VQJ2</b>                 |
| City<br>Somerville  | State<br>MA   | Zip Code<br>02143-3913                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer (for Individual)<br>Self Employed  | Occupation (for Individual)<br>Marketing Consultant | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00                  |   |

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Hoover, Kimberly, , ,</b>            |   | Date of Receipt<br>MM / DD / YYYY<br>07 / 28 / 2019 |
| Mailing Address 1111 SW 1St Ave<br>2919   |   | <b>Transaction ID : VNW3HGYBTS6</b>                 |
| City<br>Miami   | State<br>FL                             | Zip Code<br>33130-5401                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>100.00        |
| Name of Employer (for Individual)<br>Red Multifamily  | Occupation (for Individual)<br>Attorney | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br>100.00      |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 600.00 |
| <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 22 OF 224               |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <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)  
**L PAC**

**A. Hoover, Kimberly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 SW 1St Ave  
 2919  
 City Miami State FL Zip Code 33130-5401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 08 / 28 / 2019  
**Transaction ID : VNW3HH0TRG2**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Hoover, Kimberly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 SW 1St Ave  
 2919  
 City Miami State FL Zip Code 33130-5401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 09 / 24 / 2019  
**Transaction ID : VNW3HH3R7Z7**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Hoover, Kimberly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 SW 1St Ave  
 2919  
 City Miami State FL Zip Code 33130-5401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 09 / 28 / 2019  
**Transaction ID : VNW3HH2MCR7**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 450.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 23 OF 224               |
|   | <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)  
**L PAC**

**A. Hoover, Kimberly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 SW 1St Ave  
 2919  
 City Miami State FL Zip Code 33130-5401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2019  
**Transaction ID : VNW3HH4B4Y3**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Hoover, Kimberly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 SW 1St Ave  
 2919  
 City Miami State FL Zip Code 33130-5401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 28 / 2019  
**Transaction ID : VNW3HH5J4J3**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Hoover, Kimberly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 SW 1St Ave  
 2919  
 City Miami State FL Zip Code 33130-5401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Red Multifamily Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2019  
**Transaction ID : VNW3HH6VPX0**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 300.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 24 OF 224               |
|   | <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)  
**L PAC**

**A. Hourihan, Kim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 717 President St  
 City Baltimore State MD Zip Code 21202-4556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CBRE Occupation (for Individual) Fund Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **12 / 01 / 2019**  
**Transaction ID : VNW3HH5RY38**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Howitt, Idelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Sutton Pl S  
 City New York State NY Zip Code 10022-3070  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Howitt And Associates Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 27 / 2019**  
**Transaction ID : VNW3HH5RY62**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Hurd, Kristin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 153 Remsen St Apt 12C  
 City Brooklyn State NY Zip Code 11201-4389  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Compass Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 10 / 2019**  
**Transaction ID : VNW3HH4C905**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1250.00 |
| <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 25 OF 224               |
|   | <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)  
**L PAC**

|   |                                       |   |
|---|---------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Kagan, Dara, , ,</b>                   |                                       | Date of Receipt<br>MM / DD / YYYY<br>10 / 02 / 2019 |
| Mailing Address 593A Vanderbilt Ave # 1   |                                       | <b>Transaction ID : VNW3HH3R7Y9</b>                 |
| City<br>Brooklyn  | State<br>NY                           | Zip Code<br>11238-3512                              |
| FEC ID number of contributing federal political committee.<br>C   |                                       | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer (for Individual)<br>Amalgamated Bank   | Occupation (for Individual)<br>Banker | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00    |   |

|   |  |   |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Karp, Erika, , ,</b>                   |  | Date of Receipt<br>MM / DD / YYYY<br>09 / 20 / 2019 |
| Mailing Address 550 5Th Ave   |  | <b>Transaction ID : VNW3HH3R7V6</b>                 |
| City<br>New York  | State<br>NY                                    | Zip Code<br>10036-5007                              |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer (for Individual)<br>Cornerstone Capital  | Occupation (for Individual)<br>Founder And CEO | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00             |   |

|   |  |   |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Kubesch, James, , ,</b>              |  | Date of Receipt<br>MM / DD / YYYY<br>07 / 28 / 2019 |
| Mailing Address 35 Bayberry Ave   |  | <b>Transaction ID : VNW3HGYBTQ0</b>                 |
| City<br>Provincetown  | State<br>MA                              | Zip Code<br>02657-1214                              |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer (for Individual)<br>Self Employed  | Occupation (for Individual)<br>Filmmaker | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br>500.00       |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1000.00 |
| <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 26 OF 224               |
|   | <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)  
**L PAC**

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Lafer, Jill, , ,</b>                   |   | Date of Receipt<br>MM / DD / YYYY<br>11 / 21 / 2019 |
| Mailing Address 1060 5Th Ave # 7B   |   | <b>Transaction ID : VNW3HH5HHY7</b>                 |
| City<br>New York  | State<br>NY                             | Zip Code<br>10128-0104                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer (for Individual)<br>Not Employed   | Occupation (for Individual)<br>Activist | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00      |   |

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. LeVan, Suzanne, , ,</b>                |   | Date of Receipt<br>MM / DD / YYYY<br>11 / 22 / 2019 |
| Mailing Address 320 Central Park W Apt 14F  |   | <b>Transaction ID : VNW3HH5HHX9</b>                 |
| City<br>New York  | State<br>NY                               | Zip Code<br>10025-7659                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer (for Individual)<br>Self   | Occupation (for Individual)<br>Consultant | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00        |   |

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Leve, Harriet, , ,</b>               |   | Date of Receipt<br>MM / DD / YYYY<br>12 / 03 / 2019 |
| Mailing Address 30 W 63Rd St 20A  |   | <b>Transaction ID : VNW3HH5RY46</b>                 |
| City<br>New York  | State<br>NY                                     | Zip Code<br>10023-7103                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer (for Individual)<br>Self   | Occupation (for Individual)<br>Theatre Producer | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br>250.00              |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 27 OF 224  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><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)  
**L PAC**

**A. Lythcott, Ngina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Somerset Rd  
 City Provincetown State MA Zip Code 02657-1755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 08 / 07 / 2019  
**Transaction ID : VNW3HGZH2D1**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Martin, Dawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9140 Three Oaks Dr  
 City Silver Spring State MD Zip Code 20901-3307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Executive Occupation (for Individual) Ceres  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 10 / 23 / 2019  
**Transaction ID : VNW3HH48A13**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Melnick, Sharon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 160 Riverside Dr Apt 6A  
 City New York State NY Zip Code 10024-2111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Horizon Point Inc Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 10 / 11 / 2019  
**Transaction ID : VNW3HH3R8F4**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1250.00 |
| <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 28 OF 224               |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
|   | <input type="checkbox"/> 12  | <input type="checkbox"/> 16  |
|   |                              | <input type="checkbox"/> 17  |

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

**A. Milbratz, Erika, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 723 Sheridan Rd  
 City Wilmette State IL Zip Code 60091-1959  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 04 / 2019  
**Transaction ID : VNW3HGX9CR1**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Milbratz, Erika, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 723 Sheridan Rd  
 City Wilmette State IL Zip Code 60091-1959  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2019  
**Transaction ID : VNW3HGZ15C2**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Milbratz, Erika, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 723 Sheridan Rd  
 City Wilmette State IL Zip Code 60091-1959  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2019  
**Transaction ID : VNW3HH105Q6**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 75.00 |
| <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 29 OF 224  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Milbratz, Erika, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 723 Sheridan Rd  
 City Wilmette State IL Zip Code 60091-1959  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 175.00

Date of Receipt 10 / 04 / 2019  
**Transaction ID : VNW3HH3GF97**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Milbratz, Erika, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 723 Sheridan Rd  
 City Wilmette State IL Zip Code 60091-1959  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 11 / 04 / 2019  
**Transaction ID : VNW3HH4XGF2**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Milbratz, Erika, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 723 Sheridan Rd  
 City Wilmette State IL Zip Code 60091-1959  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 04 / 2019  
**Transaction ID : VNW3HH5M9G2**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00  
**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 30 OF 224  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

**A. Mondini, Elena J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1326 Laurel Ave  
 City Ocean State NJ Zip Code 07712-4607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 08 / 04 / 2019  
**Transaction ID : VNW3HGZ14Z9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Mondini, Elena J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1326 Laurel Ave  
 City Ocean State NJ Zip Code 07712-4607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 09 / 04 / 2019  
**Transaction ID : VNW3HH0ZBR8**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Mondini, Elena J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1326 Laurel Ave  
 City Ocean State NJ Zip Code 07712-4607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 04 / 2019  
**Transaction ID : VNW3HH3HJK1**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 300.00 |
| <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 31 OF 224               |
|   | <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)  
**L PAC**

**A. Mondini, Elena J, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1326 Laurel Ave

|               |             |                        |
|---------------|-------------|------------------------|
| City<br>Ocean | State<br>NJ | Zip Code<br>07712-4607 |
|---------------|-------------|------------------------|

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

|   |                                   |
|---|-----------------------------------|
| Name of Employer (for Individual)<br>Spectrotel Inc | Occupation (for Individual)<br>VP |
|---|-----------------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 04    | / | 2019        |

**Transaction ID : VNW3HH525P2**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Mondini, Elena J, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1326 Laurel Ave

|               |             |                        |
|---------------|-------------|------------------------|
| City<br>Ocean | State<br>NJ | Zip Code<br>07712-4607 |
|---------------|-------------|------------------------|

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

|   |                                   |
|---|-----------------------------------|
| Name of Employer (for Individual)<br>Spectrotel Inc | Occupation (for Individual)<br>VP |
|---|-----------------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    | / | 04    | / | 2019        |

**Transaction ID : VNW3HH5NKR5**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 137 E 35Th St

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>New York | State<br>NY | Zip Code<br>10016-3889 |
|------------------|-------------|------------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>Credit Benchmark | Occupation (for Individual)<br>Marketing Manager |
|---|--|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 16    | / | 2019        |

**Transaction ID : VNW3HH4C9A4**

Amount of Each Receipt this Period  
500.00

Memo Item

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 700.00 |
| <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 32 OF 224               |
|   | <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)  
**L PAC**

**A. Nash, Gillian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Leeward Rd  
 City Belvedere Tiburon State CA Zip Code 94920-2321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 07 / 2019  
**Transaction ID : VNW3HGX9Q14**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Naude, Alice, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 239 Central Park W # 2E  
 City New York State NY Zip Code 10024-6038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Greater NY Occupation (for Individual) Nonprofit Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 11 / 2019  
**Transaction ID : VNW3HH5GE81**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Neiweem, Holly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13 Old Landing Rd  
 City Durham State NH Zip Code 03824-2804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EBP Occupation (for Individual) Finance  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 10 / 2019  
**Transaction ID : VNW3HH588T7**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1250.00 |
| <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 33 OF 224               |
|   | <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             | <input type="checkbox"/> 17  |

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

**A. Neiwem, Holly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13 Old Landing Rd  
 City Durham State NH Zip Code 03824-2804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EBP Occupation (for Individual) Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 19 / 2019  
**Transaction ID : VNW3HH5HHZ4**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Payne, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 610 W 141St St Apt 6H  
 City New York State NY Zip Code 10031-7151  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CUNY Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2019  
**Transaction ID : VNW3HH5BAE8**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Peter, Laurie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 Shalebrook Dr  
 City Morristown State NJ Zip Code 07960-6638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 03 / 2019  
**Transaction ID : VNW3HH5RXZ6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**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 34 OF 224  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><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)  
**L PAC**

**A. Pittsford, Leanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2030 8Th St NW  
 City Washington State DC Zip Code 20001-3008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lesbian Who Tech Occupation (for Individual) Founder And CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 14 / 2019  
**Transaction ID : VNW3HH5GEF6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Pollitt, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1609 Green St Apt A  
 City Philadelphia State PA Zip Code 19130-3558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Temple University Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 17 / 2019  
**Transaction ID : VNW3HH4C9K5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Prol, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 510 Deal Lake Dr  
 City Asbury Park State NJ Zip Code 07712-5162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Laddey Clark & Ryan LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 20 / 2019  
**Transaction ID : VNW3HH5HHW1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 35 OF 224
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one)
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Redgrave, Jamie, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 108 Sheridan St Apt 1
City Jamaica Plain State MA Zip Code 02130-4682
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Harvard University Occupation (for Individual) Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 500.00

Date of Receipt 08 / 02 / 2019
Transaction ID : VNW3HGZ0YC8
Amount of Each Receipt this Period 500.00
Memo Item

B. Riggs, Jessica, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 Waterside Plz Apt 4A
City New York State NY Zip Code 10010-2686
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) The Topps Company Inc. Occupation (for Individual) VP Global Operations & Quality
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 250.00

Date of Receipt 10 / 06 / 2019
Transaction ID : VNW3HH3R813
Amount of Each Receipt this Period 250.00
Memo Item

C. Rose, Ina, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 47 Howell Rd
City Mountain Lakes State NJ Zip Code 07046-1350
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Passion 4 People Consulting Occupation (for Individual) Accountant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 250.00

Date of Receipt 11 / 18 / 2019
Transaction ID : VNW3HH5HJ28
Amount of Each Receipt this Period 250.00
Memo Item

SUBTOTAL of Receipts This Page (optional) 1000.00
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 36 OF 224               |
|   | <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)  
**L PAC**

**A. Rosen, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 320 Central Park W  
 Apt 3C  
 City New York State NY Zip Code 10025-7659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 08 / 2019  
**Transaction ID : VNW3HH5BAA6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Rosenblum, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 Central Park W  
 Apt 17H  
 City New York State NY Zip Code 10023-4294  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Altice USA Occupation (for Individual) Vice-Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 17 / 2019  
**Transaction ID : VNW3HH4C962**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**C. Sandberg, Leslie, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Thistlemore Rd  
 City Provincetown State MA Zip Code 02657-1750  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 12 / 2019  
**Transaction ID : VNW3HGZN7B7**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00  
**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 37 OF 224               |
|   | <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)  
**L PAC**

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Savarese, Mary, , ,</b>                |   | Date of Receipt   |
| Mailing Address 36 Prospect Ave   |   | <input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2019"/> |
| City<br>Northampton   | State<br>MA   | Zip Code<br>01060-1626  |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                    |   | <b>Transaction ID : VNW3HH5BAD0</b>   |
| Name of Employer (for Individual)<br>Self   |   | Amount of Each Receipt this Period<br><input type="text" value="500.00"/>                             |
| Occupation (for Individual)<br>Media Educator   |   | <input type="checkbox"/> Memo Item  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><input type="text" value="500.00"/> |   |

|   |  |   |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Savarese, Mary, , ,</b>                |  | Date of Receipt   |
| Mailing Address 36 Prospect Ave   |  | <input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2019"/> |
| City<br>Northampton   | State<br>MA  | Zip Code<br>01060-1626  |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                    |  | <b>Transaction ID : VNW3HH5RVG4</b>   |
| Name of Employer (for Individual)<br>Self   |  | Amount of Each Receipt this Period<br><input type="text" value="1000.00"/>                            |
| Occupation (for Individual)<br>Media Educator   |  | <input type="checkbox"/> Memo Item  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><input type="text" value="1500.00"/> |   |

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Scherr, Rebekah, , ,</b>             |   | Date of Receipt   |
| Mailing Address 17 W 73Rd St<br>Apt 1F  |   | <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2019"/> |
| City<br>New York  | State<br>NY   | Zip Code<br>10023-3160  |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                  |   | <b>Transaction ID : VNW3HH5BAG4</b>   |
| Name of Employer (for Individual)<br>Paul Weiss Rifkind Wharton & Garrison  |   | Amount of Each Receipt this Period<br><input type="text" value="500.00"/>                             |
| Occupation (for Individual)<br>Attorney   |   | <input type="checkbox"/> Memo Item  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br><input type="text" value="500.00"/> |   |

|   |                                      |
|---|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <input type="text" value="2000.00"/> |
| <b>TOTAL</b> This Period (last page this line number only)..... | <input type="text"/>                 |

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 38 OF 224               |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
|   | <input type="checkbox"/> 12  | <input type="checkbox"/> 16  |
|   |                              | <input type="checkbox"/> 17  |

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

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

Mailing Address 150 W 26Th St  
Apt 403

City New York State NY Zip Code 10001-6825

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

Name of Employer (for Individual) Altice USA Occupation (for Individual) External Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
12 / 01 / 2019

**Transaction ID : VNW3HH5RXY8**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 520 W 43Rd St  
Apt 28A

City New York State NY Zip Code 10036-4355

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

Name of Employer (for Individual) Out Leadership LLC Occupation (for Individual) Consulting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
12 / 04 / 2019

**Transaction ID : VNW3HH5RXW3**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 401 W End Ave  
Apt 7AB

City New York State NY Zip Code 10024-5724

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

Name of Employer (for Individual) The Advertising Council Occupation (for Individual) CEO

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
11 / 08 / 2019

**Transaction ID : VNW3HH5BAK7**

Amount of Each Receipt this Period  
250.00

Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2250.00 |
| <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 39 OF 224               |
|   | <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)  
**L PAC**

**A. Signer, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3400 Galt Ocean Dr  
 Apt 1106S  
 City Fort Lauderdale State FL Zip Code 33308-7022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 30 / 2019  
**Transaction ID : VNW3HGYYR95**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Slavin, Jeffrey, Z., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5706 Warwick Pl  
 City Chevy Chase State MD Zip Code 20815-5502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Town Of Somerset, MD Occupation (for Individual) Mayor  
 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  
 11 / 18 / 2019  
**Transaction ID : VNW3HH7M935**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Sobelman, Pauline, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 405 Kemeys Ave  
 City Briarcliff Manor State NY Zip Code 10510-2052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RSC Occupation (for Individual) Insurance Advisor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 14 / 2019  
**Transaction ID : VNW3HH5GEC2**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1750.00 |
| <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 40 OF 224               |
|   | <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)  
**L PAC**

**A. Solomon, Cindy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 196 Maxwell Cir  
 City Erie State CO Zip Code 80516-8409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSA Inc. Occupation (for Individual) Speaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 22 / 2019  
**Transaction ID : VNW3HGY5CK2**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Sparks, Allison, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 Collingwood St  
 City San Francisco State CA Zip Code 94114-1907  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Masto Foundation Occupation (for Individual) Executive Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 10 / 2019  
**Transaction ID : VNW3HGXP080**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**C. Stark, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 920 Union St Apt 2D  
 City Brooklyn State NY Zip Code 11215-1619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New York University Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 07 / 21 / 2019  
**Transaction ID : VNW3HGY37X4**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 6550.00 |
| <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 41 OF 224               |
|   | <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)  
**L PAC**

**A. Stark, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 920 Union St  
 Apt 2D  
 City Brooklyn State NY Zip Code 11215-1619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New York University Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt **08 / 21 / 2019**  
**Transaction ID : VNW3HH0G7B9**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Stark, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 920 Union St  
 Apt 2D  
 City Brooklyn State NY Zip Code 11215-1619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New York University Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt **09 / 21 / 2019**  
**Transaction ID : VNW3HH27GT1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Stark, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 920 Union St  
 Apt 2D  
 City Brooklyn State NY Zip Code 11215-1619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New York University Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt **10 / 21 / 2019**  
**Transaction ID : VNW3HH40F52**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 150.00  
**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 42 OF 224               |
|   | <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)  
**L PAC**

**A. Stark, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 920 Union St  
 Apt 2D  
 City Brooklyn State NY Zip Code 11215-1619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New York University Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 21 / 2019  
**Transaction ID : VNW3HH5FD48**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Stark, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 920 Union St  
 Apt 2D  
 City Brooklyn State NY Zip Code 11215-1619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New York University Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 21 / 2019  
**Transaction ID : VNW3HH6R4J3**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Stubbs, Rennae, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 E 12Th St  
 City New York State NY Zip Code 10003-9128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Host  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 11 / 2019  
**Transaction ID : VNW3HH5GE73**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 1100.00  
**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 43 OF 224  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

**A. Sudolsky, Marcia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 445 Park Ave  
 City New York State NY Zip Code 10022-2606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) President Tri-State Maxed-Out Womens  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2019  
**Transaction ID : VNW3HH5RY95**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Sullivan, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2081 Redcliff St  
 City Los Angeles State CA Zip Code 90039-3026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Investor  
 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 / 17 / 2019  
**Transaction ID : VNW3HH3WQZ0**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. Tanner, Alexandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2149 Frederick Douglass Blvd  
 3C  
 City New York State NY Zip Code 10026-2313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) L'Oreal Occupation (for Individual) Marketing  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 08 / 2019  
**Transaction ID : VNW3HH3K099**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 5350.00 |
| <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 44 OF 224               |
|   | <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)  
**L PAC**

**A. Tatro, Donna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 217 S Harrison St  
 City Princeton State NJ Zip Code 08540-5609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Princeton University Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 18 / 2019**  
**Transaction ID : VNW3HH4C9G1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Turner, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 5373  
 City Virginia Beach State VA Zip Code 23471-0373  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **12 / 02 / 2019**  
**Transaction ID : VNW3HH5RY04**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Webber, Christy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2900 W Ferdinand St  
 City Chicago State IL Zip Code 60612-1640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Christy Webber Landscapes Occupation (for Individual) Landscaper  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt **10 / 16 / 2019**  
**Transaction ID : VNW3HH3W2E2**  
 Amount of Each Receipt this Period 4500.00  
 Memo Item

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 5250.00 |
| <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 45 OF 224 |
| <input checked="" type="checkbox"/>                                     | 11a | <input type="checkbox"/>          | 11b            |
| <input type="checkbox"/>  | 13  | <input type="checkbox"/>          | 14             |
| <input type="checkbox"/>  |     | <input type="checkbox"/>          | 11c            |
| <input type="checkbox"/>  |     | <input type="checkbox"/>          | 12             |
| <input type="checkbox"/>  |     | <input type="checkbox"/>          | 15             |
| <input type="checkbox"/>  |     | <input type="checkbox"/>          | 16             |
| <input type="checkbox"/>  |     | <input type="checkbox"/>          | 17             |

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

**A. Weingast, Robin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 166 E 63Rd St  
 Apt 17A  
 City New York State NY Zip Code 10065-7640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Robin S. Weingast & Associates Occupation (for Individual) Insurance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 11 / 2019  
**Transaction ID : VNW3HH4C954**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Westerhold, Jamalea, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1133 19Th St NW  
 Ste 302  
 City Washington State DC Zip Code 20036-3656  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) National Center For Transgender Equali Occupation (for Individual) Director Of Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2019  
**Transaction ID : VNW3HH4C996**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Wisotsky, Rebecca, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 45 W 36Th St  
 Fl 8  
 City New York State NY Zip Code 10018-7633  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Funders For LGBTQ Issues Occupation (for Individual) National Director Of Philanthropic Out  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 03 / 2019  
**Transaction ID : VNW3HH5RY20**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1250.00 |
| <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 46 OF 224  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

**A. Wohlstetter, Priscilla 'Penny', , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 W 72Nd St # 402  
 City New York State NY Zip Code 10023-3498  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Columbia Teachers College Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 11 / 2019  
**Transaction ID : VNW3HH5GEB4**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Worsham, Lyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2650 W Bay Isle Dr SE  
 City St Petersburg State FL Zip Code 33705-3359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant Program Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 13 / 2019  
**Transaction ID : VNW3HH5GE99**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Zachary, Alex, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 Central Park W  
 City New York State NY Zip Code 10023-7253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Merrill Lynch Occupation (for Individual) Investment Management  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2019  
**Transaction ID : VNW3HH5BAM5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 750.00 |
| <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 47 OF 224  
(check only one)

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

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

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

Mailing Address 210 W 77Th St  
Apt 4E

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>New York | State<br>NY | Zip Code<br>10024-6772 |
|------------------|-------------|------------------------|

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

|   |   |
|---|---|
| Name of Employer (for Individual)<br>Not Employed | Occupation (for Individual)<br>Not Employed |
|---|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 01    | / | 2019        |

**Transaction ID : VNW3HH3R7X1**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

|                                   |                             |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

|                                   |                             |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Receipt this Period

Memo Item

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 500.00   |
| <b>TOTAL</b> This Period (last page this line number only)..... | 77700.00 |

**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 48 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

**A. Abbott, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 394 Commercial St  
 Unit 1  
 City Provincetown State MA Zip Code 02657-2319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2019  
**Transaction ID : VNW3HGVD966**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**B. Achtenberg, Roberta, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 456 Hill St  
 City San Francisco State CA Zip Code 94114-2919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bank Of San Francisco Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 10 / 2019  
**Transaction ID : VNW3HGXSAY9**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**C. Allison, Meryl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 211 Pound Ridge Rd  
 City Bedford State NY Zip Code 10506-1238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Management Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 28 / 2019  
**Transaction ID : VNW3HGYYQK1**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Non-Contribution Account

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1300.00 |
| <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 49 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

**A. Alvarez, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 555 10Th Ave  
 Apt 35F  
 City New York State NY Zip Code 10018-0512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ICSC Occupation (for Individual) VP Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 04 / 2019  
**Transaction ID : VNW3HH5RVW7**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**B. Barnes, Derek, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 Van Ness Ave  
 City San Francisco State CA Zip Code 94102-3200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) G-Dii Occupation (for Individual) COO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 10 / 2019  
**Transaction ID : VNW3HGXSCT5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Non-Contribution Account

**C. Barnes, Derek, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 Van Ness Ave  
 City San Francisco State CA Zip Code 94102-3200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) G-Dii Occupation (for Individual) COO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 10 / 2019  
**Transaction ID : VNW3HGXSCT3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 850.00 |
| <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 50 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

**A. Brennan, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 131 Dudley St  
 Apt 314  
 City Jersey City State NJ Zip Code 07302-4609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **12 / 04 / 2019**  
**Transaction ID : VNW3HH5RVQ9**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Non-Contribution Account

**B. Brown, Robin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 World Trade Ctr  
 250 Greenwich St  
 City New York State NY Zip Code 10007-2140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bolton St. Johns Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 28 / 2019**  
**Transaction ID : VNW3HGYYPP2**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**C. Buloff, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 320 W End Ave  
 City New York State NY Zip Code 10023-8110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Psychotherapist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 28 / 2019**  
**Transaction ID : VNW3HGYYPP18**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 3000.00 |
| <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 51 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

|   |  |   |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Caminos, Kristyn, , ,</b>              |  | Date of Receipt<br>MM / DD / YYYY<br>12 / 04 / 2019 |
| Mailing Address 100 Summit Lake Dr  |  | <b>Transaction ID : VNW3HH5RVS5</b>                 |
| City<br>Valhalla  | State<br>NY                                  | Zip Code<br>10595-1339                              |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer (for Individual)<br>Consultant   | Occupation (for Individual)<br>USI Insurance | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           | Non-Contribution Account                            |

|   |                                      |   |
|---|--------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Cavanaugh, Teri, , ,</b>               |                                      | Date of Receipt<br>MM / DD / YYYY<br>12 / 04 / 2019 |
| Mailing Address 353 Ocean Ave<br>Apt 4F   |                                      | <b>Transaction ID : VNW3HH5RVK8</b>                 |
| City<br>Brooklyn  | State<br>NY                          | Zip Code<br>11226-1310                              |
| FEC ID number of contributing federal political committee.<br>C   |                                      | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer (for Individual)<br>Self   | Occupation (for Individual)<br>Sales | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00   | Non-Contribution Account                            |

|   |                                       |   |
|---|---------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Cohen, Barbara, E, ,</b>             |                                       | Date of Receipt<br>MM / DD / YYYY<br>07 / 28 / 2019 |
| Mailing Address 2109 Broadway<br>Apt 1365   |                                       | <b>Transaction ID : VNW3HGYYQG7</b>                 |
| City<br>New York  | State<br>NY                           | Zip Code<br>10023-2149                              |
| FEC ID number of contributing federal political committee.<br>C   |                                       | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer (for Individual)<br>Self   | Occupation (for Individual)<br>Artist | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br>500.00    | Non-Contribution Account                            |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 1000.00 |
| <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 52 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

|   |   |  |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Cooper, Elizabeth, , ,</b>             |   | Date of Receipt<br>MM / DD / YYYY<br><b>07 / 28 / 2019</b> |
| Mailing Address <b>658 Union St<br/>Apt 2</b>   |   | <b>Transaction ID : VNW3HGYYQF9</b>                        |
| City<br><b>Brooklyn</b>   | State<br><b>NY</b>                              | Zip Code<br><b>11215-1845</b>                              |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>150.00</b>        |
| Name of Employer (for Individual)<br><b>Fordham University</b>  | Occupation (for Individual)<br><b>Professor</b> | <input type="checkbox"/> Memo Item                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>275.00</b>       | Non-Contribution Account                                   |

|   |  |  |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Edwards, William, B, ,</b>             |  | Date of Receipt<br>MM / DD / YYYY<br><b>08 / 14 / 2019</b> |
| Mailing Address <b>15 E Putnam Ave<br/>3270</b>   |  | <b>Transaction ID : VNW3HGZSV06</b>                        |
| City<br><b>Greenwich</b>  | State<br><b>CT</b>                                 | Zip Code<br><b>06830-5424</b>                              |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br><b>10000.00</b>      |
| Name of Employer (for Individual)<br><b>Not Employed</b>  | Occupation (for Individual)<br><b>Not Employed</b> | <input type="checkbox"/> Memo Item                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>20000.00</b>        | Non-Contribution Account                                   |

|   |   |  |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Exton, Robyn, , ,</b>                |   | Date of Receipt<br>MM / DD / YYYY<br><b>07 / 10 / 2019</b> |
| Mailing Address <b>1760 Mission St</b>  |   | <b>Transaction ID : VNW3HGXSDD0</b>                        |
| City<br><b>San Francisco</b>  | State<br><b>CA</b>                        | Zip Code<br><b>94103-2418</b>                              |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>250.00</b>        |
| Name of Employer (for Individual)<br><b>HER</b>   | Occupation (for Individual)<br><b>CEO</b> | <input type="checkbox"/> Memo Item                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br><b>300.00</b> | Non-Contribution Account                                   |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>10400.00</b> |
| <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 53 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

|   |   |                                    |   |
|---|---|------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Exton, Robyn, , ,</b>                  |   |                                    | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br><b>07 / 10 / 2019</b> |
| Mailing Address 1760 Mission St   |   |                                    | <b>Transaction ID : VNW3HGXSDG4</b>                                     |
| City<br>San Francisco   | State<br>CA                               | Zip Code<br>94103-2418             | Amount of Each Receipt this Period<br><b>50.00</b>                      |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   |                                    | <input type="checkbox"/> Memo Item                                      |
| Name of Employer (for Individual)<br>HER  |   | Occupation (for Individual)<br>CEO | Non-Contribution Account  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>300.00</b> |                                    |   |

|   |   |   |   |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Felicio, Diane, , ,</b>                |   |   | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br><b>10 / 31 / 2019</b> |
| Mailing Address 39 Westchester Rd<br>Westchester Road   |   |   | <b>Transaction ID : VNW3HH5BAC2</b>                                     |
| City<br>Jamaica Plain   | State<br>MA                               | Zip Code<br>02130-3451                                    | Amount of Each Receipt this Period<br><b>500.00</b>                     |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   |   | <input type="checkbox"/> Memo Item                                      |
| Name of Employer (for Individual)<br>Community Catalyst   |   | Occupation (for Individual)<br>Interim Executive Director | Non-Contribution Account  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>500.00</b> |   |   |

|   |  |   |   |
|---|--|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Field, Michael, , ,</b>              |  |   | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br><b>07 / 28 / 2019</b> |
| Mailing Address 50 Central Park W   |  |   | <b>Transaction ID : VNW3HGYYQX0</b>                                     |
| City<br>New York  | State<br>NY                                | Zip Code<br>10023-6006                                | Amount of Each Receipt this Period<br><b>1100.00</b>                    |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  |   | <input type="checkbox"/> Memo Item                                      |
| Name of Employer (for Individual)<br>Field Real Estate Holdings   |  | Occupation (for Individual)<br>Real Estate Consultant | Non-Contribution Account  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br><b>1100.00</b> |   |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>1650.00</b> |
| <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 54 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

**A. Franchot, Polly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1819 Humboldt Ave S  
 City Minneapolis State MN Zip Code 55403-2814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Non Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2019  
**Transaction ID : VNW3HGYYPG6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**B. Grandolini, Gloria, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 709 E Capitol St SE  
 City Washington State DC Zip Code 20003-1345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2019  
**Transaction ID : VNW3HGYYQR0**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**C. Guthman, Maureen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 395 Riverside Dr Apt 11F  
 City New York State NY Zip Code 10025-1892  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BET Networks Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 04 / 2019  
**Transaction ID : VNW3HH5RW32**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00  
**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 55 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

**A. Halligan, Catherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 243 Caselli Ave  
 City San Francisco State CA Zip Code 94114-2322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ulta Beauty Occupation (for Individual) Board Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 11500.00

Date of Receipt **08 / 27 / 2019**  
**Transaction ID : VNW3HH0Y6A9**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

**B. Honig, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 320 Rutledge St  
 City San Francisco State CA Zip Code 94110-5231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **07 / 10 / 2019**  
**Transaction ID : VNW3HGXSXC4**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 Non-Contribution Account

**C. Honig, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 320 Rutledge St  
 City San Francisco State CA Zip Code 94110-5231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **07 / 10 / 2019**  
**Transaction ID : VNW3HGXSXC2**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 5700.00 |
| <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 56 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

**A. IPFS Corporation**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 Montgomery St  
 City Jersey City State NJ Zip Code 07302-3829  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1126.93

Date of Receipt **08 / 12 / 2019**  
**Transaction ID : VNW3HGZN4S1**  
 Amount of Each Receipt this Period 1126.93  
 Memo Item  
 Refund of insurance payment

**B. IPFS Corporation**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 Montgomery St  
 City Jersey City State NJ Zip Code 07302-3829  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2253.86

Date of Receipt **09 / 12 / 2019**  
**Transaction ID : VNW3HH1T9R8**  
 Amount of Each Receipt this Period 1126.93  
 Memo Item  
 Refund of insurance payment

**C. IPFS Corporation**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 Montgomery St  
 City Jersey City State NJ Zip Code 07302-3829  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3380.79

Date of Receipt **10 / 09 / 2019**  
**Transaction ID : VNW3HH3M8N9**  
 Amount of Each Receipt this Period 1126.93  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 3380.79  
**TOTAL** This Period (last page this line number only).....▶



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

Form/Schedule: SA17

Transaction ID : VNW3HH3M8N9

Refund of insurance payment

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: (check only one) | PAGE 58 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

|   |             |  |  |
|---|-------------|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Kaplan, Woody, , ,</b>                 |             |  | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>07 / 28 / 2019 |
| Mailing Address 2 Commonwealth Ave  |             |  | <b>Transaction ID : VNW3HGYYQW2</b>                              |
| City<br>Boston  | State<br>MA | Zip Code<br>02116-3134                     | Amount of Each Receipt this Period<br>500.00                     |
| FEC ID number of contributing federal political committee.<br>C   |             |  | <input type="checkbox"/> Memo Item                               |
| Name of Employer (for Individual)<br>Civil Liberties List   |             | Occupation (for Individual)<br>Provocateur | Non-Contribution Account   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>500.00         |  |

|   |             |   |  |
|---|-------------|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Laguens, Dawn, , ,</b>                 |             |   | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>07 / 11 / 2019 |
| Mailing Address 2006 Ashby Ave  |             |   | <b>Transaction ID : VNW3HGXP94</b>                               |
| City<br>Austin  | State<br>TX | Zip Code<br>78704-2038                    | Amount of Each Receipt this Period<br>500.00                     |
| FEC ID number of contributing federal political committee.<br>C   |             |   | <input type="checkbox"/> Memo Item                               |
| Name of Employer (for Individual)<br>Self   |             | Occupation (for Individual)<br>Consultant | Non-Contribution Account   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>2000.00       |  |

|   |             |   |  |
|---|-------------|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Laguens, Dawn, , ,</b>               |             |   | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>08 / 11 / 2019 |
| Mailing Address 2006 Ashby Ave  |             |   | <b>Transaction ID : VNW3HGZMBB7</b>                              |
| City<br>Austin  | State<br>TX | Zip Code<br>78704-2038                    | Amount of Each Receipt this Period<br>500.00                     |
| FEC ID number of contributing federal political committee.<br>C   |             |   | <input type="checkbox"/> Memo Item                               |
| Name of Employer (for Individual)<br>Self   |             | Occupation (for Individual)<br>Consultant | Non-Contribution Account   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Aggregate Year-to-Date ▼<br>2500.00       |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1500.00 |
| <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 59 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Laguens, Dawn, , ,</b>                 |   | Date of Receipt<br>MM / DD / YYYY<br>09 / 11 / 2019 |
| Mailing Address 2006 Ashby Ave  |   | <b>Transaction ID : VNW3HH1T636</b>                 |
| City<br>Austin  | State<br>TX                               | Zip Code<br>78704-2038                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer (for Individual)<br>Self   | Occupation (for Individual)<br>Consultant | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3000.00       | Non-Contribution Account                            |

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Laguens, Dawn, , ,</b>                 |   | Date of Receipt<br>MM / DD / YYYY<br>10 / 11 / 2019 |
| Mailing Address 2006 Ashby Ave  |   | <b>Transaction ID : VNW3HH3S7T6</b>                 |
| City<br>Austin  | State<br>TX                               | Zip Code<br>78704-2038                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer (for Individual)<br>Self   | Occupation (for Individual)<br>Consultant | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3500.00       | Non-Contribution Account                            |

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Laguens, Dawn, , ,</b>               |   | Date of Receipt<br>MM / DD / YYYY<br>11 / 11 / 2019 |
| Mailing Address 2006 Ashby Ave  |   | <b>Transaction ID : VNW3HH58ZZ6</b>                 |
| City<br>Austin  | State<br>TX                               | Zip Code<br>78704-2038                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer (for Individual)<br>Self   | Occupation (for Individual)<br>Consultant | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br>4000.00       | Non-Contribution Account                            |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1500.00 |
| <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 60 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

**A. Laguens, Dawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2006 Ashby Ave  
 City Austin State TX Zip Code 78704-2038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt **12 / 11 / 2019**  
**Transaction ID : VNW3HH5RZ70**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**B. Lenane, Joan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 681  
 City Provincetown State MA Zip Code 02657-0681  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Real Estate Broker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 28 / 2019**  
**Transaction ID : VNW3HGYYQH5**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**C. Leszczynski, Jeanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 65 Wellesley Ave  
 City Needham State MA Zip Code 02494-1821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 6500.00

Date of Receipt **07 / 28 / 2019**  
**Transaction ID : VNW3HGYYPJ2**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-Contribution Account

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 6000.00 |
| <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 61 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

|   |  |  |   |
|---|--|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Leszczynski, Jeanne, , ,</b>           |  |  | Date of Receipt   |
| Mailing Address 65 Wellesley Ave  |  |  | <input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2019"/> |
| City<br>Needham   | State<br>MA  | Zip Code<br>02494-1821                 | <b>Transaction ID : VNW3HGYYQS8</b>   |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                    |  |  | Amount of Each Receipt this Period<br><input type="text" value="1000.00"/>                            |
| Name of Employer (for Individual)<br>None   |  | Occupation (for Individual)<br>Retired | <input type="checkbox"/> Memo Item  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><input type="text" value="6500.00"/> |  | Non-Contribution Account  |

|   |   |   |   |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Litwin, Sharen, , ,</b>                |   |   | Date of Receipt   |
| Mailing Address 40 Benjamin Rd  |   |   | <input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2019"/> |
| City<br>Belmont   | State<br>MA   | Zip Code<br>02478-2334                  | <b>Transaction ID : VNW3HGYYP91</b>   |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                    |   |   | Amount of Each Receipt this Period<br><input type="text" value="300.00"/>                             |
| Name of Employer (for Individual)<br>Kotin Crabtree & Strong  |   | Occupation (for Individual)<br>Attorney | <input type="checkbox"/> Memo Item  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><input type="text" value="300.00"/> |   | Non-Contribution Account  |

|   |   |  |   |
|---|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Lopez, Maria, , ,</b>                |   |  | Date of Receipt   |
| Mailing Address 22 Beacon Heights Dr  |   |  | <input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2019"/> |
| City<br>Newton  | State<br>MA   | Zip Code<br>02459-2022                 | <b>Transaction ID : VNW3HGYYR04</b>   |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                  |   |  | Amount of Each Receipt this Period<br><input type="text" value="500.00"/>                             |
| Name of Employer (for Individual)<br>None   |   | Occupation (for Individual)<br>Retired | <input type="checkbox"/> Memo Item  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br><input type="text" value="500.00"/> |  | Non-Contribution Account  |

|   |                                      |
|---|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <input type="text" value="1800.00"/> |
| <b>TOTAL</b> This Period (last page this line number only)..... | <input type="text"/>                 |

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

|   |                              |                                   |  |
|---|------------------------------|-----------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 62 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

**A. McCall, Dawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1000 S Pointe Dr  
 Apt 2101  
 City Miami Beach State FL Zip Code 33139-7348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 28 / 2019**  
**Transaction ID : VNW3HGYPB7**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**B. McConnell, Meg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 33 Liberty St  
 City New York State NY Zip Code 10045-1003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Federal Reserve Bank Of New York Occupation (for Individual) SVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **12 / 04 / 2019**  
**Transaction ID : VNW3HH5RVD0**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

**C. Mondini, Elena J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1326 Laurel Ave  
 City Ocean State NJ Zip Code 07712-4607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **07 / 04 / 2019**  
**Transaction ID : VNW3HGX9C45**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Non-Contribution Account

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1600.00 |
| <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 63 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

**A. Newstat, Joyce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 California St  
 27C  
 City San Francisco State CA Zip Code 94109-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Policy Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **07 / 10 / 2019**  
**Transaction ID : VNW3HGXSAX1**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item  
 Non-Contribution Account

**B. Newstat, Joyce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 California St  
 27C  
 City San Francisco State CA Zip Code 94109-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Policy Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **12 / 12 / 2019**  
**Transaction ID : VNW3HH5T8J4**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**C. Piatt, Andrea, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 124 Canton Ave  
 City Milton State MA Zip Code 02186-3507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Psychologist Occupation (for Individual) Commonwealth Psychology Associates  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **07 / 28 / 2019**  
**Transaction ID : VNW3HGYYPK0**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item  
 Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4000.00  
**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 64 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

|   |  |   |  |
|---|--|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Reamer, Sue, , ,</b>                   |  |   | Date of Receipt<br>MM / DD / YYYY<br><b>07 / 28 / 2019</b> |
| Mailing Address <b>20 Webster St<br/>Apt 213</b>  |  |   | <b>Transaction ID : VNW3HGYYQB8</b>                        |
| City<br><b>Brookline</b>  | State<br><b>MA</b>                         | Zip Code<br><b>02446-4963</b>                               | Amount of Each Receipt this Period<br><b>1000.00</b>       |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  |   | <input type="checkbox"/> Memo Item                         |
| Name of Employer (for Individual)<br><b>Not Employed</b>  |  | Occupation (for Individual)<br><b>Retired, Not Employed</b> | <input type="checkbox"/> Non-Contribution Account          |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>3500.00</b> |   |  |

|   |   |   |  |
|---|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Reamer, Sue, , ,</b>                   |   |   | Date of Receipt<br>MM / DD / YYYY<br><b>12 / 17 / 2019</b> |
| Mailing Address <b>20 Webster St<br/>Apt 213</b>  |   |   | <b>Transaction ID : VNW3HH5W969</b>                        |
| City<br><b>Brookline</b>  | State<br><b>MA</b>                          | Zip Code<br><b>02446-4963</b>                               | Amount of Each Receipt this Period<br><b>15000.00</b>      |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   |   | <input type="checkbox"/> Memo Item                         |
| Name of Employer (for Individual)<br><b>Not Employed</b>  |   | Occupation (for Individual)<br><b>Retired, Not Employed</b> | <input type="checkbox"/> Non-Contribution Account          |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>18500.00</b> |   |  |

|   |  |  |   |
|---|--|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Ricketts, Laura, , ,</b>             |  |  | Date of Receipt<br>MM / DD / YYYY<br><b>07 / 19 / 2019</b>        |
| Mailing Address <b>430 Sheridan Rd</b>  |  |  | <b>Transaction ID : VNW3HGY3823</b>                               |
| City<br><b>Wilmette</b>   | State<br><b>IL</b>                           | Zip Code<br><b>60091-2821</b>                  | Amount of Each Receipt this Period<br><b>19498.73</b>             |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  |  | <input type="checkbox"/> Memo Item                                |
| Name of Employer (for Individual)<br><b>Chicago Cubs</b>  |  | Occupation (for Individual)<br><b>Co-Owner</b> | <input type="checkbox"/> Stock donation; non-contribution account |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br><b>114498.73</b> |  |   |

|   |                 |
|---|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>35498.73</b> |
| <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 65 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

|   |  |  |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Ritchie, Alix, L, ,</b>                |  | Date of Receipt<br>MM / DD / YYYY<br><b>08 / 12 / 2019</b> |
| Mailing Address <b>PO Box 030220</b>  |  | <b>Transaction ID : VNW3HGZN791</b>                        |
| City<br><b>Fort Lauderdale</b>  | State<br><b>FL</b>                                       | Zip Code<br><b>33303-0220</b>                              |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br><b>20000.00</b>      |
| Name of Employer (for Individual)<br><b>Self</b>  | Occupation (for Individual)<br><b>Foundation Officer</b> | <input type="checkbox"/> Memo Item                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>67000.00</b>              | Non-Contribution Account                                   |

|   |  |  |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Ritchie, Alix, L, ,</b>                |  | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 27 / 2019</b> |
| Mailing Address <b>PO Box 030220</b>  |  | <b>Transaction ID : VNW3HH4C9B2</b>                        |
| City<br><b>Fort Lauderdale</b>  | State<br><b>FL</b>                                       | Zip Code<br><b>33303-0220</b>                              |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br><b>1000.00</b>       |
| Name of Employer (for Individual)<br><b>Self</b>  | Occupation (for Individual)<br><b>Foundation Officer</b> | <input type="checkbox"/> Memo Item                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>68000.00</b>              | Non-Contribution Account                                   |

|   |  |  |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Rose, Ina, , ,</b>                   |  | Date of Receipt<br>MM / DD / YYYY<br><b>12 / 04 / 2019</b> |
| Mailing Address <b>47 Howell Rd</b>   |  | <b>Transaction ID : VNW3HH5RVT3</b>                        |
| City<br><b>Mountain Lakes</b>   | State<br><b>NJ</b>                               | Zip Code<br><b>07046-1350</b>                              |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br><b>2500.00</b>       |
| Name of Employer (for Individual)<br><b>Passion 4 People Consulting</b>   | Occupation (for Individual)<br><b>Accountant</b> | <input type="checkbox"/> Memo Item                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br><b>2500.00</b>       | Non-Contribution Account                                   |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>23500.00</b> |
| <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 66 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

**A. Sadoff, Carla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 68 N 5Th St  
 City Hudson State NY Zip Code 12534-1722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lumeri Occupation (for Individual) Management Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 04 / 2019  
**Transaction ID : VNW3HH5RVE8**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

**B. Scaparotti, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1615 Grand View Dr  
 City Berkeley State CA Zip Code 94705-1637  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Law Offices Of Linda Scaparotti Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 10 / 2019  
**Transaction ID : VNW3HGXSJ33**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**C. Scherr, Rebekah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 W 73Rd St Apt 1F  
 City New York State NY Zip Code 10023-3160  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Paul Weiss Rifkind Wharton & Garrison Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 04 / 2019  
**Transaction ID : VNW3HH5RXT7**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1500.00 |
| <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 67 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

**A. Slavin, Jeffrey, Z., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5706 Warwick PI  
 City Chevy Chase State MD Zip Code 20815-5502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Town Of Somerset, MD Occupation (for Individual) Mayor  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 28 / 2019**  
**Transaction ID : VNW3HGVD999**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-Contribution Account

**B. Smith, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 34 Webster St  
 City Newport State RI Zip Code 02840-4031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Artist  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 28 / 2019**  
**Transaction ID : VNW3HGYYPH4**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

**C. Solomon, Cindy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 196 Maxwell Cir  
 City Erie State CO Zip Code 80516-8409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSA Inc. Occupation (for Individual) Speaker  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 12 / 2019**  
**Transaction ID : VNW3HH5GED0**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

|   |         |
|---|---------|
| <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 68 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

|   |  |  |   |
|---|--|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Solomon, Cindy, , ,</b>                |  |  | Date of Receipt   |
| Mailing Address 196 Maxwell Cir   |  |  | <input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2019"/> |
| City<br>Erie  | State<br>CO  | Zip Code<br>80516-8409                 | <b>Transaction ID : VNW3HH5RVJ0</b>   |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                    |  |  | Amount of Each Receipt this Period<br><input type="text" value="5000.00"/>                            |
| Name of Employer (for Individual)<br>CSA Inc.   |  | Occupation (for Individual)<br>Speaker | <input type="checkbox"/> Memo Item  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><input type="text" value="6000.00"/> |  | Non-Contribution Account  |

|   |   |   |   |
|---|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Sparks, Allison, J, ,</b>              |   |   | Date of Receipt   |
| Mailing Address 60 Collingwood St   |   |   | <input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2019"/> |
| City<br>San Francisco   | State<br>CA   | Zip Code<br>94114-1907                            | <b>Transaction ID : VNW3HGXSJ00</b>   |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                    |   |   | Amount of Each Receipt this Period<br><input type="text" value="500.00"/>                             |
| Name of Employer (for Individual)<br>Masto Foundation   |   | Occupation (for Individual)<br>Executive Director | <input type="checkbox"/> Memo Item  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><input type="text" value="500.00"/> |   | Non-Contribution Account  |

|   |   |  |   |
|---|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Tomchin, Joy, , ,</b>                |   |  | Date of Receipt   |
| Mailing Address 252 7Th Ave<br>Apt 15   |   |  | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2019"/> |
| City<br>New York  | State<br>NY   | Zip Code<br>10001-7326                       | <b>Transaction ID : VNW3HH3R839</b>   |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                  |   |  | Amount of Each Receipt this Period<br><input type="text" value="1000.00"/>                            |
| Name of Employer (for Individual)<br>Self   |   | Occupation (for Individual)<br>Film Producer | <input type="checkbox"/> Memo Item  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br><input type="text" value="21000.00"/> |  | Non-Contribution Account  |

|   |                                      |
|---|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <input type="text" value="6500.00"/> |
| <b>TOTAL</b> This Period (last page this line number only)..... | <input type="text"/>                 |

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

|   |                              |                                   |  |
|---|------------------------------|-----------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 69 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

|   |   |  |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Tomchin, Joy, , ,</b>                  |   | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 22 / 2019</b> |
| Mailing Address <b>252 7Th Ave<br/>Apt 15</b>   |   | <b>Transaction ID : VNW3HH4C988</b>                        |
| City<br><b>New York</b>   | State<br><b>NY</b>                                  | Zip Code<br><b>10001-7326</b>                              |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>1000.00</b>       |
| Name of Employer (for Individual)<br><b>Self</b>  | Occupation (for Individual)<br><b>Film Producer</b> | <input type="checkbox"/> Memo Item                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>22000.00</b>         | Non-Contribution Account                                   |

|   |   |  |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Vaid, Urvashi, , ,</b>                 |   | Date of Receipt<br>MM / DD / YYYY<br><b>12 / 04 / 2019</b> |
| Mailing Address <b>230 W End Ave<br/>10C</b>  |   | <b>Transaction ID : VNW3HH5RW09</b>                        |
| City<br><b>New York</b>   | State<br><b>NY</b>  | Zip Code<br><b>10023-3661</b>                              |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>1000.00</b>       |
| Name of Employer (for Individual)<br><b>The Vaid Group</b>  | Occupation (for Individual)<br><b>Management Consultant</b> | <input type="checkbox"/> Memo Item                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>1000.00</b>                  | Non-Contribution Account                                   |

|   |  |  |
|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Webber, Christy, , ,</b>             |  | Date of Receipt<br>MM / DD / YYYY<br><b>10 / 16 / 2019</b> |
| Mailing Address <b>2900 W Ferdinand St</b>  |  | <b>Transaction ID : VNW3HH3W2F0</b>                        |
| City<br><b>Chicago</b>  | State<br><b>IL</b>                               | Zip Code<br><b>60612-1640</b>                              |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br><b>500.00</b>        |
| Name of Employer (for Individual)<br><b>Christy Webber Landscapes</b>   | Occupation (for Individual)<br><b>Landscaper</b> | <input type="checkbox"/> Memo Item                         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br><b>1000.00</b>       | Non-Contribution Account                                   |

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>2500.00</b> |
| <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 70 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

**A. Weiner, Shari, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 East 81 St PT 3 E  
 Apt 3E  
 City New York State NY Zip Code 10028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Murphy Mckeon , PC Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2019  
**Transaction ID : VNW3HGYYQA0**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 Non-Contribution Account

**B. Weiner, Shari, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 East 81 St PT 3 E  
 Apt 3E  
 City New York State NY Zip Code 10028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Murphy Mckeon , PC Attorney  
 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  
 07 / 29 / 2019  
**Transaction ID : VNW3HGYP8J8**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 Non-Contribution Account

**C. Weiner, Shari, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 East 81 St PT 3 E  
 Apt 3E  
 City New York State NY Zip Code 10028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Murphy Mckeon , PC Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼  
 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2019  
**Transaction ID : VNW3HH5BAJ0**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 Non-Contribution Account

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2000.00 |
| <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 71 OF 224                         |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16            |
|   |                              |                                   | <input checked="" type="checkbox"/> 17 |

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

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Weiner, Shari, L, ,</b>                |   | Date of Receipt<br>MM / DD / YYYY<br>12 / 04 / 2019 |
| Mailing Address 30 East 81 St PT 3 E<br>Apt 3E  |   | <b>Transaction ID : VNW3HH5RW24</b>                 |
| City<br>New York  | State<br>NY                             | Zip Code<br>10028                                   |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer (for Individual)<br>Murphy Mckeon , PC   | Occupation (for Individual)<br>Attorney | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3500.00     | Non-Contribution Account                            |

|   |                                      |   |
|---|--------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Wells, Mary Alice, , ,</b>             |                                      | Date of Receipt<br>MM / DD / YYYY<br>07 / 28 / 2019 |
| Mailing Address 359 Commercial St   |                                      | <b>Transaction ID : VNW3HGYD9C3</b>                 |
| City<br>Provincetown  | State<br>MA                          | Zip Code<br>02657-2337                              |
| FEC ID number of contributing federal political committee.<br>C   |                                      | Amount of Each Receipt this Period<br>9.00          |
| Name of Employer (for Individual)<br>Harbor Lounge  | Occupation (for Individual)<br>Owner | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>259.00   | Non-Contribution Account                            |

|   |                                      |   |
|---|--------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Wells, Mary Alice, , ,</b>           |                                      | Date of Receipt<br>MM / DD / YYYY<br>07 / 28 / 2019 |
| Mailing Address 359 Commercial St   |                                      | <b>Transaction ID : VNW3HGYPF8</b>                  |
| City<br>Provincetown  | State<br>MA                          | Zip Code<br>02657-2337                              |
| FEC ID number of contributing federal political committee.<br>C   |                                      | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer (for Individual)<br>Harbor Lounge  | Occupation (for Individual)<br>Owner | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br>259.00   | Non-Contribution Account                            |

|  |           |
|--|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 759.00    |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 120438.52 |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                        |   |  |  |
|---|--|------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amalgamated Bank</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>07 / 01 / 2019  |  |  |
| Mailing Address 1825 K St NW<br>Frnt 1  |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07R3</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 3.75 |  |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20006-1245 | Memo Item <input type="checkbox"/>  |  |  |
| Purpose of Disbursement<br>Bank Fee   |  | Category/<br>Type      | [REDACTED]  |  |  |
| Candidate Name  |  | [REDACTED]             |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | [REDACTED]  |  |  |
| State: District:  | [REDACTED]   |                        |   |  |  |

|   |  |                        |   |  |  |
|---|--|------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amalgamated Bank</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019  |  |  |
| Mailing Address 1825 K St NW<br>Frnt 1  |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07RB</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 5.13 |  |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20006-1245 | Memo Item <input type="checkbox"/>  |  |  |
| Purpose of Disbursement<br>Bank Fee   |  | Category/<br>Type      | [REDACTED]  |  |  |
| Candidate Name  |  | [REDACTED]             |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | [REDACTED]  |  |  |
| State: District:  | [REDACTED]   |                        |   |  |  |

|   |  |                        |   |  |  |
|---|--|------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amalgamated Bank</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>08 / 01 / 2019  |  |  |
| Mailing Address 1825 K St NW<br>Frnt 1  |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07R4</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 3.75 |  |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20006-1245 | Memo Item <input type="checkbox"/>  |  |  |
| Purpose of Disbursement<br>Bank Fee   |  | Category/<br>Type      | [REDACTED]  |  |  |
| Candidate Name  |  | [REDACTED]             |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | [REDACTED]  |  |  |
| State: District:  | [REDACTED]   |                        |   |  |  |

|  |                  |
|--|------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 12.63 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]       |



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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |             |  |   |  |
|---|-------------|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amalgamated Bank</b> |             |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 20 / 2019  |  |
| Mailing Address 1825 K St NW<br>Frnt 1                                |             |  | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07R9</b><br>Amount of Each Disbursement this Period<br>[ ] 5.00 |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20006-1245   | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Bank Fee                                   |             | Category/Type<br>[ ]   |   |  |
| 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)<br><b>B. Amalgamated Bank</b> |             |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 03 / 2019  |  |
| Mailing Address 1825 K St NW<br>Frnt 1                                |             |  | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07R5</b><br>Amount of Each Disbursement this Period<br>[ ] 3.75 |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20006-1245   | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Bank Fee                                   |             | Category/Type<br>[ ]   |   |  |
| 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)<br><b>C. Amalgamated Bank</b> |             |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 16 / 2019  |  |
| Mailing Address 1825 K St NW<br>Frnt 1                                |             |  | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07R4</b><br>Amount of Each Disbursement this Period<br>[ ] 5.00 |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20006-1245   | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Bank Fee                                   |             | Category/Type<br>[ ]   |   |  |
| 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).....▶      | [ ] 13.75 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [ ]       |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW  
Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 01 / 2019

FEC Identification Number:  **C**

Transaction ID : VNV49A07R6

Amount of Each Disbursement this Period:  3.75

Memo Item

**B. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW  
Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 29 / 2019

FEC Identification Number:  **C**

Transaction ID : VNV49A07QT

Amount of Each Disbursement this Period:  1.25

Memo Item

**C. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW  
Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 29 / 2019

FEC Identification Number:  **C**

Transaction ID : VNV49A07QI

Amount of Each Disbursement this Period:  1.25

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶  6.25

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

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amalgamated Bank</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 29 / 2019   |
| Mailing Address 1825 K St NW<br>Frnt 1  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07R0</b><br>Amount of Each Disbursement this Period<br>1.73 |
| City<br>Washington  | State<br>DC  |  |
| Zip Code<br>20006-1245  |  | Memo Item <input type="checkbox"/>   |
| Purpose of Disbursement<br>Bank Fee   |  |  |
| Candidate Name  |  | Category/Type  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amalgamated Bank</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 01 / 2019   |
| Mailing Address 1825 K St NW<br>Frnt 1  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07R7</b><br>Amount of Each Disbursement this Period<br>3.75 |
| City<br>Washington  | State<br>DC  |  |
| Zip Code<br>20006-1245  |  | Memo Item <input type="checkbox"/>   |
| Purpose of Disbursement<br>Bank Fee   |  |  |
| Candidate Name  |  | Category/Type  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amalgamated Bank</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 04 / 2019   |
| Mailing Address 1825 K St NW<br>Frnt 1  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07R1</b><br>Amount of Each Disbursement this Period<br>112.57 |
| City<br>Washington  | State<br>DC  |  |
| Zip Code<br>20006-1245  |  | Memo Item <input type="checkbox"/>   |
| Purpose of Disbursement<br>Bank Fee   |  |  |
| Candidate Name  |  | Category/Type  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 118.05 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amalgamated Bank</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>11 / 26 / 2019  |  |
| Mailing Address 1825 K St NW<br>Frnt 1  |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07QV</b><br>Amount of Each Disbursement this Period<br>[ ] 1.25 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20006-1245   | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Bank Fee   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |                          | Memo Item <input type="checkbox"/>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amalgamated Bank</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>11 / 26 / 2019  |  |
| Mailing Address 1825 K St NW<br>Frnt 1  |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07QX</b><br>Amount of Each Disbursement this Period<br>[ ] 1.25 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20006-1245   | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Bank Fee   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |                          | Memo Item <input type="checkbox"/>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amalgamated Bank</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>11 / 26 / 2019  |  |
| Mailing Address 1825 K St NW<br>Frnt 1  |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07R2</b><br>Amount of Each Disbursement this Period<br>[ ] 2.68 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20006-1245   | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Bank Fee   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |                          | Memo Item <input type="checkbox"/>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |   |  |
| State: District:  |  |                          |   |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [ ] 5.18 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [ ]      |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amalgamated Bank</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019   |
| Mailing Address 1825 K St NW<br>Frnt 1  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07R8</b><br>Amount of Each Disbursement this Period<br>3.75 |
| City<br>Washington  | State<br>DC  |  |
| Purpose of Disbursement<br>Bank Fee   | Zip Code<br>20006-1245   | Memo Item <input type="checkbox"/>   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amalgamated Bank</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019   |
| Mailing Address 1825 K St NW<br>Frnt 1  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07RD</b><br>Amount of Each Disbursement this Period<br>124.68 |
| City<br>Washington  | State<br>DC  |  |
| Purpose of Disbursement<br>Bank Fee   | Zip Code<br>20006-1245   | Memo Item <input type="checkbox"/>   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Amalgamated Bank</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 18 / 2019  |
| Mailing Address 1825 K St NW<br>Frnt 1  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07Q</b><br>Amount of Each Disbursement this Period<br>1.25 |
| City<br>Washington  | State<br>DC  |   |
| Purpose of Disbursement<br>Bank Fee   | Zip Code<br>20006-1245   | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

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

129.68

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

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amalgamated Bank</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 18 / 2019   |
| Mailing Address 1825 K St NW<br>Frnt 1  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07QZ</b><br>Amount of Each Disbursement this Period<br>1.25 |
| City<br>Washington  | State<br>DC  |  |
| Zip Code<br>20006-1245  |  | Memo Item <input type="checkbox"/>   |
| Purpose of Disbursement<br>Bank Fee   |  |  |
| Candidate Name  |  | Category/Type<br><input type="checkbox"/>  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amalgamated Bank</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 18 / 2019   |
| Mailing Address 1825 K St NW<br>Frnt 1  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07R1</b><br>Amount of Each Disbursement this Period<br>2.20 |
| City<br>Washington  | State<br>DC  |  |
| Zip Code<br>20006-1245  |  | Memo Item <input type="checkbox"/>   |
| Purpose of Disbursement<br>Bank Fee   |  |  |
| Candidate Name  |  | Category/Type<br><input type="checkbox"/>  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amtrak</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 19 / 2019   |
| Mailing Address 201 I St NE   |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07R1</b><br>Amount of Each Disbursement this Period<br>7.75 |
| City<br>Washington  | State<br>DC  |  |
| Zip Code<br>20002-4449  |  | Memo Item <input type="checkbox"/>   |
| Purpose of Disbursement<br>Travel   |  |  |
| Candidate Name  |  | Category/Type<br><input type="checkbox"/>  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 11.20 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Amtrak</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 19 / 2019  |
| Mailing Address 201 I St NE   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07S0</b><br>Amount of Each Disbursement this Period<br>62.00 |
| City<br>Washington  | State<br>DC  | Zip Code<br>20002-4449  |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amtrak</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 25 / 2019   |
| Mailing Address 201 I St NE   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07RF</b><br>Amount of Each Disbursement this Period<br>1.44 |
| City<br>Washington  | State<br>DC  | Zip Code<br>20002-4449   |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  | <input type="checkbox"/> Memo Item   |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Amtrak</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 25 / 2019  |
| Mailing Address 201 I St NE   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07R2</b><br>Amount of Each Disbursement this Period<br>53.75 |
| City<br>Washington  | State<br>DC  | Zip Code<br>20002-4449  |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

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

117.19

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |  |                   |  |
|---|--|--|--|-------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amtrak</b>   |  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 29 / 2019 |                   |  |
| Mailing Address 201 I St NE   |  |  |  |                   |  |
| City<br>Washington  |  | State<br>DC  | Zip Code<br>20002-4449                                   |                   |  |
| Purpose of Disbursement<br>Travel   |  |  |  | Category/<br>Type |  |
| Candidate Name  |  |  |  |                   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |                   |  |
| State: District:  |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07RK</b><br>Amount of Each Disbursement this Period<br>3.25              |  |                   |  |
| <input type="checkbox"/> Memo Item  |  |  |  |                   |  |

|   |  |  |  |                   |  |
|---|--|--|--|-------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amtrak</b>   |  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 28 / 2019 |                   |  |
| Mailing Address 201 I St NE   |  |  |  |                   |  |
| City<br>Washington  |  | State<br>DC  | Zip Code<br>20002-4449                                   |                   |  |
| Purpose of Disbursement<br>Travel   |  |  |  | Category/<br>Type |  |
| Candidate Name  |  |  |  |                   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |                   |  |
| State: District:  |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07RY</b><br>Amount of Each Disbursement this Period<br>47.00             |  |                   |  |
| <input type="checkbox"/> Memo Item  |  |  |  |                   |  |

|   |  |  |  |                   |  |
|---|--|--|--|-------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amtrak</b>   |  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2019 |                   |  |
| Mailing Address 201 I St NE   |  |  |  |                   |  |
| City<br>Washington  |  | State<br>DC  | Zip Code<br>20002-4449                                   |                   |  |
| Purpose of Disbursement<br>Travel   |  |  |  | Category/<br>Type |  |
| Candidate Name  |  |  |  |                   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |                   |  |
| State: District:  |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07RI</b><br>Amount of Each Disbursement this Period<br>3.50              |  |                   |  |
| <input type="checkbox"/> Memo Item  |  |  |  |                   |  |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 53.75 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |



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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                          |  |  |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amtrak</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2019   |  |
| Mailing Address 201 I St NE   |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07RR</b><br>Amount of Each Disbursement this Period<br>[ ] 19.50 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20002-4449   | Memo Item <input type="checkbox"/>   |  |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>   |  |
| Candidate Name  |  |                          | Memo Item <input type="checkbox"/>   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          | Memo Item <input type="checkbox"/>   |  |
| State: District:  |  |                          | Memo Item <input type="checkbox"/>   |  |

|   |  |                          |  |  |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amtrak</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>09 / 04 / 2019   |  |
| Mailing Address 201 I St NE   |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07RW</b><br>Amount of Each Disbursement this Period<br>[ ] 39.00 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20002-4449   | Memo Item <input type="checkbox"/>   |  |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>   |  |
| Candidate Name  |  |                          | Memo Item <input type="checkbox"/>   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          | Memo Item <input type="checkbox"/>   |  |
| State: District:  |  |                          | Memo Item <input type="checkbox"/>   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amtrak</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>09 / 13 / 2019  |  |
| Mailing Address 201 I St NE   |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07Rf</b><br>Amount of Each Disbursement this Period<br>[ ] 6.00 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20002-4449   | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |                          | Memo Item <input type="checkbox"/>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          | Memo Item <input type="checkbox"/>  |  |
| State: District:  |  |                          | Memo Item <input type="checkbox"/>  |  |

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

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

|           |
|-----------|
| [ ] 64.50 |
| [ ]       |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 26 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07RC

Amount of Each Disbursement this Period: 1.45

Memo Item

**B. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 08 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07RJ

Amount of Each Disbursement this Period: 2.13

Memo Item

**C. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 08 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07RJ

Amount of Each Disbursement this Period: 42.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 46.08

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

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

**A. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 09 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07RH

Amount of Each Disbursement this Period: 1.56

Memo Item

**B. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 09 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07RN

Amount of Each Disbursement this Period: 3.50

Memo Item

**C. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07R5

Amount of Each Disbursement this Period: 21.25

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 26.31

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Amtrak</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 23 / 2019  |
| Mailing Address 201 I St NE   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07RV</b><br>Amount of Each Disbursement this Period<br>27.00 |
| City<br>Washington  | State<br>DC  | Zip Code<br>20002-4449  |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Amtrak</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 04 / 2019  |
| Mailing Address 201 I St NE   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07RT</b><br>Amount of Each Disbursement this Period<br>24.50 |
| City<br>Washington  | State<br>DC  | Zip Code<br>20002-4449  |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. BankCard</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019  |
| Mailing Address 28721 Roadside Dr Ste 299   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07SI</b><br>Amount of Each Disbursement this Period<br>72.50 |
| City<br>Agoura Hills  | State<br>CA  | Zip Code<br>91301   |
| Purpose of Disbursement<br>Contribution Processing Fee  |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 124.00 |
| <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 checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. BankCard</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 02 / 2019  |
| Mailing Address 28721 Roadside Dr Ste 299   |  | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07SM</b><br>Amount of Each Disbursement this Period<br>[ ] 213.94 |
| City<br>Agoura Hills  | State<br>CA  | Zip Code<br>91301   |
| Purpose of Disbursement<br>Contribution Processing Fee  |  | Category/<br>Type<br>[ ]  |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. BankCard</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 31 / 2019   |
| Mailing Address 28721 Roadside Dr Ste 299   |  | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07SE</b><br>Amount of Each Disbursement this Period<br>[ ] 46.25 |
| City<br>Agoura Hills  | State<br>CA  | Zip Code<br>91301  |
| Purpose of Disbursement<br>Contribution Processing Fee  |  | Category/<br>Type<br>[ ]   |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  | <input type="checkbox"/> Memo Item   |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. BankCard</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2019   |
| Mailing Address 28721 Roadside Dr Ste 299   |  | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07SF</b><br>Amount of Each Disbursement this Period<br>[ ] 51.25 |
| City<br>Agoura Hills  | State<br>CA  | Zip Code<br>91301  |
| Purpose of Disbursement<br>Contribution Processing Fee  |  | Category/<br>Type<br>[ ]   |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  | <input type="checkbox"/> Memo Item   |  |

|  |            |
|--|------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [ ] 311.44 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [ ]        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07SJ

Amount of Each Disbursement this Period: 167.04

Memo Item

**B. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07SG

Amount of Each Disbursement this Period: 54.11

Memo Item

**C. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07SH

Amount of Each Disbursement this Period: 116.25

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 337.40

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

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

**A. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07T6

Amount of Each Disbursement this Period: 81.76

Memo Item

**B. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07T2:

Amount of Each Disbursement this Period: 67.41

Memo Item

**C. CNA**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07T3

Amount of Each Disbursement this Period: 67.41

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 216.58

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

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

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

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 01 / 2019

FEC Identification Number: **C**

Transaction ID : **VNV49A07T4**

Amount of Each Disbursement this Period: 67.41

Memo Item

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

Mailing Address 1 Meridian Blvd  
Ste 3A01

City Wyomissing State PA Zip Code 19610-3235

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 03 / 2019

FEC Identification Number: **C**

Transaction ID : **VNV49A07T5**

Amount of Each Disbursement this Period: 67.41

Memo Item

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

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 23 / 2019

FEC Identification Number: **C**

Transaction ID : **VNV49A07T8**

Amount of Each Disbursement this Period: 846.10

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 980.92

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. DC Health Link</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 31 / 2019  |
| Mailing Address PO Box 97022  |  | FEC Identification Number<br><b>C</b><br>Transaction ID : VNV49A07T9<br>Amount of Each Disbursement this Period<br>846.10 |
| City<br>Washington  | State<br>DC  |   |
| Zip Code<br>20090-7022  | Purpose of Disbursement<br>Insurance Payment   | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. DC Health Link</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 21 / 2019  |
| Mailing Address PO Box 97022  |  | FEC Identification Number<br><b>C</b><br>Transaction ID : VNV49A07TA<br>Amount of Each Disbursement this Period<br>846.10 |
| City<br>Washington  | State<br>DC  |   |
| Zip Code<br>20090-7022  | Purpose of Disbursement<br>Insurance Payment   | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. DC Health Link</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 15 / 2019  |
| Mailing Address PO Box 97022  |  | FEC Identification Number<br><b>C</b><br>Transaction ID : VNV49A07TE<br>Amount of Each Disbursement this Period<br>846.10 |
| City<br>Washington  | State<br>DC  |   |
| Zip Code<br>20090-7022  | Purpose of Disbursement<br>Insurance Payment   | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

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

2538.30

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

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

Full Name (Last, First, Middle Initial)  
**A. DC Health Link**

Date of Disbursement: MM / DD / YYYY  
12 / 19 / 2019

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: **C**

Transaction ID : **VNV49A07TC**

Amount of Each Disbursement this Period: 1942.19

Memo Item

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

Date of Disbursement: MM / DD / YYYY  
08 / 01 / 2019

Mailing Address 1101 15Th St NW

City Washington State DC Zip Code 20005-5002

Purpose of Disbursement Subscription

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: **C**

Transaction ID : **VNV49A07TG**

Amount of Each Disbursement this Period: 50.00

Memo Item

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

Date of Disbursement: MM / DD / YYYY  
09 / 03 / 2019

Mailing Address 1101 15Th St NW

City Washington State DC Zip Code 20005-5002

Purpose of Disbursement Subscription

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: **C**

Transaction ID : **VNV49A07TH**

Amount of Each Disbursement this Period: 268.75

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2260.94

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

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Fouracre, Matthew, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 15 / 2019   |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07Q1</b><br>Amount of Each Disbursement this Period<br>364.58 |
| City<br>Washington  | State<br>DC  |  |
| Purpose of Disbursement<br>Salary   | Zip Code<br>20009-5200   | Memo Item <input type="checkbox"/>   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Fouracre, Matthew, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 23 / 2019  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07PM</b><br>Amount of Each Disbursement this Period<br>45.43 |
| City<br>Washington  | State<br>DC  |   |
| Purpose of Disbursement<br>Phone Reimbursement  | Zip Code<br>20009-5200   | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Fouracre, Matthew, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 23 / 2019   |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07PC</b><br>Amount of Each Disbursement this Period<br>110.48 |
| City<br>Washington  | State<br>DC  |  |
| Purpose of Disbursement<br>Travel   | Zip Code<br>20009-5200   | Memo Item <input type="checkbox"/>   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

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

520.49

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

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

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Fouracre, Matthew, , ,</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019  |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07Q2</b><br>Amount of Each Disbursement this Period<br>[ ] 364.58 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200   | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Salary   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |                          | Memo Item <input type="checkbox"/>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Fouracre, Matthew, , ,</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>08 / 15 / 2019  |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07Q3</b><br>Amount of Each Disbursement this Period<br>[ ] 364.58 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200   | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Salary   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |                          | Memo Item <input type="checkbox"/>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                          |  |  |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Fouracre, Matthew, , ,</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>08 / 31 / 2019   |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07P1</b><br>Amount of Each Disbursement this Period<br>[ ] 45.43 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200   | Memo Item <input type="checkbox"/>   |  |
| Purpose of Disbursement<br>Phone Reimbursement  |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>   |  |
| Candidate Name  |  |                          | Memo Item <input type="checkbox"/>   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |  |  |
| State: District:  |  |                          |  |  |

|  |            |
|--|------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [ ] 774.59 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [ ]        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Fouracre, Matthew, , ,</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>08 / 31 / 2019  |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07Q4</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 364.58 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200 | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Salary   |  | Candidate Name         | Category/Type<br>[REDACTED]   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | State: District:  |  |

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Fouracre, Matthew, , ,</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>09 / 15 / 2019  |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07PS</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 364.58 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200 | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Salary   |  | Candidate Name         | Category/Type<br>[REDACTED]   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | State: District:  |  |

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Fouracre, Matthew, , ,</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2019  |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07P1</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 364.58 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200 | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Salary   |  | Candidate Name         | Category/Type<br>[REDACTED]   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | State: District:  |  |

|  |                    |
|--|--------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 1093.74 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Fouracre, Matthew, , ,</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>10 / 15 / 2019  |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                        | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07PV</b><br>Amount of Each Disbursement this Period<br>[ ] 364.58 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200 | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Salary   |  | Candidate Name         | Category/Type<br>[ ]  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | State: District:  |  |

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Fouracre, Matthew, , ,</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>10 / 31 / 2019  |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                        | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07PW</b><br>Amount of Each Disbursement this Period<br>[ ] 364.58 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200 | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Salary   |  | Candidate Name         | Category/Type<br>[ ]  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | State: District:  |  |

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Fouracre, Matthew, , ,</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>11 / 05 / 2019  |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                        | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07PF</b><br>Amount of Each Disbursement this Period<br>[ ] 137.53 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200 | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Travel   |  | Candidate Name         | Category/Type<br>[ ]  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | State: District:  |  |

|  |            |
|--|------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [ ] 866.69 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [ ]        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Fouracre, Matthew, , ,</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>11 / 15 / 2019   |
| Mailing Address 2523 13Th St NW<br>Apt 207   |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07PX</b><br>Amount of Each Disbursement this Period<br>364.58 |
| City<br>Washington   | State<br>DC   |  |
| Zip Code<br>20009-5200   |   | Memo Item <input type="checkbox"/>   |
| Purpose of Disbursement<br>Salary  | Category/Type   |  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Fouracre, Matthew, , ,</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>11 / 30 / 2019   |
| Mailing Address 2523 13Th St NW<br>Apt 207   |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07PY</b><br>Amount of Each Disbursement this Period<br>364.58 |
| City<br>Washington   | State<br>DC   |  |
| Zip Code<br>20009-5200   |   | Memo Item <input type="checkbox"/>   |
| Purpose of Disbursement<br>Salary  | Category/Type   |  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Fouracre, Matthew, , ,</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>12 / 15 / 2019   |
| Mailing Address 2523 13Th St NW<br>Apt 207   |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07P2</b><br>Amount of Each Disbursement this Period<br>364.58 |
| City<br>Washington   | State<br>DC   |  |
| Zip Code<br>20009-5200   |   | Memo Item <input type="checkbox"/>   |
| Purpose of Disbursement<br>Salary  | Category/Type   |  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 1093.74 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                        |  |  |
|---|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Fouracre, Matthew, , ,</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019 |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                        | FEC Identification Number<br><b>C</b>                    |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200 | Transaction ID : <b>VNV49A07PJ</b>                       |  |
| Purpose of Disbursement<br>Phone usage reimbursement  |  |                        | Amount of Each Disbursement this Period<br>22.93         |  |
| Candidate Name  |  |                        | Memo Item <input type="checkbox"/>                       |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        |  |  |
| State: District:  |  |                        |  |  |

|   |  |                        |  |  |
|---|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Fouracre, Matthew, , ,</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019 |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                        | FEC Identification Number<br><b>C</b>                    |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200 | Transaction ID : <b>VNV49A07PK</b>                       |  |
| Purpose of Disbursement<br>Travel   |  |                        | Amount of Each Disbursement this Period<br>23.13         |  |
| Candidate Name  |  |                        | Memo Item <input type="checkbox"/>                       |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        |  |  |
| State: District:  |  |                        |  |  |

|   |  |                        |  |  |
|---|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Fouracre, Matthew, , ,</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019 |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                        | FEC Identification Number<br><b>C</b>                    |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200 | Transaction ID : <b>VNV49A07PF</b>                       |  |
| Purpose of Disbursement<br>Travel   |  |                        | Amount of Each Disbursement this Period<br>107.19        |  |
| Candidate Name  |  |                        | Memo Item <input type="checkbox"/>                       |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        |  |  |
| State: District:  |  |                        |  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 153.25 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |



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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                        |  |  |
|---|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Fouracre, Matthew, , ,</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>12 / 31 / 2019 |  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  |                        | FEC Identification Number<br><b>C</b>                    |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20009-5200 | Transaction ID : <b>VNV49A07Q0</b>                       |  |
| Purpose of Disbursement<br>Salary   |  |                        | Amount of Each Disbursement this Period<br>364.58        |  |
| Candidate Name  |  |                        | Memo Item <input type="checkbox"/>                       |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        |  |  |
| State: District:  |  |                        |  |  |

|   |  |                        |  |  |
|---|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Goldenberg, Kira, , ,</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>07 / 08 / 2019 |  |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  |                        | FEC Identification Number<br><b>C</b>                    |  |
| City<br>New York  | State<br>NY  | Zip Code<br>10031-5336 | Transaction ID : <b>VNV49A07Q5</b>                       |  |
| Purpose of Disbursement<br>Communications consulting  |  |                        | Amount of Each Disbursement this Period<br>500.00        |  |
| Candidate Name  |  |                        | Memo Item <input type="checkbox"/>                       |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        |  |  |
| State: District:  |  |                        |  |  |

|   |  |                        |  |  |
|---|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Goldenberg, Kira, , ,</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>07 / 10 / 2019 |  |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  |                        | FEC Identification Number<br><b>C</b>                    |  |
| City<br>New York  | State<br>NY  | Zip Code<br>10031-5336 | Transaction ID : <b>VNV49A07Q;</b>                       |  |
| Purpose of Disbursement<br>Communications consulting  |  |                        | Amount of Each Disbursement this Period<br>1500.00       |  |
| Candidate Name  |  |                        | Memo Item <input type="checkbox"/>                       |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        |  |  |
| State: District:  |  |                        |  |  |

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

2364.58

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Goldenberg, Kira, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 09 / 2019  |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07Q8</b><br>Amount of Each Disbursement this Period<br>1500.00 |
| City<br>New York  | State<br>NY  |   |
| Zip Code<br>10031-5336  | Purpose of Disbursement<br>Communications consulting   | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Goldenberg, Kira, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 16 / 2019   |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07Q6</b><br>Amount of Each Disbursement this Period<br>750.00 |
| City<br>New York  | State<br>NY  |  |
| Zip Code<br>10031-5336  | Purpose of Disbursement<br>Communications consulting   | Memo Item <input type="checkbox"/>   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Goldenberg, Kira, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 10 / 2019  |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07Q8</b><br>Amount of Each Disbursement this Period<br>1500.00 |
| City<br>New York  | State<br>NY  |   |
| Zip Code<br>10031-5336  | Purpose of Disbursement<br>Communications consulting   | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 3750.00 |
| <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 checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Goldenberg, Kira, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 15 / 2019  |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07QA</b><br>Amount of Each Disbursement this Period<br>1500.00 |
| City<br>New York  | State<br>NY  | Zip Code<br>10031-5336  |
| Purpose of Disbursement<br>Communications consulting  |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Goldenberg, Kira, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019  |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07QB</b><br>Amount of Each Disbursement this Period<br>1500.00 |
| City<br>New York  | State<br>NY  | Zip Code<br>10031-5336  |
| Purpose of Disbursement<br>Communications consulting  |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. IPFS Corporation</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019  |
| Mailing Address 30 Montgomery St  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07V6</b><br>Amount of Each Disbursement this Period<br>64.98 |
| City<br>Jersey City   | State<br>NJ  | Zip Code<br>07302-3829  |
| Purpose of Disbursement<br>Insurance Payment  |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 3064.98 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. IPFS Corporation</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2019  |
| Mailing Address 30 Montgomery St  |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07V7</b><br>Amount of Each Disbursement this Period<br>281.73 |
| City<br>Jersey City   | State<br>NJ  |   |
| Zip Code<br>07302-3829  | Purpose of Disbursement<br>Insurance Payment   | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. IPFS Corporation</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 02 / 2019  |
| Mailing Address 30 Montgomery St  |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07V8</b><br>Amount of Each Disbursement this Period<br>318.86 |
| City<br>Jersey City   | State<br>NJ  |   |
| Zip Code<br>07302-3829  | Purpose of Disbursement<br>Insurance Payment   | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. IPFS Corporation</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 04 / 2019  |
| Mailing Address 30 Montgomery St  |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07V1</b><br>Amount of Each Disbursement this Period<br>319.49 |
| City<br>Jersey City   | State<br>NJ  |   |
| Zip Code<br>07302-3829  | Purpose of Disbursement<br>Insurance Payment   | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 920.08 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                        |  |  |
|---|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. IPFS Corporation</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>12 / 03 / 2019     |  |
| Mailing Address 30 Montgomery St  |  |                        | FEC Identification Number<br>C [REDACTED]                    |  |
| City<br>Jersey City   | State<br>NJ  | Zip Code<br>07302-3829 | Transaction ID : <b>VNV49A07V9</b>                           |  |
| Purpose of Disbursement<br>Insurance Payment  |  | Category/<br>Type      | Amount of Each Disbursement this Period<br>[REDACTED] 318.86 |  |
| Candidate Name  |  |                        | Memo Item <input type="checkbox"/>                           |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        |  |  |
| State: District:  |  |                        |  |  |

|   |  |                        |  |  |
|---|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Kovalick, Ann, , ,</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>10 / 21 / 2019     |  |
| Mailing Address 295 Mercer St   |  |                        | FEC Identification Number<br>C [REDACTED]                    |  |
| City<br>Princeton   | State<br>NJ  | Zip Code<br>08540-4803 | Transaction ID : <b>VNV49A07QC</b>                           |  |
| Purpose of Disbursement<br>Event Compensation   |  | Category/<br>Type      | Amount of Each Disbursement this Period<br>[REDACTED] 226.55 |  |
| Candidate Name  |  |                        | Memo Item <input type="checkbox"/>                           |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        |  |  |
| State: District:  |  |                        |  |  |

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Marcum, LLP</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>07 / 15 / 2019      |  |
| Mailing Address 1899 L St NW  |  |                        | FEC Identification Number<br>C [REDACTED]                     |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20036-3804 | Transaction ID : <b>VNV49A07Vf</b>                            |  |
| Purpose of Disbursement<br>Accounting   |  | Category/<br>Type      | Amount of Each Disbursement this Period<br>[REDACTED] 1080.00 |  |
| Candidate Name  |  |                        | Memo Item <input type="checkbox"/>                            |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        |   |  |
| State: District:  |  |                        |   |  |

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

1625.41

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

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

|   |             |  |   |  |
|---|-------------|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Marcum, LLP</b>  |             |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 19 / 2019      |  |
| Mailing Address 1899 L St NW  |             |  | FEC Identification Number<br>C [REDACTED]                     |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20036-3804   | Transaction ID : VNV49A07VJ                                   |  |
| Purpose of Disbursement<br>Accounting   |             | Candidate Name   | Amount of Each Disbursement this Period<br>[REDACTED] 1080.00 |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |  | Memo Item <input type="checkbox"/>                            |  |
| State:  | District:   | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|   |             |  |   |  |
|---|-------------|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Marcum, LLP</b>  |             |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 15 / 2019      |  |
| Mailing Address 1899 L St NW  |             |  | FEC Identification Number<br>C [REDACTED]                     |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20036-3804   | Transaction ID : VNV49A07VK                                   |  |
| Purpose of Disbursement<br>Accounting   |             | Candidate Name   | Amount of Each Disbursement this Period<br>[REDACTED] 1080.00 |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |  | Memo Item <input type="checkbox"/>                            |  |
| State:  | District:   | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|   |             |  |   |  |
|---|-------------|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Marcum, LLP</b>  |             |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 15 / 2019      |  |
| Mailing Address 1899 L St NW  |             |  | FEC Identification Number<br>C [REDACTED]                     |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20036-3804   | Transaction ID : VNV49A07VI                                   |  |
| Purpose of Disbursement<br>Accounting   |             | Candidate Name   | Amount of Each Disbursement this Period<br>[REDACTED] 1080.00 |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |  | Memo Item <input type="checkbox"/>                            |  |
| State:  | District:   | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |                    |
|--|--------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 3240.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Marcum, LLP</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 15 / 2019  |
| Mailing Address 1899 L St NW  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07VN</b><br>Amount of Each Disbursement this Period<br>1080.00 |
| City<br>Washington  | State<br>DC  |   |
| Zip Code<br>20036-3804  | Purpose of Disbursement<br>Accounting  | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Marcum, LLP</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019  |
| Mailing Address 1899 L St NW  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07VP</b><br>Amount of Each Disbursement this Period<br>1080.00 |
| City<br>Washington  | State<br>DC  |   |
| Zip Code<br>20036-3804  | Purpose of Disbursement<br>Accounting  | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Marcum, LLP</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019  |
| Mailing Address 1899 L St NW  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A07VC</b><br>Amount of Each Disbursement this Period<br>1080.00 |
| City<br>Washington  | State<br>DC  |   |
| Zip Code<br>20036-3804  | Purpose of Disbursement<br>Accounting  | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

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

3240.00

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

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

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. NGP VAN, Inc.</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 01 / 2019  |  |
| Mailing Address 1101 15Th St NW<br>Ste 500                         |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07VX</b><br>Amount of Each Disbursement this Period<br>50.00 |  |
| City<br>Washington   | State<br>DC   | Zip Code<br>20005-5006  | Category/<br>Type  |
| Purpose of Disbursement<br>Subscription                            |   | Candidate Name  |  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State:   | District:   |   |  |

|  |   |  |  |
|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. NGP VAN, Inc.</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>12 / 31 / 2019   |  |
| Mailing Address 1101 15Th St NW<br>Ste 500                         |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07VY</b><br>Amount of Each Disbursement this Period<br>118.75 |  |
| City<br>Washington   | State<br>DC   | Zip Code<br>20005-5006   | Category/<br>Type  |
| Purpose of Disbursement<br>Subscription                            |   | Candidate Name   |  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State:   | District:   |  |  |

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Olive Street Design</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 03 / 2019  |  |
| Mailing Address 264 E Kenilworth Ave                                     |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07W</b><br>Amount of Each Disbursement this Period<br>8.50 |  |
| City<br>Villa Park   | State<br>IL   | Zip Code<br>60181-5502  | Category/<br>Type  |
| Purpose of Disbursement<br>Design Fee                                    |   | Candidate Name  |  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State:   | District:   |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 177.25 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |



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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |                   |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Olive Street Design</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 05 / 2019   |                   |
| Mailing Address 264 E Kenilworth Ave  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07W7</b><br>Amount of Each Disbursement this Period<br>8.50 |                   |
| City<br>Villa Park  | State<br>IL  | Zip Code<br>60181-5502   | Category/<br>Type |
| Purpose of Disbursement<br>Design Fee   |  |  |                   |
| Candidate Name  |  | Memo Item <input type="checkbox"/>   |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |                   |
| State: District:  |  |  |                   |

|   |  |  |                   |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Olive Street Design</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 03 / 2019   |                   |
| Mailing Address 264 E Kenilworth Ave  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07W8</b><br>Amount of Each Disbursement this Period<br>8.50 |                   |
| City<br>Villa Park  | State<br>IL  | Zip Code<br>60181-5502   | Category/<br>Type |
| Purpose of Disbursement<br>Design Fee   |  |  |                   |
| Candidate Name  |  | Memo Item <input type="checkbox"/>   |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |                   |
| State: District:  |  |  |                   |

|   |  |  |                   |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Olive Street Design</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 20 / 2019   |                   |
| Mailing Address 264 E Kenilworth Ave  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07W</b><br>Amount of Each Disbursement this Period<br>21.25 |                   |
| City<br>Villa Park  | State<br>IL  | Zip Code<br>60181-5502   | Category/<br>Type |
| Purpose of Disbursement<br>Design Fee   |  |  |                   |
| Candidate Name  |  | Memo Item <input type="checkbox"/>   |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |                   |
| State: District:  |  |  |                   |

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

38.25

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

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

|   |             |  |  |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Olive Street Design</b>  |             | Date of Disbursement<br>MM / DD / YYYY<br>09 / 20 / 2019   |  |
| Mailing Address 264 E Kenilworth Ave  |             |  |  |
| City<br>Villa Park  | State<br>IL | Zip Code<br>60181-5502   |  |
| Purpose of Disbursement<br>Design Fee   |             | <input type="checkbox"/> Category/Type   |  |
| Candidate Name  |             | FEC Identification Number<br><b>C</b>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State:  | District:   | Transaction ID : <b>VNV49A07Wf</b><br>Amount of Each Disbursement this Period<br>125.00  |  |
|   |             | <input type="checkbox"/> Memo Item   |  |

|   |             |  |  |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Olive Street Design</b>  |             | Date of Disbursement<br>MM / DD / YYYY<br>10 / 03 / 2019   |  |
| Mailing Address 264 E Kenilworth Ave  |             |  |  |
| City<br>Villa Park  | State<br>IL | Zip Code<br>60181-5502   |  |
| Purpose of Disbursement<br>Design Fee   |             | <input type="checkbox"/> Category/Type   |  |
| Candidate Name  |             | FEC Identification Number<br><b>C</b>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State:  | District:   | Transaction ID : <b>VNV49A07W9</b><br>Amount of Each Disbursement this Period<br>8.50  |  |
|   |             | <input type="checkbox"/> Memo Item   |  |

|   |             |  |  |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Olive Street Design</b>  |             | Date of Disbursement<br>MM / DD / YYYY<br>11 / 04 / 2019   |  |
| Mailing Address 264 E Kenilworth Ave  |             |  |  |
| City<br>Villa Park  | State<br>IL | Zip Code<br>60181-5502   |  |
| Purpose of Disbursement<br>Design Fee   |             | <input type="checkbox"/> Category/Type   |  |
| Candidate Name  |             | FEC Identification Number<br><b>C</b>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State:  | District:   | Transaction ID : <b>VNV49A07W.</b><br>Amount of Each Disbursement this Period<br>8.50  |  |
|   |             | <input type="checkbox"/> Memo Item   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 142.00 |
| <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 checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

**A. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07WI

Amount of Each Disbursement this Period: 33.75

Memo Item

**B. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07WE

Amount of Each Disbursement this Period: 50.00

Memo Item

**C. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07W

Amount of Each Disbursement this Period: 8.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 92.25

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

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

|   |  |   |                                       |
|---|--|---|---------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 15 / 2019  |                                       |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07W</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 34.14 |                                       |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396  | Category/<br>Type<br>[REDACTED]       |
| Purpose of Disbursement<br>Payroll Processing Fee   |  | Candidate Name  |                                       |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Memo Item<br><input type="checkbox"/> |
| State: District:  |  |   |                                       |

|   |  |   |                                       |
|---|--|---|---------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 15 / 2019  |                                       |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07X8</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 130.56 |                                       |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396  | Category/<br>Type<br>[REDACTED]       |
| Purpose of Disbursement<br>Payroll Tax  |  | Candidate Name  |                                       |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Memo Item<br><input type="checkbox"/> |
| State: District:  |  |   |                                       |

|   |  |   |                                       |
|---|--|---|---------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 22 / 2019  |                                       |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07W</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 12.08 |                                       |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396  | Category/<br>Type<br>[REDACTED]       |
| Purpose of Disbursement<br>Payroll Processing Fee   |  | Candidate Name  |                                       |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Memo Item<br><input type="checkbox"/> |
| State: District:  |  |   |                                       |

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

[REDACTED] 176.78

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |             |                                    |  |  |
|---|-------------|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>  |             |                                    | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019   |  |
| Mailing Address 911 Panorama Trl S  |             |                                    | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07WI</b>  |  |
| City<br>Rochester   | State<br>NY | Zip Code<br>14625-2396             | Amount of Each Disbursement this Period<br>[REDACTED] 31.49  |  |
| Purpose of Disbursement<br>Payroll Processing Fee   |             | Candidate Name                     | Category/Type<br>[REDACTED]  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |                                    | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State:  | District:   | <input type="checkbox"/> Memo Item |  |  |

|   |             |                                    |  |  |
|---|-------------|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>  |             |                                    | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019   |  |
| Mailing Address 911 Panorama Trl S  |             |                                    | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07X9</b>  |  |
| City<br>Rochester   | State<br>NY | Zip Code<br>14625-2396             | Amount of Each Disbursement this Period<br>[REDACTED] 130.56   |  |
| Purpose of Disbursement<br>Payroll Tax  |             | Candidate Name                     | Category/Type<br>[REDACTED]  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |                                    | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State:  | District:   | <input type="checkbox"/> Memo Item |  |  |

|   |             |                                    |  |  |
|---|-------------|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Paychex</b>  |             |                                    | Date of Disbursement<br>MM / DD / YYYY<br>08 / 15 / 2019   |  |
| Mailing Address 911 Panorama Trl S  |             |                                    | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07W</b>   |  |
| City<br>Rochester   | State<br>NY | Zip Code<br>14625-2396             | Amount of Each Disbursement this Period<br>[REDACTED] 31.49  |  |
| Purpose of Disbursement<br>Payroll Processing Fee   |             | Candidate Name                     | Category/Type<br>[REDACTED]  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |                                    | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State:  | District:   | <input type="checkbox"/> Memo Item |  |  |

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

[REDACTED] 193.54

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 15 / 2019  |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07XA</b><br>Amount of Each Disbursement this Period<br>130.56 |
| City<br>Rochester   | State<br>NY  |   |
| Zip Code<br>14625-2396  | Purpose of Disbursement<br>Payroll Tax   | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 30 / 2019   |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07WF</b><br>Amount of Each Disbursement this Period<br>31.49 |
| City<br>Rochester   | State<br>NY  |  |
| Zip Code<br>14625-2396  | Purpose of Disbursement<br>Payroll Processing Fee  | Memo Item <input type="checkbox"/>   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 31 / 2019  |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07XE</b><br>Amount of Each Disbursement this Period<br>130.56 |
| City<br>Rochester   | State<br>NY  |   |
| Zip Code<br>14625-2396  | Purpose of Disbursement<br>Payroll Tax   | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 292.61 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |                                    |
|---|--|--|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 13 / 2019   |                                    |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07WC</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 31.49 |                                    |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396   | Category/<br>Type<br>[REDACTED]    |
| Purpose of Disbursement<br>Payroll Processing Fee   |  | Candidate Name   |                                    |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State:<br>District:  | <input type="checkbox"/> Memo Item |

|   |  |  |                                    |
|---|--|--|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 15 / 2019   |                                    |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07X0:</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 101.87 |                                    |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396   | Category/<br>Type<br>[REDACTED]    |
| Purpose of Disbursement<br>Payroll Tax  |  | Candidate Name   |                                    |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State:<br>District:  | <input type="checkbox"/> Memo Item |

|   |  |   |                                    |
|---|--|---|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2019  |                                    |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07W</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 31.49 |                                    |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396  | Category/<br>Type<br>[REDACTED]    |
| Purpose of Disbursement<br>Payroll Processing Fee   |  | Candidate Name  |                                    |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State:<br>District:   | <input type="checkbox"/> Memo Item |

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

[REDACTED] 164.85

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07X1

Amount of Each Disbursement this Period: 101.87

Memo Item

**B. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07W2

Amount of Each Disbursement this Period: 34.14

Memo Item

**C. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07X2

Amount of Each Disbursement this Period: 101.87

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 237.88

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

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

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07W

Amount of Each Disbursement this Period: 31.49

Memo Item

**B. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07X3

Amount of Each Disbursement this Period: 101.87

Memo Item

**C. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07W

Amount of Each Disbursement this Period: 31.49

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 164.85

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

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

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07X4

Amount of Each Disbursement this Period: 101.87

Memo Item

**B. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 29 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07WV

Amount of Each Disbursement this Period: 31.49

Memo Item

**C. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07X5

Amount of Each Disbursement this Period: 101.87

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 235.23

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

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

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
12 / 13 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07W

Amount of Each Disbursement this Period: 31.49

Memo Item

**B. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
12 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07X6

Amount of Each Disbursement this Period: 101.87

Memo Item

**C. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
12 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07W

Amount of Each Disbursement this Period: 31.49

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 164.85

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

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

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07X7

Amount of Each Disbursement this Period: 101.87

Memo Item

**B. Piperade**

Full Name (Last, First, Middle Initial)

Mailing Address 1015 Battery St

City San Francisco State CA Zip Code 94111-1220

Purpose of Disbursement Fundraising Event (to a vendor)

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07XE

Amount of Each Disbursement this Period: 125.00

Memo Item

**C. Piperade**

Full Name (Last, First, Middle Initial)

Mailing Address 1015 Battery St

City San Francisco State CA Zip Code 94111-1220

Purpose of Disbursement Fundraising Event (to a vendor)

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07XF

Amount of Each Disbursement this Period: 691.36

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 918.23

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

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

Full Name (Last, First, Middle Initial)

**A. Preferred Insurance Services Inc.**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    | / | 05    | / | 2019      |

Mailing Address 26 Fairfax St SE  
Ste G

City Leesburg State VA Zip Code 20175-3621

Purpose of Disbursement  
Monthly Insurance Premium

FEC Identification Number

**C** [ ]  
**Transaction ID : VNV49A07XC**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

[ ] 342.63

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. Sandberg, Stephanie, , ,**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    | / | 15    | / | 2019      |

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement  
Salary

FEC Identification Number

**C** [ ]  
**Transaction ID : VNV49A07QN**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

[ ] 1312.50

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. Sandberg, Stephanie, , ,**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    | / | 31    | / | 2019      |

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement  
Salary

FEC Identification Number

**C** [ ]  
**Transaction ID : VNV49A07QI**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

[ ] 1312.50

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

Memo Item

State: District:

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

[ ] 2967.63

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

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07QC

Amount of Each Disbursement this Period: 1312.50

Memo Item

**B. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07QR

Amount of Each Disbursement this Period: 1312.50

Memo Item

**C. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07QI

Amount of Each Disbursement this Period: 937.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3562.50

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

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

|   |  |                                 |   |  |
|---|--|---------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Sandberg, Stephanie, , ,</b>   |  |                                 | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2019  |  |
| Mailing Address 32 Vreeland Ct  |  |                                 | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07QE</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 937.50 |  |
| City<br>Princeton   | State<br>NJ  | Zip Code<br>08540-6760          | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Salary   |  | Category/<br>Type<br>[REDACTED] | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |                                 | Memo Item <input type="checkbox"/>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                 | Memo Item <input type="checkbox"/>  |  |
| State: District:  |  |                                 | Memo Item <input type="checkbox"/>  |  |

|   |  |                                 |   |  |
|---|--|---------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Sandberg, Stephanie, , ,</b>   |  |                                 | Date of Disbursement<br>MM / DD / YYYY<br>10 / 15 / 2019  |  |
| Mailing Address 32 Vreeland Ct  |  |                                 | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07QF</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 937.50 |  |
| City<br>Princeton   | State<br>NJ  | Zip Code<br>08540-6760          | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Salary   |  | Category/<br>Type<br>[REDACTED] | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |                                 | Memo Item <input type="checkbox"/>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                 | Memo Item <input type="checkbox"/>  |  |
| State: District:  |  |                                 | Memo Item <input type="checkbox"/>  |  |

|   |  |                                 |   |  |
|---|--|---------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Sandberg, Stephanie, , ,</b>   |  |                                 | Date of Disbursement<br>MM / DD / YYYY<br>10 / 31 / 2019  |  |
| Mailing Address 32 Vreeland Ct  |  |                                 | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07QI</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 937.50 |  |
| City<br>Princeton   | State<br>NJ  | Zip Code<br>08540-6760          | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Salary   |  | Category/<br>Type<br>[REDACTED] | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |                                 | Memo Item <input type="checkbox"/>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                 | Memo Item <input type="checkbox"/>  |  |
| State: District:  |  |                                 | Memo Item <input type="checkbox"/>  |  |

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

[REDACTED] 2812.50

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07QI

Amount of Each Disbursement this Period: 937.50

Memo Item

**B. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07QJ

Amount of Each Disbursement this Period: 937.50

Memo Item

**C. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A07QI

Amount of Each Disbursement this Period: 937.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2812.50

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

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

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Sandberg, Stephanie, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 31 / 2019  |  |
| Mailing Address 32 Vreeland Ct  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07QN</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 937.50 |  |
| City Princeton  | State NJ   | Zip Code 08540-6760   | Category/Type<br>[REDACTED]                                  |
| Purpose of Disbursement<br>Salary   |  | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |   | Amount of Each Disbursement this Period<br>[REDACTED] 937.50 |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  |  |   |  |

|   |  |  |   |
|---|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. The Turner Group LTD</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 23 / 2019   |   |
| Mailing Address PO Box 5373   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07YA</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 1500.00 |   |
| City Virginia Beach   | State VA   | Zip Code 23471-0373  | Category/Type<br>[REDACTED]                                   |
| Purpose of Disbursement<br>Political Consulting   |  | Memo Item <input type="checkbox"/>   |   |
| Candidate Name  |  |  | Amount of Each Disbursement this Period<br>[REDACTED] 1500.00 |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |
| State: District:  |  |  |   |

|   |  |  |   |
|---|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. The Turner Group LTD</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 01 / 2019   |   |
| Mailing Address PO Box 5373   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07YE</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 1500.00 |   |
| City Virginia Beach   | State VA   | Zip Code 23471-0373  | Category/Type<br>[REDACTED]                                   |
| Purpose of Disbursement<br>Political Consulting   |  | Memo Item <input type="checkbox"/>   |   |
| Candidate Name  |  |  | Amount of Each Disbursement this Period<br>[REDACTED] 1500.00 |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |
| State: District:  |  |  |   |

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

[REDACTED] 3937.50

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. The Turner Group LTD</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 09 / 2019  |
| Mailing Address PO Box 5373   |  | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07Y8</b><br>Amount of Each Disbursement this Period<br>[ ] 104.67 |
| City<br>Virginia Beach  | State<br>VA  | Zip Code<br>23471-0373  |
| Purpose of Disbursement<br>Travel Expense   |  | Category/<br>Type<br>[ ]  |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. The Turner Group LTD</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 15 / 2019   |
| Mailing Address PO Box 5373   |  | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07YC</b><br>Amount of Each Disbursement this Period<br>[ ] 1500.00 |
| City<br>Virginia Beach  | State<br>VA  | Zip Code<br>23471-0373   |
| Purpose of Disbursement<br>Political Consulting   |  | Category/<br>Type<br>[ ]   |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  | <input type="checkbox"/> Memo Item   |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. The Turner Group LTD</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 05 / 2019   |
| Mailing Address PO Box 5373   |  | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07YI</b><br>Amount of Each Disbursement this Period<br>[ ] 1500.00 |
| City<br>Virginia Beach  | State<br>VA  | Zip Code<br>23471-0373   |
| Purpose of Disbursement<br>Political Consulting   |  | Category/<br>Type<br>[ ]   |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  | <input type="checkbox"/> Memo Item   |  |

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

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

|             |
|-------------|
| [ ] 3104.67 |
| [ ]         |

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. The Turner Group LTD</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 15 / 2019  |
| Mailing Address PO Box 5373   |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07Y9</b><br>Amount of Each Disbursement this Period<br>685.20 |
| City<br>Virginia Beach  | State<br>VA  |   |
| Zip Code<br>23471-0373  | Purpose of Disbursement<br>Political Consulting  | Memo Item <input type="checkbox"/>  |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. The Turner Group LTD</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019   |
| Mailing Address PO Box 5373   |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07YE</b><br>Amount of Each Disbursement this Period<br>1500.00 |
| City<br>Virginia Beach  | State<br>VA  |  |
| Zip Code<br>23471-0373  | Purpose of Disbursement<br>Political Consulting  | Memo Item <input type="checkbox"/>   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. The Turner Group LTD</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019   |
| Mailing Address PO Box 5373   |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07YF</b><br>Amount of Each Disbursement this Period<br>1500.00 |
| City<br>Virginia Beach  | State<br>VA  |  |
| Zip Code<br>23471-0373  | Purpose of Disbursement<br>Political Consulting  | Memo Item <input type="checkbox"/>   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 3685.20 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. United Airlines</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 05 / 2019  |
| Mailing Address 233 S Wacker Dr<br>Ste 430  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07ZA</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 5.75 |
| City Chicago  | State IL   | Zip Code 60606-6435   |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. United Airlines</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 05 / 2019   |
| Mailing Address 233 S Wacker Dr<br>Ste 430  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07ZF!</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 155.15 |
| City Chicago  | State IL   | Zip Code 60606-6435  |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type<br>[REDACTED]  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  | <input type="checkbox"/> Memo Item   |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. United Airlines</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 12 / 2019  |
| Mailing Address 233 S Wacker Dr<br>Ste 430  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07ZE</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 7.50 |
| City Chicago  | State IL   | Zip Code 60606-6435   |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|  |                   |
|--|-------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 168.40 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. United Airlines</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 19 / 2019  |
| Mailing Address 233 S Wacker Dr<br>Ste 430   |   | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07ZD</b><br>Amount of Each Disbursement this Period<br>104.18 |
| City Chicago   | State IL Zip Code 60606-6435  |   |
| Purpose of Disbursement<br>Travel  |   | Memo Item <input type="checkbox"/>  |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. United Airlines</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 03 / 2019   |
| Mailing Address 233 S Wacker Dr<br>Ste 430   |   | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07ZC</b><br>Amount of Each Disbursement this Period<br>57.65 |
| City Chicago   | State IL Zip Code 60606-6435  |  |
| Purpose of Disbursement<br>Travel  |   | Memo Item <input type="checkbox"/>   |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. United Airlines</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 11 / 2019  |
| Mailing Address 233 S Wacker Dr<br>Ste 430   |   | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A07ZE</b><br>Amount of Each Disbursement this Period<br>137.40 |
| City Chicago   | State IL Zip Code 60606-6435  |   |
| Purpose of Disbursement<br>Travel  |   | Memo Item <input type="checkbox"/>  |
| Candidate Name   |   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |   |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 299.23 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. United Airlines</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 07 / 2019  |
| Mailing Address 233 S Wacker Dr<br>Ste 430  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07ZG</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 161.40 |
| City Chicago  | State IL   | Zip Code 60606-6435   |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Witeck Communications</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 01 / 2019  |
| Mailing Address 2120 L St NW<br>Ste 850   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07ZX</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 162.50 |
| City Washington   | State DC   | Zip Code 20037-1550   |
| Purpose of Disbursement<br>Rent   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Witeck Communications</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 23 / 2019  |
| Mailing Address 2120 L St NW<br>Ste 850   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07ZY</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 162.50 |
| City Washington   | State DC   | Zip Code 20037-1550   |
| Purpose of Disbursement<br>Rent   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|  |                   |
|--|-------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 486.40 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Witeck Communications</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019  |
| Mailing Address 2120 L St NW<br>Ste 850   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07ZT</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 112.50 |
| City<br>Washington  | State<br>DC  | Zip Code<br>20037-1550  |
| Purpose of Disbursement<br>Rent   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Witeck Communications</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019  |
| Mailing Address 2120 L St NW<br>Ste 850   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07ZV</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 112.50 |
| City<br>Washington  | State<br>DC  | Zip Code<br>20037-1550  |
| Purpose of Disbursement<br>Rent   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Witeck Communications</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019  |
| Mailing Address 2120 L St NW<br>Ste 850   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A07ZZ</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 162.50 |
| City<br>Washington  | State<br>DC  | Zip Code<br>20037-1550  |
| Purpose of Disbursement<br>Rent   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|  |                   |
|--|-------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 387.50 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Witeck Communications</b>  |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>08 / 08 / 2019  |  |
| Mailing Address 2120 L St NW<br>Ste 850   |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A07ZW</b><br>Amount of Each Disbursement this Period<br>[ ] 112.50 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20037-1550   | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Rent   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                          |  |  |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Witeck Communications</b>  |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>08 / 23 / 2019   |  |
| Mailing Address 2120 L St NW<br>Ste 850   |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A0800K</b><br>Amount of Each Disbursement this Period<br>[ ] 162.50 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20037-1550   | Memo Item <input type="checkbox"/>   |  |
| Purpose of Disbursement<br>Rent   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>   |  |
| Candidate Name  |  |                          |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |  |  |
| State: District:  |  |                          |  |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Witeck Communications</b>  |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>08 / 31 / 2019  |  |
| Mailing Address 2120 L St NW<br>Ste 850   |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VNV49A0801</b><br>Amount of Each Disbursement this Period<br>[ ] 162.50 |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20037-1550   | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Rent   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |   |  |
| State: District:  |  |                          |   |  |

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

[ ] 437.50

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

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

|   |  |   |                                       |
|---|--|---|---------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Witeck Communications</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2019  |                                       |
| Mailing Address 2120 L St NW<br>Ste 850   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0802</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 162.50 |                                       |
| City<br>Washington  | State<br>DC  | Zip Code<br>20037-1550  | Category/<br>Type<br>[REDACTED]       |
| Purpose of Disbursement<br>Rent   |  | Candidate Name  |                                       |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Memo Item<br><input type="checkbox"/> |
| State: District:  |  |   |                                       |

|   |  |   |                                       |
|---|--|---|---------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Witeck Communications</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 31 / 2019  |                                       |
| Mailing Address 2120 L St NW<br>Ste 850   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0803</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 162.50 |                                       |
| City<br>Washington  | State<br>DC  | Zip Code<br>20037-1550  | Category/<br>Type<br>[REDACTED]       |
| Purpose of Disbursement<br>Rent   |  | Candidate Name  |                                       |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Memo Item<br><input type="checkbox"/> |
| State: District:  |  |   |                                       |

|   |  |   |                                       |
|---|--|---|---------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Witeck Communications</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 26 / 2019  |                                       |
| Mailing Address 2120 L St NW<br>Ste 850   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0804</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 162.50 |                                       |
| City<br>Washington  | State<br>DC  | Zip Code<br>20037-1550  | Category/<br>Type<br>[REDACTED]       |
| Purpose of Disbursement<br>Rent   |  | Candidate Name  |                                       |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Memo Item<br><input type="checkbox"/> |
| State: District:  |  |   |                                       |

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

487.50

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

58229.30

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. ANGIE CRAIG FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 18    |   | 2019      |

City  
Eagan

State  
MN

Zip Code  
55122-0116

FEC Identification Number

Purpose of Disbursement  
Campaign contribution

|                   |
|-------------------|
| <b>011</b>        |
| Category/<br>Type |

**C** C00575209

**Transaction ID : VNV499ZPRS**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Candidate Name

**CRAIG, ANGELA DAWN, , ,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2020

Primary  General  
 Other (specify) ▼

State: MN

District: 02

Memo Item

**B. ANGIE CRAIG FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12    |   | 17    |   | 2019      |

City  
Eagan

State  
MN

Zip Code  
55122-0116

FEC Identification Number

Purpose of Disbursement  
Campaign contribution

|                   |
|-------------------|
| <b>011</b>        |
| Category/<br>Type |

**C** C00575209

**Transaction ID : VNV49A03PY**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Candidate Name

**CRAIG, ANGELA DAWN, , ,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2020

Primary  General  
 Other (specify) ▼

State: MN

District: 02

Memo Item

**C. Gina Ortiz Jones For Congress**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 769186

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 23    |   | 2019      |

City  
San Antonio

State  
TX

Zip Code  
78245-9186

FEC Identification Number

Purpose of Disbursement  
Campaign contribution

|                   |
|-------------------|
| <b>011</b>        |
| Category/<br>Type |

**C** C00652297

**Transaction ID : VNV499ZPRI**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Candidate Name

**Ortiz Jones, Gina, , ,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2020

Primary  General  
 Other (specify) ▼

State: TX

District: 23

Memo Item

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

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

|         |
|---------|
| 7500.00 |
|---------|

|  |
|--|
|  |
|--|

**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"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

**A. Gina Ortiz Jones For Congress**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 769186

City San Antonio State TX Zip Code 78245-9186

Purpose of Disbursement Campaign contribution

Candidate Name **Ortiz Jones, Gina, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: TX District: 23

Date of Disbursement: 08 / 22 / 2019

FEC Identification Number: C00652297

Transaction ID : **VNV49A07J3**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Gina Ortiz Jones For Congress**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 769186

City San Antonio State TX Zip Code 78245-9186

Purpose of Disbursement Campaign Contribution

Candidate Name **Ortiz Jones, Gina, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: TX District: 23

Date of Disbursement: 10 / 04 / 2019

FEC Identification Number: C00652297

Transaction ID : **VNV499ZWWI**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. Gina Ortiz Jones For Congress**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 769186

City San Antonio State TX Zip Code 78245-9186

Purpose of Disbursement Campaign contribution

Candidate Name **Ortiz Jones, Gina, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: TX District: 23

Date of Disbursement: 11 / 15 / 2019

FEC Identification Number: C00652297

Transaction ID : **VNV49A07J4**

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. SHARICE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 13851 W 63Rd St  
NUM 303

City Shawnee State KS Zip Code 66216-3800

Purpose of Disbursement  
Campaign contribution

**011**  
Category/  
Type

Candidate Name  
**DAVIDS, SHARICE, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: KS District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 17 / 2019

FEC Identification Number

**C** C00670034

**Transaction ID : VNV49A03Q1**

Amount of Each Disbursement this Period

2500.00

Memo Item

**B. Tracy Mitrano For Congress**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 752

City Penn Yan State NY Zip Code 14527-0752

Purpose of Disbursement  
Campaign contribution

**011**  
Category/  
Type

Candidate Name  
**Mitrano, Tracy, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify)

State: NY District: 23

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 04 / 2019

FEC Identification Number

**C** C00654525

**Transaction ID : VNV499ZWWI**

Amount of Each Disbursement this Period

2500.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

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

5000.00

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

15000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Amalgamated Bank</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 01 / 2019  |
| Mailing Address 1825 K St NW<br>Frnt 1   |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A081W</b><br>Amount of Each Disbursement this Period<br>11.25<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |   |
| Zip Code<br>20006-1245   | Purpose of Disbursement<br>Bank Fee   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amalgamated Bank</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019   |
| Mailing Address 1825 K St NW<br>Frnt 1   |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A0824!</b><br>Amount of Each Disbursement this Period<br>15.38<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |  |
| Zip Code<br>20006-1245   | Purpose of Disbursement<br>Bank Fee   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Amalgamated Bank</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 01 / 2019  |
| Mailing Address 1825 K St NW<br>Frnt 1   |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A081X</b><br>Amount of Each Disbursement this Period<br>11.25<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |   |
| Zip Code<br>20006-1245   | Purpose of Disbursement<br>Bank Fee   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

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

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

|       |
|-------|
| 37.88 |
|       |

# 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"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|   |             |                        |  |  |
|---|-------------|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amalgamated Bank</b>   |             |                        | Date of Disbursement<br>MM / DD / YYYY<br>08 / 20 / 2019   |  |
| Mailing Address 1825 K St NW<br>Frnt 1  |             |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0822!</b>   |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20006-1245 | Amount of Each Disbursement this Period<br>[REDACTED] 15.00  |  |
| Purpose of Disbursement<br>Bank Fee   |             | Candidate Name         | Non-contribution account<br><input type="checkbox"/> Memo Item   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |                        | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State:  | District:   | Category/Type          |  |  |

|   |             |                        |  |  |
|---|-------------|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amalgamated Bank</b>   |             |                        | Date of Disbursement<br>MM / DD / YYYY<br>09 / 03 / 2019   |  |
| Mailing Address 1825 K St NW<br>Frnt 1  |             |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A081Y!</b>   |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20006-1245 | Amount of Each Disbursement this Period<br>[REDACTED] 11.25  |  |
| Purpose of Disbursement<br>Bank Fee   |             | Candidate Name         | Non-contribution account<br><input type="checkbox"/> Memo Item   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |                        | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State:  | District:   | Category/Type          |  |  |

|   |             |                        |  |  |
|---|-------------|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amalgamated Bank</b>   |             |                        | Date of Disbursement<br>MM / DD / YYYY<br>09 / 16 / 2019   |  |
| Mailing Address 1825 K St NW<br>Frnt 1  |             |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0823</b>  |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20006-1245 | Amount of Each Disbursement this Period<br>[REDACTED] 15.00  |  |
| Purpose of Disbursement<br>Bank Fee   |             | Candidate Name         | Non-contribution account<br><input type="checkbox"/> Memo Item   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |                        | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State:  | District:   | Category/Type          |  |  |

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

41.25

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amalgamated Bank</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 01 / 2019   |
| Mailing Address 1825 K St NW<br>Frnt 1   |   | FEC Identification Number<br><b>C</b><br>Transaction ID : VNV49A081Z<br>Amount of Each Disbursement this Period<br>11.25<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |  |
| Zip Code<br>20006-1245   | Purpose of Disbursement<br>Bank Fee   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Amalgamated Bank</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 29 / 2019  |
| Mailing Address 1825 K St NW<br>Frnt 1   |   | FEC Identification Number<br><b>C</b><br>Transaction ID : VNV49A081K<br>Amount of Each Disbursement this Period<br>3.75<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |   |
| Zip Code<br>20006-1245   | Purpose of Disbursement<br>Bank Fee   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Amalgamated Bank</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 29 / 2019  |
| Mailing Address 1825 K St NW<br>Frnt 1   |   | FEC Identification Number<br><b>C</b><br>Transaction ID : VNV49A081M<br>Amount of Each Disbursement this Period<br>3.75<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |   |
| Zip Code<br>20006-1245   | Purpose of Disbursement<br>Bank Fee   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 18.75 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW  
Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 29 / 2019

FEC Identification Number: C

Transaction ID : VNV49A081S

Amount of Each Disbursement this Period: 5.18

Memo Item

**B. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW  
Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0820:

Amount of Each Disbursement this Period: 11.25

Memo Item

**C. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW  
Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0825

Amount of Each Disbursement this Period: 337.70

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 354.13

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |  |                        |   |  |
|--|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amalgamated Bank</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>11 / 26 / 2019                        |  |
| Mailing Address 1825 K St NW<br>Frnt 1   |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A081N</b> |  |
| City<br>Washington   | State<br>DC  | Zip Code<br>20006-1245 | Amount of Each Disbursement this Period<br>[REDACTED] 3.75                      |  |
| Purpose of Disbursement<br>Bank Fee  |  | Candidate Name         | Non-contribution account  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |                        | Memo Item   |  |
| State: District:   | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        |   |  |

|  |  |                        |   |  |
|--|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amalgamated Bank</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>11 / 26 / 2019                        |  |
| Mailing Address 1825 K St NW<br>Frnt 1   |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A081P</b> |  |
| City<br>Washington   | State<br>DC  | Zip Code<br>20006-1245 | Amount of Each Disbursement this Period<br>[REDACTED] 3.75                      |  |
| Purpose of Disbursement<br>Bank Fee  |  | Candidate Name         | Non-contribution account  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |                        | Memo Item   |  |
| State: District:   | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        |   |  |

|  |  |                        |   |  |
|--|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amalgamated Bank</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>11 / 26 / 2019                        |  |
| Mailing Address 1825 K St NW<br>Frnt 1   |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A081V</b> |  |
| City<br>Washington   | State<br>DC  | Zip Code<br>20006-1245 | Amount of Each Disbursement this Period<br>[REDACTED] 8.03                      |  |
| Purpose of Disbursement<br>Bank Fee  |  | Candidate Name         | Non-contribution account  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |                        | Memo Item   |  |
| State: District:   | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        |   |  |

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

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

|                  |
|------------------|
| [REDACTED] 15.53 |
| [REDACTED]       |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amalgamated Bank</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019   |
| Mailing Address 1825 K St NW<br>Frnt 1   |   | FEC Identification Number<br><b>C</b><br>Transaction ID : VNV49A0821<br>Amount of Each Disbursement this Period<br>11.25<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |  |
| Zip Code<br>20006-1245   | Purpose of Disbursement<br>Bank Fee   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amalgamated Bank</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019   |
| Mailing Address 1825 K St NW<br>Frnt 1   |   | FEC Identification Number<br><b>C</b><br>Transaction ID : VNV49A08261<br>Amount of Each Disbursement this Period<br>374.04<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |  |
| Zip Code<br>20006-1245   | Purpose of Disbursement<br>Bank Fee   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Amalgamated Bank</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>12 / 18 / 2019  |
| Mailing Address 1825 K St NW<br>Frnt 1   |   | FEC Identification Number<br><b>C</b><br>Transaction ID : VNV49A081C<br>Amount of Each Disbursement this Period<br>3.75<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |   |
| Zip Code<br>20006-1245   | Purpose of Disbursement<br>Bank Fee   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 389.04 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW  
Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 18 / 2019

FEC Identification Number: C

Transaction ID : VNV49A081R

Amount of Each Disbursement this Period: 3.75

Memo Item

**B. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW  
Frnt 1

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 18 / 2019

FEC Identification Number: C

Transaction ID : VNV49A081T

Amount of Each Disbursement this Period: 6.60

Memo Item

**C. American Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 4255 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2603

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 08 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0827

Amount of Each Disbursement this Period: 433.19

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 443.54

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Amtrak</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 19 / 2019  |
| Mailing Address 201 I St NE  |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A082G</b><br>Amount of Each Disbursement this Period<br>23.25<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |   |
| Zip Code<br>20002-4449   | Purpose of Disbursement<br>Travel   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Amtrak</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 19 / 2019  |
| Mailing Address 201 I St NE  |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A082S'</b><br>Amount of Each Disbursement this Period<br>186.00<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |   |
| Zip Code<br>20002-4449   | Purpose of Disbursement<br>Travel   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amtrak</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 25 / 2019   |
| Mailing Address 201 I St NE  |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A0828</b><br>Amount of Each Disbursement this Period<br>4.31<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |  |
| Zip Code<br>20002-4449   | Purpose of Disbursement<br>Travel   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 213.56 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV49A082R

Amount of Each Disbursement this Period: 161.25

Memo Item

**B. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 29 / 2019

FEC Identification Number: C

Transaction ID : VNV49A082C

Amount of Each Disbursement this Period: 9.75

Memo Item

**C. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 28 / 2019

FEC Identification Number: C

Transaction ID : VNV49A082C

Amount of Each Disbursement this Period: 141.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 312.00

**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"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amtrak</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2019                        |  |
| Mailing Address 201 I St NE   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A082D</b> |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20002-4449  | Amount of Each Disbursement this Period<br>10.50               |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type   | Non-contribution account<br><input type="checkbox"/> Memo Item |
| Candidate Name  |  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  |  |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amtrak</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2019                        |  |
| Mailing Address 201 I St NE   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A082H</b> |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20002-4449  | Amount of Each Disbursement this Period<br>58.50               |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type   | Non-contribution account<br><input type="checkbox"/> Memo Item |
| Candidate Name  |  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  |  |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amtrak</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 04 / 2019                        |  |
| Mailing Address 201 I St NE   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A082N</b> |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20002-4449  | Amount of Each Disbursement this Period<br>117.00              |
| Purpose of Disbursement<br>Travel   |  | Category/<br>Type   | Non-contribution account<br><input type="checkbox"/> Memo Item |
| Candidate Name  |  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  |  |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 186.00 |
| <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"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

**A. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 13 / 2019

FEC Identification Number: C

Transaction ID : VNV49A082F

Amount of Each Disbursement this Period: 18.00

Memo Item

**B. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 26 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0829

Amount of Each Disbursement this Period: 4.35

Memo Item

**C. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 08 / 2019

FEC Identification Number: C

Transaction ID : VNV49A082E

Amount of Each Disbursement this Period: 6.38

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 28.73

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amtrak</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 08 / 2019   |
| Mailing Address 201 I St NE  |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A082P</b><br>Amount of Each Disbursement this Period<br>127.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |  |
| Zip Code<br>20002-4449   | Purpose of Disbursement<br>Travel   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amtrak</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 09 / 2019   |
| Mailing Address 201 I St NE  |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A082A</b><br>Amount of Each Disbursement this Period<br>4.69<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |  |
| Zip Code<br>20002-4449   | Purpose of Disbursement<br>Travel   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Amtrak</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 09 / 2019  |
| Mailing Address 201 I St NE  |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A082E</b><br>Amount of Each Disbursement this Period<br>10.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |   |
| Zip Code<br>20002-4449   | Purpose of Disbursement<br>Travel   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 142.69 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2019

FEC Identification Number: C

Transaction ID : VNV49A082J

Amount of Each Disbursement this Period: 63.75

Memo Item

**B. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 23 / 2019

FEC Identification Number: C

Transaction ID : VNV49A082M

Amount of Each Disbursement this Period: 81.00

Memo Item

**C. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV49A082K

Amount of Each Disbursement this Period: 73.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 218.25

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Bank Of America**

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

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

State: District:

Date of Disbursement: 07 / 02 / 2019

FEC Identification Number: **C**

Transaction ID : **VNV49A0832**

Amount of Each Disbursement this Period: 33.20

Memo Item

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

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

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

State: District:

Date of Disbursement: 07 / 31 / 2019

FEC Identification Number: **C**

Transaction ID : **VNV49A0830f**

Amount of Each Disbursement this Period: 18.44

Memo Item

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

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee

Candidate Name

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

State: District:

Date of Disbursement: 08 / 31 / 2019

FEC Identification Number: **C**

Transaction ID : **VNV49A082X**

Amount of Each Disbursement this Period: 3.75

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 55.39

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                        |   |  |  |
|---|--|------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Bank Of America</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>08 / 31 / 2019  |  |  |
| Mailing Address 700 13Th St NW  |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A082Z</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 15.74<br><input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |  |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20005-3950 | Category/Type<br>[REDACTED]   |  |  |
| Purpose of Disbursement<br>Bank Fee   |  |                        | Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | State: District:  |  |  |
| Full Name (Last, First, Middle Initial)<br><b>B. Bank Of America</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>08 / 31 / 2019  |  |  |
| Mailing Address 700 13Th St NW  |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0834</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 33.75<br><input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |  |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20005-3950 | Category/Type<br>[REDACTED]   |  |  |
| Purpose of Disbursement<br>Bank Fee   |  |                        | Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | State: District:  |  |  |
| Full Name (Last, First, Middle Initial)<br><b>C. Bank Of America</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>08 / 31 / 2019  |  |  |
| Mailing Address 700 13Th St NW  |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0835</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 51.00<br><input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |  |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20005-3950 | Category/Type<br>[REDACTED]   |  |  |
| Purpose of Disbursement<br>Bank Fee   |  |                        | Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | State: District:  |  |  |
| <b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶  |  |                        | [REDACTED] 100.49   |  |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶   |  |                        | [REDACTED]  |  |  |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                        |   |  |  |
|---|--|------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Bank Of America</b>  |  |                        | Date of Disbursement<br>M M / D D / Y Y Y Y Y Y<br>09 / 30 / 2019   |  |  |
| Mailing Address 700 13Th St NW  |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0831</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 22.08<br><input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |  |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20005-3950 | Category/Type<br>[REDACTED]   |  |  |
| Purpose of Disbursement<br>Bank Fee   |  | Candidate Name         |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | State: District:  |  |  |
| Full Name (Last, First, Middle Initial)<br><b>B. Bank Of America</b>  |  |                        | Date of Disbursement<br>M M / D D / Y Y Y Y Y Y<br>09 / 30 / 2019   |  |  |
| Mailing Address 700 13Th St NW  |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0833</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 33.75<br><input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |  |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20005-3950 | Category/Type<br>[REDACTED]   |  |  |
| Purpose of Disbursement<br>Bank Fee   |  | Candidate Name         |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | State: District:  |  |  |
| Full Name (Last, First, Middle Initial)<br><b>C. Bank Of America</b>  |  |                        | Date of Disbursement<br>M M / D D / Y Y Y Y Y Y<br>11 / 30 / 2019   |  |  |
| Mailing Address 700 13Th St NW  |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0836</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 52.50<br><input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |  |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20005-3950 | Category/Type<br>[REDACTED]   |  |  |
| Purpose of Disbursement<br>Bank Fee   |  | Candidate Name         |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | State: District:  |  |  |
| <b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶  |  |                        | [REDACTED] 108.33   |  |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶   |  |                        | [REDACTED]  |  |  |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Bank Of America**

Date of Disbursement  
MM / DD / YYYY  
12 / 31 / 2019

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fee  
Candidate Name  
Category/Type

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

FEC Identification Number  
**C**  
Transaction ID : VNV49A082Y  
Amount of Each Disbursement this Period  
11.25  
Non-contribution account  
 Memo Item

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

Date of Disbursement  
MM / DD / YYYY  
07 / 31 / 2019

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee  
Candidate Name  
Category/Type

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

FEC Identification Number  
**C**  
Transaction ID : VNV49A083C  
Amount of Each Disbursement this Period  
217.50  
Non-contribution account  
 Memo Item

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

Date of Disbursement  
MM / DD / YYYY  
08 / 02 / 2019

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee  
Candidate Name  
Category/Type

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

FEC Identification Number  
**C**  
Transaction ID : VNV49A083C  
Amount of Each Disbursement this Period  
641.82  
Non-contribution account  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 870.57

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0837

Amount of Each Disbursement this Period: 138.75

Memo Item

**B. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0838!

Amount of Each Disbursement this Period: 153.75

Memo Item

**C. BankCard**

Full Name (Last, First, Middle Initial)

Mailing Address 28721 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301

Purpose of Disbursement Contribution Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C

Transaction ID : VNV49A083E

Amount of Each Disbursement this Period: 501.12

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 793.62

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. BankCard</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 02 / 2019                        |
| Mailing Address 28721 Roadside Dr Ste 299   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0839</b> |
| City Agoura Hills   | State CA   | Zip Code 91301  |
| Purpose of Disbursement<br>Contribution Processing Fee  |  | Amount of Each Disbursement this Period<br>[REDACTED] 162.32                    |
| Candidate Name  |  | Category/Type   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item<br>Non-contribution account   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BankCard</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 31 / 2019                        |
| Mailing Address 28721 Roadside Dr Ste 299   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A083A</b> |
| City Agoura Hills   | State CA   | Zip Code 91301  |
| Purpose of Disbursement<br>Contribution Processing Fee  |  | Amount of Each Disbursement this Period<br>[REDACTED] 341.27                    |
| Candidate Name  |  | Category/Type   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item<br>Non-contribution account   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Blue Bears</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 22 / 2019                        |
| Mailing Address 301 N Harrison St   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A083J</b> |
| City Princeton  | State NJ   | Zip Code 08540-3527   |
| Purpose of Disbursement<br>Fundraising event payment to vendor  |  | Amount of Each Disbursement this Period<br>[REDACTED] 202.50                    |
| Candidate Name  |  | Category/Type   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item<br>Non-contribution account   |   |

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

[REDACTED] 706.09

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Care Creative**

Full Name (Last, First, Middle Initial)

Mailing Address 172 Pacific Avenue,

City Toronto ON M6P 2P5 Canada State ZZ Zip Code 00000

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 08 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0840!

Amount of Each Disbursement this Period: 812.50

Memo Item

**B. Care Creative**

Full Name (Last, First, Middle Initial)

Mailing Address 172 Pacific Avenue,

City Toronto ON M6P 2P5 Canada State ZZ Zip Code 00000

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 11 / 2019

FEC Identification Number: C

Transaction ID : VNV49A083V!

Amount of Each Disbursement this Period: 58.50

Memo Item

**C. Care Creative**

Full Name (Last, First, Middle Initial)

Mailing Address 172 Pacific Avenue,

City Toronto ON M6P 2P5 Canada State ZZ Zip Code 00000

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 06 / 2019

FEC Identification Number: C

Transaction ID : VNV49A083Z

Amount of Each Disbursement this Period: 810.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1681.00

**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"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Care Creative</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 02 / 2019  |
| Mailing Address 172 Pacific Avenue,                                |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A083X</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 412.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Toronto ON M6P 2P5 Canada                                  | State<br>ZZ   | Zip Code<br>00000   |
| Purpose of Disbursement<br>Design Fee                              | Category/<br>Type<br>[REDACTED]   |   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Care Creative</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>10 / 31 / 2019   |
| Mailing Address 172 Pacific Avenue,                                |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A083Y:</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 510.00<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Toronto ON M6P 2P5 Canada                                  | State<br>ZZ   | Zip Code<br>00000  |
| Purpose of Disbursement<br>Design Fee                              | Category/<br>Type<br>[REDACTED]   |  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Care Creative</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019  |
| Mailing Address 172 Pacific Avenue,                                |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A083V</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 170.00<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Toronto ON M6P 2P5 Canada                                  | State<br>ZZ   | Zip Code<br>00000   |
| Purpose of Disbursement<br>Design Fee                              | Category/<br>Type<br>[REDACTED]   |   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   |   |   |

|  |                    |
|--|--------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 1092.50 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. CNA**

Mailing Address 1 Meridian Blvd  
Ste 3A01

City  
Wyomissing

State  
PA

Zip Code  
19610-3235

Purpose of Disbursement  
Insurance

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VNV49A0846!**  
Amount of Each Disbursement this Period

Non-contribution account  
 Memo Item

Full Name (Last, First, Middle Initial)

**B. CNA**

Mailing Address 1 Meridian Blvd  
Ste 3A01

City  
Wyomissing

State  
PA

Zip Code  
19610-3235

Purpose of Disbursement  
Insurance

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VNV49A0842!**  
Amount of Each Disbursement this Period

Non-contribution account  
 Memo Item

Full Name (Last, First, Middle Initial)

**C. CNA**

Mailing Address 1 Meridian Blvd  
Ste 3A01

City  
Wyomissing

State  
PA

Zip Code  
19610-3235

Purpose of Disbursement  
Insurance

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VNV49A0843**  
Amount of Each Disbursement this Period

Non-contribution account  
 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"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. CNA</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 01 / 2019  |
| Mailing Address 1 Meridian Blvd<br>Ste 3A01   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0844</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 202.22<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Wyomissing  | State<br>PA  | Zip Code<br>19610-3235  |
| Purpose of Disbursement<br>Insurance  |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. CNA</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 03 / 2019  |
| Mailing Address 1 Meridian Blvd<br>Ste 3A01   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0845</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 202.22<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Wyomissing  | State<br>PA  | Zip Code<br>19610-3235  |
| Purpose of Disbursement<br>Insurance  |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DC Health Link</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 23 / 2019   |
| Mailing Address PO Box 97022  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0848</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 2538.29<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  | Zip Code<br>20090-7022   |
| Purpose of Disbursement<br>Insurance Payment  |  | Category/<br>Type<br>[REDACTED]  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

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

2942.73

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. DC Health Link**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance Payment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0849

Amount of Each Disbursement this Period: 2538.29

Memo Item

**B. DC Health Link**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance Payment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2019

FEC Identification Number: C

Transaction ID : VNV49A084A

Amount of Each Disbursement this Period: 2538.29

Memo Item

**C. DC Health Link**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 97022

City Washington State DC Zip Code 20090-7022

Purpose of Disbursement Insurance Payment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A084E

Amount of Each Disbursement this Period: 2538.29

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7614.87

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. DC Health Link</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019  |
| Mailing Address PO Box 97022  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A084C</b><br>Amount of Each Disbursement this Period<br>5826.57 |
| City<br>Washington  | State<br>DC  | Zip Code<br>20090-7022  |
| Purpose of Disbursement<br>Insurance Payment  |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Della Volle For Assembly Inc.</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 03 / 2019  |
| Mailing Address PO Box 4195   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV499ZR9E</b><br>Amount of Each Disbursement this Period<br>1000.00 |
| City<br>Brick   | State<br>NJ  | Zip Code<br>08723-1395  |
| Purpose of Disbursement<br>Contribution   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2019<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Dr. Eliz Markowitz For TX House District 28</b>                          |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 30 / 2019  |
| Mailing Address 24111 Haywards Crossing Ln  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A08VI</b><br>Amount of Each Disbursement this Period<br>1000.00 |
| City<br>Katy  | State<br>TX  | Zip Code<br>77494-5730  |
| Purpose of Disbursement<br>Candidate Contribution   |  | Category/<br>Type<br>011  |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2019<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|  |            |
|--|------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 7826.57    |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED] |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. DREAMSTIME.COM</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 02 / 2019 |  |
| Mailing Address 1616 Westgate Cir   |  |  |  |
| City<br>Brentwood   | State<br>TN  | Zip Code<br>37027-8019                                   |  |
| Purpose of Disbursement<br>Online Image   |  | <input type="checkbox"/> Category/Type                   |  |
| Candidate Name  |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: _____  | District: _____  |  |  |
| FEC Identification Number<br><b>C</b> _____   |  | Transaction ID : <b>VNV49A084E</b>                       |  |
| Amount of Each Disbursement this Period<br>_____  |  | 25.00  |  |
| <input type="checkbox"/> Memo Item  |  | <input type="checkbox"/> Non-contribution account        |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DREAMSTIME.COM</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 03 / 2019 |  |
| Mailing Address 1616 Westgate Cir   |  |  |  |
| City<br>Brentwood   | State<br>TN  | Zip Code<br>37027-8019                                   |  |
| Purpose of Disbursement<br>Online Image   |  | <input type="checkbox"/> Category/Type                   |  |
| Candidate Name  |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: _____  | District: _____  |  |  |
| FEC Identification Number<br><b>C</b> _____   |  | Transaction ID : <b>VNV49A084N</b>                       |  |
| Amount of Each Disbursement this Period<br>_____  |  | 31.98  |  |
| <input type="checkbox"/> Memo Item  |  | <input type="checkbox"/> Non-contribution account        |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DREAMSTIME.COM</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 01 / 2019 |  |
| Mailing Address 1616 Westgate Cir   |  |  |  |
| City<br>Brentwood   | State<br>TN  | Zip Code<br>37027-8019                                   |  |
| Purpose of Disbursement<br>Online Image   |  | <input type="checkbox"/> Category/Type                   |  |
| Candidate Name  |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: _____  | District: _____  |  |  |
| FEC Identification Number<br><b>C</b> _____   |  | Transaction ID : <b>VNV49A084F</b>                       |  |
| Amount of Each Disbursement this Period<br>_____  |  | 25.00  |  |
| <input type="checkbox"/> Memo Item  |  | <input type="checkbox"/> Non-contribution account        |  |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 81.98 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |                   |
|---|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. DREAMSTIME.COM</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 03 / 2019  |                   |
| Mailing Address 1616 Westgate Cir   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A084G</b><br>Amount of Each Disbursement this Period<br>25.00 |                   |
| City<br>Brentwood   | State<br>TN  | Zip Code<br>37027-8019  | Category/<br>Type |
| Purpose of Disbursement<br>Online Image   |  |   |                   |
| Candidate Name  |  | Memo Item <input type="checkbox"/>  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:  |  |   |                   |

|   |  |   |                   |
|---|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. DREAMSTIME.COM</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2019  |                   |
| Mailing Address 1616 Westgate Cir   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A084H</b><br>Amount of Each Disbursement this Period<br>25.00 |                   |
| City<br>Brentwood   | State<br>TN  | Zip Code<br>37027-8019  | Category/<br>Type |
| Purpose of Disbursement<br>Online Image   |  |   |                   |
| Candidate Name  |  | Memo Item <input type="checkbox"/>  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:  |  |   |                   |

|   |  |   |                   |
|---|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. DREAMSTIME.COM</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 30 / 2019  |                   |
| Mailing Address 1616 Westgate Cir   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A084J</b><br>Amount of Each Disbursement this Period<br>25.00 |                   |
| City<br>Brentwood   | State<br>TN  | Zip Code<br>37027-8019  | Category/<br>Type |
| Purpose of Disbursement<br>Online Image   |  |   |                   |
| Candidate Name  |  | Memo Item <input type="checkbox"/>  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:  |  |   |                   |

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

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

|            |
|------------|
| 75.00      |
| [REDACTED] |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |                   |
|---|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. DREAMSTIME.COM</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 29 / 2019  |                   |
| Mailing Address 1616 Westgate Cir   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A084K</b><br>Amount of Each Disbursement this Period<br>25.00<br>Non-contribution account<br><input type="checkbox"/> Memo Item |                   |
| City<br>Brentwood   | State<br>TN  | Zip Code<br>37027-8019  | Category/<br>Type |
| Purpose of Disbursement<br>Online Image   |  |   |                   |
| Candidate Name  |  |   |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:  |  |   |                   |

|   |  |   |                   |
|---|--|---|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. DREAMSTIME.COM</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 30 / 2019  |                   |
| Mailing Address 1616 Westgate Cir   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A084M</b><br>Amount of Each Disbursement this Period<br>25.00<br>Non-contribution account<br><input type="checkbox"/> Memo Item |                   |
| City<br>Brentwood   | State<br>TN  | Zip Code<br>37027-8019  | Category/<br>Type |
| Purpose of Disbursement<br>Online Image   |  |   |                   |
| Candidate Name  |  |   |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |                   |
| State: District:  |  |   |                   |

|   |  |  |                   |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. EB Lesbians Who Tech</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 28 / 2019   |                   |
| Mailing Address 429 Castro St   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A084F</b><br>Amount of Each Disbursement this Period<br>515.42<br>Non-contribution account<br><input type="checkbox"/> Memo Item |                   |
| City<br>San Francisco   | State<br>CA  | Zip Code<br>94114-2019   | Category/<br>Type |
| Purpose of Disbursement<br>Event Ticket   |  |  |                   |
| Candidate Name  |  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |                   |
| State: District:  |  |  |                   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 565.42 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |



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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. EveryAction</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 01 / 2019  |
| Mailing Address 1101 15Th St NW   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A084R</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 150.00<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  | Zip Code<br>20005-5002  |
| Purpose of Disbursement<br>Subscription   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. EveryAction</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 03 / 2019  |
| Mailing Address 1101 15Th St NW   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A084S</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 806.25<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  | Zip Code<br>20005-5002  |
| Purpose of Disbursement<br>Subscription   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Fedex Office</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 10 / 2019   |
| Mailing Address 902 Ross Ave  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A084V</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 56.12<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Dallas  | State<br>TX  | Zip Code<br>75202-1918   |
| Purpose of Disbursement<br>Shipping   |  | Category/<br>Type<br>[REDACTED]  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

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

[REDACTED] 1012.37

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Fouracre, Matthew, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 15 / 2019  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A080T</b><br>Amount of Each Disbursement this Period<br>1093.75<br>Non-contribution account<br><input type="checkbox"/> Memo Item             |
| City<br>Washington  | State<br>DC  |   |
| Purpose of Disbursement<br>Salary   | Zip Code<br>20009-5200   | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A080D</b><br>Amount of Each Disbursement this Period<br>136.28<br>Non-contribution account<br><input type="checkbox"/> Memo Item              |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A09PC</b><br>Amount of Each Disbursement this Period<br>136.28<br>* Non-contribution account<br><input checked="" type="checkbox"/> Memo Item |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Fouracre, Matthew, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 23 / 2019  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A080D</b><br>Amount of Each Disbursement this Period<br>136.28<br>Non-contribution account<br><input type="checkbox"/> Memo Item              |
| City<br>Washington  | State<br>DC  |   |
| Purpose of Disbursement<br>Phone Reimbursement  | Zip Code<br>20009-5200   | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A09PC</b><br>Amount of Each Disbursement this Period<br>136.28<br>* Non-contribution account<br><input checked="" type="checkbox"/> Memo Item |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A09PC</b><br>Amount of Each Disbursement this Period<br>136.28<br>* Non-contribution account<br><input checked="" type="checkbox"/> Memo Item |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Verizon</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 23 / 2019  |
| Mailing Address PO Box 489  |  | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A09PC</b><br>Amount of Each Disbursement this Period<br>136.28<br>* Non-contribution account<br><input checked="" type="checkbox"/> Memo Item |
| City<br>Newark  | State<br>NJ  |   |
| Purpose of Disbursement<br>Reimbursement  | Zip Code<br>07101-0489   | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A09PC</b><br>Amount of Each Disbursement this Period<br>136.28<br>* Non-contribution account<br><input checked="" type="checkbox"/> Memo Item |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A09PC</b><br>Amount of Each Disbursement this Period<br>136.28<br>* Non-contribution account<br><input checked="" type="checkbox"/> Memo Item |
| State: District:  |  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 1230.03 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Fouracre, Matthew, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 07 / 23 / 2019

Mailing Address: 2523 13Th St NW Apt 207

City: Washington State: DC Zip Code: 20009-5200

Purpose of Disbursement: Travel

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: **C**

Transaction ID : **VNV49A080G**

Amount of Each Disbursement this Period: 331.44

Memo Item

**B. Fouracre, Matthew, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 07 / 31 / 2019

Mailing Address: 2523 13Th St NW Apt 207

City: Washington State: DC Zip Code: 20009-5200

Purpose of Disbursement: Salary

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: **C**

Transaction ID : **VNV49A080V**

Amount of Each Disbursement this Period: 1093.75

Memo Item

**C. Fouracre, Matthew, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 08 / 15 / 2019

Mailing Address: 2523 13Th St NW Apt 207

City: Washington State: DC Zip Code: 20009-5200

Purpose of Disbursement: Salary

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: **C**

Transaction ID : **VNV49A080V**

Amount of Each Disbursement this Period: 1093.75

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2518.94

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Fouracre, Matthew, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2523 13Th St NW  
Apt 207

City Washington State DC Zip Code 20009-5200

Purpose of Disbursement Phone Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A080E

Amount of Each Disbursement this Period: 136.28

Memo Item

**B. Verizon**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 489

City Newark State NJ Zip Code 07101-0489

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A09PD

Amount of Each Disbursement this Period: 136.28

Memo Item

**C. Fouracre, Matthew, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2523 13Th St NW  
Apt 207

City Washington State DC Zip Code 20009-5200

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A080X

Amount of Each Disbursement this Period: 1093.75

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1230.03

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Fouracre, Matthew, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 15 / 2019  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A080J</b><br>Amount of Each Disbursement this Period<br>1093.75<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  |   |
| Purpose of Disbursement<br>Salary   | Zip Code<br>20009-5200   | Category/<br>Type   |
| Candidate Name  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District:   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Fouracre, Matthew, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2019  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A080K</b><br>Amount of Each Disbursement this Period<br>1093.75<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  |   |
| Purpose of Disbursement<br>Salary   | Zip Code<br>20009-5200   | Category/<br>Type   |
| Candidate Name  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District:   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Fouracre, Matthew, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 15 / 2019  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A080N</b><br>Amount of Each Disbursement this Period<br>1093.75<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  |   |
| Purpose of Disbursement<br>Salary   | Zip Code<br>20009-5200   | Category/<br>Type   |
| Candidate Name  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District:   |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 3281.25 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |  |                        |  |  |
|--|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Fouracre, Matthew, , ,</b>                                      |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>10 / 31 / 2019 |  |
| Mailing Address 2523 13Th St NW<br>Apt 207   |  |                        | FEC Identification Number<br><b>C</b>                    |  |
| City<br>Washington   | State<br>DC  | Zip Code<br>20009-5200 | Transaction ID : <b>VNV49A080N</b>                       |  |
| Purpose of Disbursement<br>Salary  |  | Candidate Name         | Amount of Each Disbursement this Period<br>1093.75       |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |                        | Non-contribution account                                 |  |
| State: District:   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |                        | Memo Item <input type="checkbox"/>                       |  |

|  |  |                        |  |  |
|--|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Fouracre, Matthew, , ,</b>                                      |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>11 / 05 / 2019 |  |
| Mailing Address 2523 13Th St NW<br>Apt 207   |  |                        | FEC Identification Number<br><b>C</b>                    |  |
| City<br>Washington   | State<br>DC  | Zip Code<br>20009-5200 | Transaction ID : <b>VNV49A080H</b>                       |  |
| Purpose of Disbursement<br>Travel  |  | Candidate Name         | Amount of Each Disbursement this Period<br>412.58        |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |                        | Non-contribution account                                 |  |
| State: District:   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |                        | Memo Item <input type="checkbox"/>                       |  |

|  |  |                        |  |  |
|--|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Fouracre, Matthew, , ,</b>                                      |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>11 / 15 / 2019 |  |
| Mailing Address 2523 13Th St NW<br>Apt 207   |  |                        | FEC Identification Number<br><b>C</b>                    |  |
| City<br>Washington   | State<br>DC  | Zip Code<br>20009-5200 | Transaction ID : <b>VNV49A080F</b>                       |  |
| Purpose of Disbursement<br>Salary  |  | Candidate Name         | Amount of Each Disbursement this Period<br>1093.75       |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |                        | Non-contribution account                                 |  |
| State: District:   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |                        | Memo Item <input type="checkbox"/>                       |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 2600.08 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Fouracre, Matthew, , ,</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>11 / 30 / 2019  |
| Mailing Address 2523 13Th St NW<br>Apt 207   |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A080Q</b><br>Amount of Each Disbursement this Period<br>1093.75<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |   |
| Zip Code<br>20009-5200   | Purpose of Disbursement<br>Salary   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Fouracre, Matthew, , ,</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>12 / 15 / 2019  |
| Mailing Address 2523 13Th St NW<br>Apt 207   |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A080R</b><br>Amount of Each Disbursement this Period<br>1093.75<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |   |
| Zip Code<br>20009-5200   | Purpose of Disbursement<br>Salary   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Fouracre, Matthew, , ,</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019  |
| Mailing Address 2523 13Th St NW<br>Apt 207   |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A080E</b><br>Amount of Each Disbursement this Period<br>68.79<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC   |   |
| Zip Code<br>20009-5200   | Purpose of Disbursement<br>Phone usage reimbursement  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 2256.29 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Verizon**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 489

City Newark State NJ Zip Code 07101-0489

Purpose of Disbursement Phone bill

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 19 / 2019

FEC Identification Number: C

Transaction ID : VNV49A091D

Amount of Each Disbursement this Period: 68.79

Memo Item

**B. Fouracre, Matthew, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2523 13Th St NW Apt 207

City Washington State DC Zip Code 20009-5200

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 19 / 2019

FEC Identification Number: C

Transaction ID : VNV49A080C

Amount of Each Disbursement this Period: 69.40

Non-contribution account

Memo Item

**C. Verizon**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 489

City Newark State NJ Zip Code 07101-0489

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 19 / 2019

FEC Identification Number: C

Transaction ID : VNV49A09P7

Amount of Each Disbursement this Period: 69.40

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 69.40

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Fouracre, Matthew, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019   |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A080F</b><br>Amount of Each Disbursement this Period<br>321.56<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  |  |
| Purpose of Disbursement<br>Travel Reimbursement   | Zip Code<br>20009-5200   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A080F</b><br>Amount of Each Disbursement this Period<br>321.56<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amtrak</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019   |
| Mailing Address 201 I St NE   |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A0AG2</b><br>Amount of Each Disbursement this Period<br>321.56<br>*<br><input checked="" type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  |  |
| Purpose of Disbursement<br>Travel   | Zip Code<br>20002-4449   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A0AG2</b><br>Amount of Each Disbursement this Period<br>321.56<br>*<br><input checked="" type="checkbox"/> Memo Item |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Fouracre, Matthew, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 31 / 2019  |
| Mailing Address 2523 13Th St NW<br>Apt 207  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A080S</b><br>Amount of Each Disbursement this Period<br>1093.75<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  |   |
| Purpose of Disbursement<br>Salary   | Zip Code<br>20009-5200   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A080S</b><br>Amount of Each Disbursement this Period<br>1093.75<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

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

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

|         |
|---------|
| 1415.31 |
|         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Friends Of Danica Roem</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 04 / 2019                       |
| Mailing Address PO Box 726  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV499ZWW</b> |
| City<br>Manassas  | State<br>VA  | Zip Code<br>20113-0726   |
| Purpose of Disbursement<br>Campaign contribution  |  | Category/Type<br>011   |
| Candidate Name  |  | Amount of Each Disbursement this Period<br>[REDACTED] 1000.00                  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2019<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State:  | District:  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Goldenberg, Kira, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 08 / 2019                                 |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A080Y</b>          |
| City<br>New York  | State<br>NY  | Zip Code<br>10031-5336   |
| Purpose of Disbursement<br>Communications consulting  |  | Category/Type<br>[REDACTED]  |
| Candidate Name  |  | Amount of Each Disbursement this Period<br>[REDACTED] 500.00<br>Non-contribution account |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <input type="checkbox"/> Memo Item   |
| State:  | District:  |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Goldenberg, Kira, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 10 / 2019                                  |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0810</b>           |
| City<br>New York  | State<br>NY  | Zip Code<br>10031-5336  |
| Purpose of Disbursement<br>Communications consulting  |  | Category/Type<br>[REDACTED]   |
| Candidate Name  |  | Amount of Each Disbursement this Period<br>[REDACTED] 1500.00<br>Non-contribution account |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item  |
| State:  | District:  |   |

|  |                    |
|--|--------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 3000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Goldenberg, Kira, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 09 / 2019                                |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  | FEC Identification Number<br><b>C</b>   |
| City<br>New York  | State<br>NY  | Zip Code<br>10031-5336  |
| Purpose of Disbursement<br>Communications consulting  |  | Transaction ID : <b>VNV49A0811</b>  |
| Candidate Name  |  | Amount of Each Disbursement this Period<br>1500.00                                      |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Goldenberg, Kira, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 16 / 2019                                |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  | FEC Identification Number<br><b>C</b>   |
| City<br>New York  | State<br>NY  | Zip Code<br>10031-5336  |
| Purpose of Disbursement<br>Communications consulting  |  | Transaction ID : <b>VNV49A080Z!</b>   |
| Candidate Name  |  | Amount of Each Disbursement this Period<br>750.00                                       |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Goldenberg, Kira, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 10 / 2019                                |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  | FEC Identification Number<br><b>C</b>   |
| City<br>New York  | State<br>NY  | Zip Code<br>10031-5336  |
| Purpose of Disbursement<br>Communications consulting  |  | Transaction ID : <b>VNV49A0812</b>  |
| Candidate Name  |  | Amount of Each Disbursement this Period<br>1500.00                                      |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |
| State: District:  |  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 3750.00 |
| <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"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Goldenberg, Kira, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 15 / 2019  |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A0813</b><br>Amount of Each Disbursement this Period<br>1500.00<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>New York  | State<br>NY  |   |
| Zip Code<br>10031-5336  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A0814</b><br>Amount of Each Disbursement this Period<br>1500.00<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| Purpose of Disbursement<br>Communications consulting  |  |   |
| Candidate Name  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A084X</b><br>Amount of Each Disbursement this Period<br>52.47<br>Non-contribution account<br><input type="checkbox"/> Memo Item   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Goldenberg, Kira, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019  |
| Mailing Address 345 W 145Th St<br>Apt 3A6   |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A0814</b><br>Amount of Each Disbursement this Period<br>1500.00<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>New York  | State<br>NY  |   |
| Zip Code<br>10031-5336  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A084X</b><br>Amount of Each Disbursement this Period<br>52.47<br>Non-contribution account<br><input type="checkbox"/> Memo Item   |
| Purpose of Disbursement<br>Communications consulting  |  |   |
| Candidate Name  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A084X</b><br>Amount of Each Disbursement this Period<br>52.47<br>Non-contribution account<br><input type="checkbox"/> Memo Item   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Google Services</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 03 / 2019  |
| Mailing Address 1600 Amphitheatre Pkwy  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A084X</b><br>Amount of Each Disbursement this Period<br>52.47<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Mountain View   | State<br>CA  |   |
| Zip Code<br>94043-1351  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A084X</b><br>Amount of Each Disbursement this Period<br>52.47<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| Purpose of Disbursement<br>Subscription   |  |   |
| Candidate Name  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A084X</b><br>Amount of Each Disbursement this Period<br>52.47<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 3052.47 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Google Services**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Subscription

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 02 / 2019

FEC Identification Number: **C**

Transaction ID : **VNV49A084Y**

Amount of Each Disbursement this Period: 52.47

Memo Item

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

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Subscription

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 03 / 2019

FEC Identification Number: **C**

Transaction ID : **VNV49A084Z**

Amount of Each Disbursement this Period: 52.47

Memo Item

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

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Subscription

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 02 / 2019

FEC Identification Number: **C**

Transaction ID : **VNV49A0850**

Amount of Each Disbursement this Period: 52.47

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 157.41

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Google Services</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 04 / 2019   |
| Mailing Address 1600 Amphitheatre Pkwy  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0851</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 52.47<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Mountain View   | State<br>CA  | Zip Code<br>94043-1351   |
| Purpose of Disbursement<br>Subscription   |  | Category/<br>Type<br>[REDACTED]  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Google Services</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019   |
| Mailing Address 1600 Amphitheatre Pkwy  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0852</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 52.47<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Mountain View   | State<br>CA  | Zip Code<br>94043-1351   |
| Purpose of Disbursement<br>Subscription   |  | Category/<br>Type<br>[REDACTED]  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Grasshopper.Com</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 05 / 2019   |
| Mailing Address 197 1St Ave<br>Ste 200  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0854</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 25.26<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Needham   | State<br>MA  | Zip Code<br>02494-2873   |
| Purpose of Disbursement<br>Answering Service  |  | Category/<br>Type<br>[REDACTED]  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|  |                   |
|--|-------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 130.20 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Grasshopper.Com</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>08 / 05 / 2019                                |  |
| Mailing Address 197 1St Ave<br>Ste 200  |  |                        |   |  |
| City<br>Needham   | State<br>MA  | Zip Code<br>02494-2873 |   |  |
| Purpose of Disbursement<br>Answering Service  |  | Category/<br>Type      | FEC Identification Number<br><b>C</b>   |  |
| Candidate Name  |  |                        | Transaction ID : <b>VNV49A0855!</b>   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | Amount of Each Disbursement this Period<br>25.26  |  |
| State: District:  |  |                        | <input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |  |

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Grasshopper.Com</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>09 / 04 / 2019                                |  |
| Mailing Address 197 1St Ave<br>Ste 200  |  |                        |   |  |
| City<br>Needham   | State<br>MA  | Zip Code<br>02494-2873 |   |  |
| Purpose of Disbursement<br>Answering Service  |  | Category/<br>Type      | FEC Identification Number<br><b>C</b>   |  |
| Candidate Name  |  |                        | Transaction ID : <b>VNV49A0853!</b>   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | Amount of Each Disbursement this Period<br>25.26  |  |
| State: District:  |  |                        | <input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |  |

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Grasshopper.Com</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>10 / 04 / 2019                                |  |
| Mailing Address 197 1St Ave<br>Ste 200  |  |                        |   |  |
| City<br>Needham   | State<br>MA  | Zip Code<br>02494-2873 |   |  |
| Purpose of Disbursement<br>Answering Service  |  | Category/<br>Type      | FEC Identification Number<br><b>C</b>   |  |
| Candidate Name  |  |                        | Transaction ID : <b>VNV49A0856</b>  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | Amount of Each Disbursement this Period<br>25.33  |  |
| State: District:  |  |                        | <input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |  |

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

75.85

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |  |                        |  |  |
|--|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Grasshopper.Com</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>11 / 04 / 2019                         |  |
| Mailing Address 197 1St Ave<br>Ste 200   |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0857!</b> |  |
| City<br>Needham  | State<br>MA  | Zip Code<br>02494-2873 | Amount of Each Disbursement this Period<br>[REDACTED] 25.33                      |  |
| Purpose of Disbursement<br>Answering Service   |  | Candidate Name         | Non-contribution account   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |                        | Memo Item  |  |
| State: District:   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |                        |  |  |

|  |  |                        |  |  |
|--|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Grasshopper.Com</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>12 / 04 / 2019                         |  |
| Mailing Address 197 1St Ave<br>Ste 200   |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0858!</b> |  |
| City<br>Needham  | State<br>MA  | Zip Code<br>02494-2873 | Amount of Each Disbursement this Period<br>[REDACTED] 25.33                      |  |
| Purpose of Disbursement<br>Answering Service   |  | Candidate Name         | Non-contribution account   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |                        | Memo Item  |  |
| State: District:   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |                        |  |  |

|  |  |                        |   |  |
|--|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Harmon Curran Spielberg + Eisenberg LLP</b>                     |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019                        |  |
| Mailing Address 1725 Desales St NW   |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0859</b> |  |
| City<br>Washington   | State<br>DC  | Zip Code<br>20036-4422 | Amount of Each Disbursement this Period<br>[REDACTED] 252.00                    |  |
| Purpose of Disbursement<br>Legal Work  |  | Candidate Name         | Non-contribution account  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |                        | Memo Item   |  |
| 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).....▶      | [REDACTED] 302.66 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]        |



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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Harmon Curran Spielberg + Eisenberg LLP</b>                              |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019  |
| Mailing Address 1725 Desales St NW  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A085A</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 360.00<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  | Zip Code<br>20036-4422  |
| Purpose of Disbursement<br>Legal Work   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Harmon Curran Spielberg + Eisenberg LLP</b>                              |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019  |
| Mailing Address 1725 Desales St NW  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A085B</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 640.79<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  | Zip Code<br>20036-4422  |
| Purpose of Disbursement<br>Legal Work   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Harmon Curran Spielberg + Eisenberg LLP</b>                              |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019  |
| Mailing Address 1725 Desales St NW  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A085C</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 864.00<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  | Zip Code<br>20036-4422  |
| Purpose of Disbursement<br>Legal Work   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|  |                    |
|--|--------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 1864.79 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |  |                        |   |  |
|--|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Hotel Tonight</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>10 / 08 / 2019                        |  |
| Mailing Address 901 Market St<br>Ste 310   |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A085D</b> |  |
| City<br>San Francisco  | State<br>CA  | Zip Code<br>94103-1752 | Amount of Each Disbursement this Period<br>[REDACTED] 164.25                    |  |
| Purpose of Disbursement<br>Travel  |  | Candidate Name         | Non-contribution account  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |                        | Memo Item   |  |
| State: District:   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |                        |   |  |

|  |  |                        |   |  |
|--|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Hotel Tonight</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>10 / 21 / 2019                        |  |
| Mailing Address 901 Market St<br>Ste 310   |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A085E</b> |  |
| City<br>San Francisco  | State<br>CA  | Zip Code<br>94103-1752 | Amount of Each Disbursement this Period<br>[REDACTED] 221.25                    |  |
| Purpose of Disbursement<br>Travel  |  | Candidate Name         | Non-contribution account  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |                        | Memo Item   |  |
| State: District:   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |                        |   |  |

|  |  |                        |   |  |
|--|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Hotel Wales</b>   |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019                        |  |
| Mailing Address 1295 Madison Ave   |  |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A085F</b> |  |
| City<br>New York   | State<br>NY  | Zip Code<br>10128-1301 | Amount of Each Disbursement this Period<br>[REDACTED] 276.30                    |  |
| Purpose of Disbursement<br>Travel  |  | Candidate Name         | Non-contribution account  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |                        | Memo Item   |  |
| State: District:   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |                        |   |  |

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

661.80

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Hotel Zachary</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 25 / 2019                                |
| Mailing Address 3630 N Clark St   |  | FEC Identification Number<br><b>C</b>   |
| City<br>Chicago   | State<br>IL  |   |
| Purpose of Disbursement<br>Travel   |  | Transaction ID : <b>VNV49A085G</b>  |
| Candidate Name  |  | Amount of Each Disbursement this Period<br>140.48                                       |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Hotel Zachary</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 25 / 2019                                |
| Mailing Address 3630 N Clark St   |  | FEC Identification Number<br><b>C</b>   |
| City<br>Chicago   | State<br>IL  |   |
| Purpose of Disbursement<br>Travel   |  | Transaction ID : <b>VNV49A085H</b>  |
| Candidate Name  |  | Amount of Each Disbursement this Period<br>177.83                                       |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. IPFS Corporation</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019                                |
| Mailing Address 30 Montgomery St  |  | FEC Identification Number<br><b>C</b>   |
| City<br>Jersey City   | State<br>NJ  |   |
| Purpose of Disbursement<br>Insurance Payment  |  | Transaction ID : <b>VNV49A085J</b>  |
| Candidate Name  |  | Amount of Each Disbursement this Period<br>194.95                                       |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |
| State: District:  |  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 513.26 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |             |   |  |
|---|--|-------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. IPFS Corporation</b>   |  |             | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2019  |  |
| Mailing Address 30 Montgomery St  |  |             |   |  |
| City<br>Jersey City   |  | State<br>NJ | Zip Code<br>07302-3829  |  |
| Purpose of Disbursement<br>Insurance Payment  |  |             | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A085K</b><br>Amount of Each Disbursement this Period<br>845.20<br>Non-contribution account<br><input type="checkbox"/> Memo Item |  |
| Candidate Name  |  |             |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             |   |  |
| State: District:  |  |             |   |  |

|   |  |             |   |  |
|---|--|-------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. IPFS Corporation</b>   |  |             | Date of Disbursement<br>MM / DD / YYYY<br>10 / 02 / 2019  |  |
| Mailing Address 30 Montgomery St  |  |             |   |  |
| City<br>Jersey City   |  | State<br>NJ | Zip Code<br>07302-3829  |  |
| Purpose of Disbursement<br>Insurance Payment  |  |             | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A085M</b><br>Amount of Each Disbursement this Period<br>956.58<br>Non-contribution account<br><input type="checkbox"/> Memo Item |  |
| Candidate Name  |  |             |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             |   |  |
| State: District:  |  |             |   |  |

|   |  |             |   |  |
|---|--|-------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. IPFS Corporation</b>   |  |             | Date of Disbursement<br>MM / DD / YYYY<br>11 / 04 / 2019  |  |
| Mailing Address 30 Montgomery St  |  |             |   |  |
| City<br>Jersey City   |  | State<br>NJ | Zip Code<br>07302-3829  |  |
| Purpose of Disbursement<br>Insurance Payment  |  |             | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A085F</b><br>Amount of Each Disbursement this Period<br>958.46<br>Non-contribution account<br><input type="checkbox"/> Memo Item |  |
| Candidate Name  |  |             |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             |   |  |
| State: District:  |  |             |   |  |

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

2760.24

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. IPFS Corporation</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 03 / 2019   |
| Mailing Address 30 Montgomery St  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A085N</b><br>Amount of Each Disbursement this Period<br>956.58<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Jersey City   | State<br>NJ  |  |
| Zip Code<br>07302-3829  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A085N</b><br>Amount of Each Disbursement this Period<br>956.58<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| Purpose of Disbursement<br>Insurance Payment  |  |  |
| Candidate Name  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A085N</b><br>Amount of Each Disbursement this Period<br>956.58<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Kovalick, Ann, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 21 / 2019   |
| Mailing Address 295 Mercer St   |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A0815</b><br>Amount of Each Disbursement this Period<br>679.64<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Princeton   | State<br>NJ  |  |
| Zip Code<br>08540-4803  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A0815</b><br>Amount of Each Disbursement this Period<br>679.64<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| Purpose of Disbursement<br>Event Compensation   |  |  |
| Candidate Name  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A0815</b><br>Amount of Each Disbursement this Period<br>679.64<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  |  |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Little Acre Flowers</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 17 / 2019  |
| Mailing Address U St Corridor   |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A085V</b><br>Amount of Each Disbursement this Period<br>58.95<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington  | State<br>DC  |   |
| Zip Code<br>20005   |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A085V</b><br>Amount of Each Disbursement this Period<br>58.95<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| Purpose of Disbursement<br>Fundraising supplies (to a vendor)   |  |   |
| Candidate Name  |  | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A085V</b><br>Amount of Each Disbursement this Period<br>58.95<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 1695.17 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Little Acre Flowers**

Full Name (Last, First, Middle Initial)

Mailing Address U St Corridor

City Washington State DC Zip Code 20005

Purpose of Disbursement Fundraising supplies (to a vendor)

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2019

FEC Identification Number: **C**

Transaction ID : VNV49A085V

Amount of Each Disbursement this Period: 30.38

Memo Item

**B. Marcum, LLP**

Full Name (Last, First, Middle Initial)

Mailing Address 1899 L St NW

City Washington State DC Zip Code 20036-3804

Purpose of Disbursement Accounting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2019

FEC Identification Number: **C**

Transaction ID : VNV49A085X!

Amount of Each Disbursement this Period: 3240.00

Memo Item

**C. Marcum, LLP**

Full Name (Last, First, Middle Initial)

Mailing Address 1899 L St NW

City Washington State DC Zip Code 20036-3804

Purpose of Disbursement Accounting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 19 / 2019

FEC Identification Number: **C**

Transaction ID : VNV49A085Y

Amount of Each Disbursement this Period: 3240.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6510.38

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Marcum, LLP**

Mailing Address 1899 L St NW

City Washington State DC Zip Code 20036-3804

Purpose of Disbursement Accounting

Candidate Name

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

State: District:

Date of Disbursement: 08 / 15 / 2019

FEC Identification Number: C  
Transaction ID : VNV49A085Z  
Amount of Each Disbursement this Period: 3240.00  
Non-contribution account  Memo Item

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

Mailing Address 1899 L St NW

City Washington State DC Zip Code 20036-3804

Purpose of Disbursement Accounting

Candidate Name

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

State: District:

Date of Disbursement: 09 / 15 / 2019

FEC Identification Number: C  
Transaction ID : VNV49A0860  
Amount of Each Disbursement this Period: 3240.00  
Non-contribution account  Memo Item

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

Mailing Address 1899 L St NW

City Washington State DC Zip Code 20036-3804

Purpose of Disbursement Accounting

Candidate Name

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

State: District:

Date of Disbursement: 10 / 15 / 2019

FEC Identification Number: C  
Transaction ID : VNV49A0861  
Amount of Each Disbursement this Period: 3240.00  
Non-contribution account  Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9720.00

**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"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|   |             |  |   |  |
|---|-------------|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Marcum, LLP</b>  |             |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019                        |  |
| Mailing Address 1899 L St NW  |             |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0862</b> |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20036-3804   | Amount of Each Disbursement this Period<br>[REDACTED] 3240.00                   |  |
| Purpose of Disbursement<br>Accounting   |             | Candidate Name   | Non-contribution account  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |  | Memo Item   |  |
| State:  | District:   | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|   |             |  |   |  |
|---|-------------|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Marcum, LLP</b>  |             |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 19 / 2019                        |  |
| Mailing Address 1899 L St NW  |             |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0863</b> |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20036-3804   | Amount of Each Disbursement this Period<br>[REDACTED] 3240.00                   |  |
| Purpose of Disbursement<br>Accounting   |             | Candidate Name   | Non-contribution account  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |  | Memo Item   |  |
| State:  | District:   | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|   |             |  |   |  |
|---|-------------|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Napi's Restaurant</b>  |             |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019                        |  |
| Mailing Address 7 Freeman St  |             |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0868</b> |  |
| City<br>Provincetown  | State<br>MA | Zip Code<br>02657-1462   | Amount of Each Disbursement this Period<br>[REDACTED] 434.48                    |  |
| Purpose of Disbursement<br>Fundraising Expense (to a vendor)  |             | Candidate Name   | Non-contribution account  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |  | Memo Item   |  |
| State:  | District:   | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

|  |                    |
|--|--------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 6914.48 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]         |



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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |             |                        |  |  |
|---|-------------|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. NGP VAN, Inc.</b>  |             |                        | Date of Disbursement<br>MM / DD / YYYY<br>08 / 01 / 2019   |  |
| Mailing Address 1101 15Th St NW<br>Ste 500  |             |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0869</b>  |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20005-5006 | Amount of Each Disbursement this Period<br>[REDACTED] 150.00   |  |
| Purpose of Disbursement<br>Subscription   |             | Candidate Name         | Non-contribution account<br><input type="checkbox"/> Memo Item   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |                        | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State:  | District:   | Category/Type          |  |  |

|   |             |                        |  |  |
|---|-------------|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. NGP VAN, Inc.</b>  |             |                        | Date of Disbursement<br>MM / DD / YYYY<br>12 / 31 / 2019   |  |
| Mailing Address 1101 15Th St NW<br>Ste 500  |             |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A086A</b>  |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20005-5006 | Amount of Each Disbursement this Period<br>[REDACTED] 356.25   |  |
| Purpose of Disbursement<br>Subscription   |             | Candidate Name         | Non-contribution account<br><input type="checkbox"/> Memo Item   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |                        | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State:  | District:   | Category/Type          |  |  |

|   |             |                        |  |  |
|---|-------------|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. NJT Mobile</b>   |             |                        | Date of Disbursement<br>MM / DD / YYYY<br>08 / 01 / 2019   |  |
| Mailing Address 1 Penn Plz E  |             |                        | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A086F</b>  |  |
| City<br>Newark  | State<br>NJ | Zip Code<br>07105-2245 | Amount of Each Disbursement this Period<br>[REDACTED] 84.00  |  |
| Purpose of Disbursement<br>Travel   |             | Candidate Name         | Non-contribution account<br><input type="checkbox"/> Memo Item   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |                        | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State:  | District:   | Category/Type          |  |  |

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

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

|                   |
|-------------------|
| [REDACTED] 590.25 |
| [REDACTED]        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. NJT Mobile**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Penn Plz E

City Newark State NJ Zip Code 07105-2245

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 12 / 2019

FEC Identification Number: C

Transaction ID : VNV49A086C

Amount of Each Disbursement this Period: 4.50

Memo Item

**B. NJT Mobile**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Penn Plz E

City Newark State NJ Zip Code 07105-2245

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A086D

Amount of Each Disbursement this Period: 17.63

Memo Item

**C. NJT Mobile**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Penn Plz E

City Newark State NJ Zip Code 07105-2245

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV49A086E

Amount of Each Disbursement this Period: 31.88

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 54.01

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Olive Street Design</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 03 / 2019  |
| Mailing Address 264 E Kenilworth Ave  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A086J!</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 25.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Villa Park  | State<br>IL  | Zip Code<br>60181-5502  |
| Purpose of Disbursement<br>Design Fee   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Olive Street Design</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 05 / 2019  |
| Mailing Address 264 E Kenilworth Ave  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A086K!</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 25.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Villa Park  | State<br>IL  | Zip Code<br>60181-5502  |
| Purpose of Disbursement<br>Design Fee   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Olive Street Design</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 03 / 2019  |
| Mailing Address 264 E Kenilworth Ave  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A086N!</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 25.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Villa Park  | State<br>IL  | Zip Code<br>60181-5502  |
| Purpose of Disbursement<br>Design Fee   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|  |                  |
|--|------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 76.50 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]       |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 20 / 2019

FEC Identification Number: C

Transaction ID : VNV49A086R

Amount of Each Disbursement this Period: 63.75

Memo Item

**B. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 20 / 2019

FEC Identification Number: C

Transaction ID : VNV49A086V

Amount of Each Disbursement this Period: 375.00

Memo Item

**C. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV49A086N

Amount of Each Disbursement this Period: 25.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 464.25

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV49A086P

Amount of Each Disbursement this Period: 25.50

Memo Item

**B. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV49A086S

Amount of Each Disbursement this Period: 101.25

Memo Item

**C. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2019

FEC Identification Number: C

Transaction ID : VNV49A086T

Amount of Each Disbursement this Period: 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 276.75

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Design Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 03 / 2019

FEC Identification Number: C

Transaction ID : VNV49A086Q

Amount of Each Disbursement this Period: 25.50

Memo Item

**B. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV49A09NP

Amount of Each Disbursement this Period: 93.17

Memo Item

**C. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A087A

Amount of Each Disbursement this Period: 102.42

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 221.09

**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"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>07 / 15 / 2019                        |  |
| Mailing Address 911 Panorama Trl S  |  |                        |   |  |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396 | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A087M</b> |  |
| Purpose of Disbursement<br>Payroll Tax  |  |                        | Amount of Each Disbursement this Period<br>[REDACTED] 391.68                    |  |
| Candidate Name  |  |                        | Non-contribution account<br><input type="checkbox"/> Memo Item                  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | [REDACTED]  |  |
| State: District:  | [REDACTED]   |                        | [REDACTED]  |  |

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>07 / 22 / 2019                        |  |
| Mailing Address 911 Panorama Trl S  |  |                        |   |  |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396 | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A086Z</b> |  |
| Purpose of Disbursement<br>Payroll Processing Fee   |  |                        | Amount of Each Disbursement this Period<br>[REDACTED] 36.25                     |  |
| Candidate Name  |  |                        | Non-contribution account<br><input type="checkbox"/> Memo Item                  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | [REDACTED]  |  |
| State: District:  | [REDACTED]   |                        | [REDACTED]  |  |

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Paychex</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019                        |  |
| Mailing Address 911 Panorama Trl S  |  |                        |   |  |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396 | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0870</b> |  |
| Purpose of Disbursement<br>Payroll Processing Fee   |  |                        | Amount of Each Disbursement this Period<br>[REDACTED] 94.47                     |  |
| Candidate Name  |  |                        | Non-contribution account<br><input type="checkbox"/> Memo Item                  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | [REDACTED]  |  |
| State: District:  | [REDACTED]   |                        | [REDACTED]  |  |

|  |                   |
|--|-------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 522.40 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |                        |  |  |
|---|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019       |  |
| Mailing Address 911 Panorama Trl S  |  |                        |  |  |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396 | FEC Identification Number<br>C [REDACTED]                      |  |
| Purpose of Disbursement<br>Payroll Tax  |  |                        | Transaction ID : VNV49A087N                                    |  |
| Candidate Name  |  |                        | Amount of Each Disbursement this Period<br>[REDACTED] 391.68   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | Non-contribution account<br><input type="checkbox"/> Memo Item |  |
| State: District:  |  |                        |  |  |

|   |  |                        |  |  |
|---|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>08 / 15 / 2019       |  |
| Mailing Address 911 Panorama Trl S  |  |                        |  |  |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396 | FEC Identification Number<br>C [REDACTED]                      |  |
| Purpose of Disbursement<br>Payroll Processing Fee   |  |                        | Transaction ID : VNV49A0871                                    |  |
| Candidate Name  |  |                        | Amount of Each Disbursement this Period<br>[REDACTED] 94.47    |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | Non-contribution account<br><input type="checkbox"/> Memo Item |  |
| State: District:  |  |                        |  |  |

|   |  |                        |  |  |
|---|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Paychex</b>  |  |                        | Date of Disbursement<br>MM / DD / YYYY<br>08 / 15 / 2019       |  |
| Mailing Address 911 Panorama Trl S  |  |                        |  |  |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396 | FEC Identification Number<br>C [REDACTED]                      |  |
| Purpose of Disbursement<br>Payroll Tax  |  |                        | Transaction ID : VNV49A087F                                    |  |
| Candidate Name  |  |                        | Amount of Each Disbursement this Period<br>[REDACTED] 391.68   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                        | Non-contribution account<br><input type="checkbox"/> Memo Item |  |
| State: District:  |  |                        |  |  |

|  |                   |
|--|-------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 877.83 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]        |



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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 30 / 2019  |
| Mailing Address 911 Panorama Trl S   |   | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A0872</b><br>Amount of Each Disbursement this Period<br>94.47<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Rochester  | State<br>NY   |   |
| Zip Code<br>14625-2396   | Purpose of Disbursement<br>Payroll Processing Fee   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 31 / 2019   |
| Mailing Address 911 Panorama Trl S   |   | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A087Q</b><br>Amount of Each Disbursement this Period<br>391.68<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Rochester  | State<br>NY   |  |
| Zip Code<br>14625-2396   | Purpose of Disbursement<br>Payroll Tax  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Paychex</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 13 / 2019  |
| Mailing Address 911 Panorama Trl S   |   | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A0873</b><br>Amount of Each Disbursement this Period<br>94.47<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Rochester  | State<br>NY   |   |
| Zip Code<br>14625-2396   | Purpose of Disbursement<br>Payroll Processing Fee   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 580.62 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 15 / 2019   |
| Mailing Address 911 Panorama Trl S   |   | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A087C</b><br>Amount of Each Disbursement this Period<br>305.62<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Rochester  | State<br>NY   |  |
| Zip Code<br>14625-2396   | Purpose of Disbursement<br>Payroll Tax  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2019  |
| Mailing Address 911 Panorama Trl S   |   | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A087A</b><br>Amount of Each Disbursement this Period<br>94.47<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Rochester  | State<br>NY   |   |
| Zip Code<br>14625-2396   | Purpose of Disbursement<br>Payroll Processing Fee   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Paychex</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2019   |
| Mailing Address 911 Panorama Trl S   |   | FEC Identification Number<br><b>C</b><br>Transaction ID : <b>VNV49A087C</b><br>Amount of Each Disbursement this Period<br>305.62<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Rochester  | State<br>NY   |  |
| Zip Code<br>14625-2396   | Purpose of Disbursement<br>Payroll Tax  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 705.71 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

L PAC

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement  
Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VNV49A087B**  
Amount of Each Disbursement this Period

Non-contribution account  
 Memo Item

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement  
Payroll Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VNV49A087E**  
Amount of Each Disbursement this Period

Non-contribution account  
 Memo Item

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement  
Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VNV49A0875**  
Amount of Each Disbursement this Period

Non-contribution account  
 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"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 31 / 2019                        |  |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A087F</b> |  |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396  | Amount of Each Disbursement this Period<br>[REDACTED] 305.62   |
| Purpose of Disbursement<br>Payroll Tax  |  | Category/<br>Type<br>[REDACTED]   | Non-contribution account<br><input type="checkbox"/> Memo Item |
| Candidate Name  |  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  |  |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 15 / 2019                        |  |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A087F</b> |  |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396  | Amount of Each Disbursement this Period<br>[REDACTED] 94.47    |
| Purpose of Disbursement<br>Payroll Processing Fee   |  | Category/<br>Type<br>[REDACTED]   | Non-contribution account<br><input type="checkbox"/> Memo Item |
| Candidate Name  |  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  |  |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 15 / 2019                        |  |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A087C</b> |  |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396  | Amount of Each Disbursement this Period<br>[REDACTED] 305.62   |
| Purpose of Disbursement<br>Payroll Tax  |  | Category/<br>Type<br>[REDACTED]   | Non-contribution account<br><input type="checkbox"/> Memo Item |
| Candidate Name  |  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  |  |   |  |

|  |                   |
|--|-------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 705.71 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 29 / 2019                        |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0877</b> |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396  |
| Purpose of Disbursement<br>Payroll Processing Fee   |  | Amount of Each Disbursement this Period<br>94.47                                |
| Candidate Name  |  | Category/Type   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 30 / 2019                        |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A087H</b> |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396  |
| Purpose of Disbursement<br>Payroll Tax  |  | Amount of Each Disbursement this Period<br>305.62                               |
| Candidate Name  |  | Category/Type   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 13 / 2019                        |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0878</b> |
| City<br>Rochester   | State<br>NY  | Zip Code<br>14625-2396  |
| Purpose of Disbursement<br>Payroll Processing Fee   |  | Amount of Each Disbursement this Period<br>94.47                                |
| Candidate Name  |  | Category/Type   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

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

494.56

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 15 / 2019 |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br><b>C</b>                    |
| City<br>Rochester   | State<br>NY  |  |
| Purpose of Disbursement<br>Payroll Tax  |  | Transaction ID : <b>VNV49A087J</b>                       |
| Candidate Name  |  | Amount of Each Disbursement this Period<br>305.62        |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item                       |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 31 / 2019 |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br><b>C</b>                    |
| City<br>Rochester   | State<br>NY  |  |
| Purpose of Disbursement<br>Payroll Processing Fee   |  | Transaction ID : <b>VNV49A0879I</b>                      |
| Candidate Name  |  | Amount of Each Disbursement this Period<br>94.47         |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item                       |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Paychex</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 31 / 2019 |
| Mailing Address 911 Panorama Trl S  |  | FEC Identification Number<br><b>C</b>                    |
| City<br>Rochester   | State<br>NY  |  |
| Purpose of Disbursement<br>Payroll Tax  |  | Transaction ID : <b>VNV49A087H</b>                       |
| Candidate Name  |  | Amount of Each Disbursement this Period<br>305.62        |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item                       |
| State: District:  |  |  |

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

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

|        |
|--------|
| 705.71 |
|        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Pickwick Hotel**

Date of Disbursement:  /  /

Mailing Address: 85 5Th St

City: San Francisco State: CA Zip Code: 94103-1812

Purpose of Disbursement: Travel

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State:  District:

FEC Identification Number:   
**Transaction ID : VNV49A087S**  
Amount of Each Disbursement this Period:   
Non-contribution account  Memo Item

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

Date of Disbursement:  /  /

Mailing Address: 1015 Battery St

City: San Francisco State: CA Zip Code: 94111-1220

Purpose of Disbursement: Fundraising Event (to a vendor)

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State:  District:

FEC Identification Number:   
**Transaction ID : VNV49A087T!**  
Amount of Each Disbursement this Period:   
Non-contribution account  Memo Item

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

Date of Disbursement:  /  /

Mailing Address: 1015 Battery St

City: San Francisco State: CA Zip Code: 94111-1220

Purpose of Disbursement: Fundraising Event (to a vendor)

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State:  District:

FEC Identification Number:   
**Transaction ID : VNV49A087V**  
Amount of Each Disbursement this Period:   
Non-contribution account  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"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Preferred Insurance Services Inc.</b>                                    |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 05 / 2019                        |
| Mailing Address 26 Fairfax St SE<br>Ste G   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A087W</b> |
| City<br>Leesburg  | State<br>VA  | Zip Code<br>20175-3621  |
| Purpose of Disbursement<br>Monthly Insurance Premium  |  | Amount of Each Disbursement this Period<br>[REDACTED] 1027.88                   |
| Candidate Name  |  | Category/Type<br>[REDACTED]   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item  |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Sandberg, Stephanie, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 15 / 2019                        |
| Mailing Address 32 Vreeland Ct  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A081E</b> |
| City<br>Princeton   | State<br>NJ  | Zip Code<br>08540-6760  |
| Purpose of Disbursement<br>Salary   |  | Amount of Each Disbursement this Period<br>[REDACTED] 3937.50                   |
| Candidate Name  |  | Category/Type<br>[REDACTED]   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item  |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Sandberg, Stephanie, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019                        |
| Mailing Address 32 Vreeland Ct  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A081F</b> |
| City<br>Princeton   | State<br>NJ  | Zip Code<br>08540-6760  |
| Purpose of Disbursement<br>Salary   |  | Amount of Each Disbursement this Period<br>[REDACTED] 3937.50                   |
| Candidate Name  |  | Category/Type<br>[REDACTED]   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item  |
| State: District:  |  |   |

|  |                    |
|--|--------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 8902.88 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]         |



SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b-30b with checkboxes. Line 29 is checked.

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NAME OF COMMITTEE (In Full)
L PAC

Form A: Sandberg, Stephanie, , , Disbursement details including date (08/15/2019), amount (3937.50), and transaction ID (VNV49A081G).

Form B: Sandberg, Stephanie, , , Disbursement details including date (08/31/2019), amount (3937.50), and transaction ID (VNV49A081H).

Form C: Sandberg, Stephanie, , , Disbursement details including date (09/15/2019), amount (2812.50), and transaction ID (VNV49A0816).

SUBTOTAL of Disbursements This Page (optional) 10687.50
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |                   |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Sandberg, Stephanie, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2019   |                   |
| Mailing Address 32 Vreeland Ct  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0817</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 2812.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |                   |
| City<br>Princeton   | State<br>NJ  | Zip Code<br>08540-6760   | Category/<br>Type |
| Purpose of Disbursement<br>Salary   |  |  |                   |
| Candidate Name  |  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |                   |
| State: District:  |  |  |                   |

|   |  |  |                   |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Sandberg, Stephanie, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 15 / 2019   |                   |
| Mailing Address 32 Vreeland Ct  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0818</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 2812.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |                   |
| City<br>Princeton   | State<br>NJ  | Zip Code<br>08540-6760   | Category/<br>Type |
| Purpose of Disbursement<br>Salary   |  |  |                   |
| Candidate Name  |  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |                   |
| State: District:  |  |  |                   |

|   |  |  |                   |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Sandberg, Stephanie, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 31 / 2019   |                   |
| Mailing Address 32 Vreeland Ct  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0819</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 2812.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |                   |
| City<br>Princeton   | State<br>NJ  | Zip Code<br>08540-6760   | Category/<br>Type |
| Purpose of Disbursement<br>Salary   |  |  |                   |
| Candidate Name  |  |  |                   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |                   |
| State: District:  |  |  |                   |

|  |                    |
|--|--------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 8437.50 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A081A

Amount of Each Disbursement this Period: 2812.50

Memo Item

**B. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2019

FEC Identification Number: C

Transaction ID : VNV49A081B

Amount of Each Disbursement this Period: 2812.50

Memo Item

**C. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A081C

Amount of Each Disbursement this Period: 2812.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8437.50

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |                     |   |                                    |
|---|---------------------|---|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Sandberg, Stephanie, , ,</b>   |                     | Date of Disbursement<br>MM / DD / YYYY<br>12 / 31 / 2019  |                                    |
| Mailing Address 32 Vreeland Ct  |                     | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A081D</b><br>Amount of Each Disbursement this Period<br>2812.50 |                                    |
| City<br>Princeton   | State<br>NJ         | Zip Code<br>08540-6760  | Category/<br>Type                  |
| Purpose of Disbursement<br>Salary   |                     | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |                                    |
| Candidate Name  |                     |   | Memo Item <input type="checkbox"/> |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State:<br>District: |   |                                    |

|   |                     |  |                                    |
|---|---------------------|--|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. Stanford Court Hotel</b>   |                     | Date of Disbursement<br>MM / DD / YYYY<br>07 / 15 / 2019   |                                    |
| Mailing Address 905 California St   |                     | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0886</b><br>Amount of Each Disbursement this Period<br>344.00 |                                    |
| City<br>San Francisco   | State<br>CA         | Zip Code<br>94108-2290   | Category/<br>Type                  |
| Purpose of Disbursement<br>TRAVEL   |                     | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |
| Candidate Name  |                     |  | Memo Item <input type="checkbox"/> |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State:<br>District: |  |                                    |

|   |                     |  |                                    |
|---|---------------------|--|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Staples</b>  |                     | Date of Disbursement<br>MM / DD / YYYY<br>07 / 29 / 2019   |                                    |
| Mailing Address 1250 H St NW  |                     | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0887</b><br>Amount of Each Disbursement this Period<br>67.57  |                                    |
| City<br>Washington  | State<br>DC         | Zip Code<br>20005-3952   | Category/<br>Type                  |
| Purpose of Disbursement<br>Office Expense   |                     | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |
| Candidate Name  |                     |  | Memo Item <input type="checkbox"/> |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State:<br>District: |  |                                    |

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

3224.07

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Teleon Cafe</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>12 / 06 / 2019   |
| Mailing Address 264 W 40Th St  |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A088J</b><br>Amount of Each Disbursement this Period<br>142.57<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>New York   | State<br>NY   |  |
| Zip Code<br>10018-1512   | Purpose of Disbursement<br>Fundraising expense (payment to vendor)  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Teleon Cafe</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>12 / 06 / 2019   |
| Mailing Address 264 W 40Th St  |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A088K</b><br>Amount of Each Disbursement this Period<br>165.05<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>New York   | State<br>NY   |  |
| Zip Code<br>10018-1512   | Purpose of Disbursement<br>Fundraising expense (payment to vendor)  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. The Turner Group LTD</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 23 / 2019  |
| Mailing Address PO Box 5373  |   | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A088F</b><br>Amount of Each Disbursement this Period<br>1500.00<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Virginia Beach   | State<br>VA   |   |
| Zip Code<br>23471-0373   | Purpose of Disbursement<br>Political Consulting   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 1807.62 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. The Turner Group LTD**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Political Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV49A088Q

Amount of Each Disbursement this Period: 1500.00

Memo Item

**B. The Turner Group LTD**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Travel Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 09 / 2019

FEC Identification Number: C

Transaction ID : VNV49A088M

Amount of Each Disbursement this Period: 314.01

Memo Item

**C. The Turner Group LTD**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Political Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A088F

Amount of Each Disbursement this Period: 1500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3314.01

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. The Turner Group LTD**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Political Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 05 / 2019

FEC Identification Number: C

Transaction ID : VNV49A088S

Amount of Each Disbursement this Period: 1500.00

Memo Item

**B. The Turner Group LTD**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Political Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2019

FEC Identification Number: C

Transaction ID : VNV49A088N

Amount of Each Disbursement this Period: 685.20

Memo Item

**C. The Turner Group LTD**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Political Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 19 / 2019

FEC Identification Number: C

Transaction ID : VNV49A088T

Amount of Each Disbursement this Period: 1500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3685.20

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. The Turner Group LTD**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5373

City Virginia Beach State VA Zip Code 23471-0373

Purpose of Disbursement Political Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 19 / 2019

FEC Identification Number: C

Transaction ID : VNV49A088V

Amount of Each Disbursement this Period: 1500.00

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV49A089H

Amount of Each Disbursement this Period: 30.89

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 11 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0893

Amount of Each Disbursement this Period: 8.26

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1539.15

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Uber</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 11 / 2019   |
| Mailing Address 182 Howard St  |   | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A0894</b><br>Amount of Each Disbursement this Period<br>10.63<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>San Francisco  | State<br>CA   |  |
| Zip Code<br>94105-1611   | Purpose of Disbursement<br>Taxi   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Uber</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 12 / 2019  |
| Mailing Address 182 Howard St  |   | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A088Y</b><br>Amount of Each Disbursement this Period<br>3.28<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>San Francisco  | State<br>CA   |   |
| Zip Code<br>94105-1611   | Purpose of Disbursement<br>Taxi   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Uber</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 12 / 2019   |
| Mailing Address 182 Howard St  |   | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A089E</b><br>Amount of Each Disbursement this Period<br>21.88<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>San Francisco  | State<br>CA   |  |
| Zip Code<br>94105-1611   | Purpose of Disbursement<br>Taxi   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

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

35.79

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |  |  |  |
|--|--|--|--|
| <p><b>A. Uber</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 182 Howard St</p> <p>City San Francisco State CA Zip Code 94105-1611</p> <p>Purpose of Disbursement Taxi</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> |  |  | <p>Date of Disbursement</p> <p>MM / DD / YYYY<br/>07 / 19 / 2019</p> |
| <p>FEC Identification Number</p> <p><b>C</b></p> <p><b>Transaction ID : VNV49A0898:</b></p> <p>Amount of Each Disbursement this Period</p> <p>13.55</p> <p><input type="checkbox"/> Non-contribution account</p> <p><input type="checkbox"/> Memo Item</p>   |  |  |  |
| <p><b>B. Uber</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 182 Howard St</p> <p>City San Francisco State CA Zip Code 94105-1611</p> <p>Purpose of Disbursement Taxi</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> |  |  | <p>Date of Disbursement</p> <p>MM / DD / YYYY<br/>07 / 19 / 2019</p> |
| <p>FEC Identification Number</p> <p><b>C</b></p> <p><b>Transaction ID : VNV49A089F:</b></p> <p>Amount of Each Disbursement this Period</p> <p>26.21</p> <p><input type="checkbox"/> Non-contribution account</p> <p><input type="checkbox"/> Memo Item</p>   |  |  |  |
| <p><b>C. Uber</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 182 Howard St</p> <p>City San Francisco State CA Zip Code 94105-1611</p> <p>Purpose of Disbursement Taxi</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> |  |  | <p>Date of Disbursement</p> <p>MM / DD / YYYY<br/>07 / 29 / 2019</p> |
| <p>FEC Identification Number</p> <p><b>C</b></p> <p><b>Transaction ID : VNV49A088V</b></p> <p>Amount of Each Disbursement this Period</p> <p>0.75</p> <p><input type="checkbox"/> Non-contribution account</p> <p><input type="checkbox"/> Memo Item</p>   |  |  |  |
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶</p>  |  |  | <p>40.51</p>   |
| <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>   |  |  |  |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 29 / 2019

FEC Identification Number: C

Transaction ID : VNV49A088Z

Amount of Each Disbursement this Period: 5.78

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 29 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0895i

Amount of Each Disbursement this Period: 11.47

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 29 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0897

Amount of Each Disbursement this Period: 12.98

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 30.23

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Uber</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 29 / 2019                         |  |
| Mailing Address 182 Howard St   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0899I</b> |  |
| City<br>San Francisco   | State<br>CA  | Zip Code<br>94105-1611   | Amount of Each Disbursement this Period<br>13.91               |
| Purpose of Disbursement<br>Taxi   |  | Category/<br>Type  | Non-contribution account<br><input type="checkbox"/> Memo Item |
| Candidate Name  |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: District:  |  |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Uber</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019                         |  |
| Mailing Address 182 Howard St   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0896I</b> |  |
| City<br>San Francisco   | State<br>CA  | Zip Code<br>94105-1611   | Amount of Each Disbursement this Period<br>12.15               |
| Purpose of Disbursement<br>Taxi   |  | Category/<br>Type  | Non-contribution account<br><input type="checkbox"/> Memo Item |
| Candidate Name  |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: District:  |  |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Uber</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019                         |  |
| Mailing Address 182 Howard St   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A0899C</b> |  |
| City<br>San Francisco   | State<br>CA  | Zip Code<br>94105-1611   | Amount of Each Disbursement this Period<br>28.21               |
| Purpose of Disbursement<br>Taxi   |  | Category/<br>Type  | Non-contribution account<br><input type="checkbox"/> Memo Item |
| Candidate Name  |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: District:  |  |  |  |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 54.27 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Uber</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y Y<br>10 / 22 / 2019 |  |
| Mailing Address 182 Howard St   |  |   |  |
| City<br>San Francisco   | State<br>CA  | Zip Code<br>94105-1611  |  |
| Purpose of Disbursement<br>Taxi   |  | <input type="checkbox"/> Category/Type                          |  |
| Candidate Name  |  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  |  |   |  |

FEC Identification Number  
 C

**Transaction ID : VNV49A089B**

Amount of Each Disbursement this Period  
 14.90

Non-contribution account  
 Memo Item

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Uber</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y Y<br>10 / 23 / 2019 |  |
| Mailing Address 182 Howard St   |  |   |  |
| City<br>San Francisco   | State<br>CA  | Zip Code<br>94105-1611  |  |
| Purpose of Disbursement<br>Taxi   |  | <input type="checkbox"/> Category/Type                          |  |
| Candidate Name  |  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  |  |   |  |

FEC Identification Number  
 C

**Transaction ID : VNV49A089C**

Amount of Each Disbursement this Period  
 15.07

Non-contribution account  
 Memo Item

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Uber</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y Y<br>11 / 22 / 2019 |  |
| Mailing Address 182 Howard St   |  |   |  |
| City<br>San Francisco   | State<br>CA  | Zip Code<br>94105-1611  |  |
| Purpose of Disbursement<br>Taxi   |  | <input type="checkbox"/> Category/Type                          |  |
| Candidate Name  |  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  |  |   |  |

FEC Identification Number  
 C

**Transaction ID : VNV49A089A**

Amount of Each Disbursement this Period  
 14.09

Non-contribution account  
 Memo Item

|  |                            |
|--|----------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | <input type="text"/> 44.06 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <input type="text"/>       |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Uber</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y Y Y<br>11 / 22 / 2019                          |  |
| Mailing Address 182 Howard St   |  |  |  |
| City<br>San Francisco   | State<br>CA  | Zip Code<br>94105-1611   |  |
| Purpose of Disbursement<br>Taxi   |  | FEC Identification Number<br>C [REDACTED]  |  |
| Candidate Name  |  | Transaction ID : VNV49A089D<br>Amount of Each Disbursement this Period<br>[REDACTED] 15.70 |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: District:  | <input type="checkbox"/> Memo Item   |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Uber</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y Y Y<br>11 / 25 / 2019                          |  |
| Mailing Address 182 Howard St   |  |  |  |
| City<br>San Francisco   | State<br>CA  | Zip Code<br>94105-1611   |  |
| Purpose of Disbursement<br>Taxi   |  | FEC Identification Number<br>C [REDACTED]  |  |
| Candidate Name  |  | Transaction ID : VNV49A088X!<br>Amount of Each Disbursement this Period<br>[REDACTED] 3.00 |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: District:  | <input type="checkbox"/> Memo Item   |  |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Uber</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y Y Y<br>11 / 25 / 2019                         |  |
| Mailing Address 182 Howard St   |  |   |  |
| City<br>San Francisco   | State<br>CA  | Zip Code<br>94105-1611  |  |
| Purpose of Disbursement<br>Taxi   |  | FEC Identification Number<br>C [REDACTED]   |  |
| Candidate Name  |  | Transaction ID : VNV49A0890<br>Amount of Each Disbursement this Period<br>[REDACTED] 5.93 |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  | <input type="checkbox"/> Memo Item   |   |  |

|  |                  |
|--|------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 24.63 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]       |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 25 / 2019

FEC Identification Number: C

Transaction ID : VNV49A089J

Amount of Each Disbursement this Period: 74.11

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0892!

Amount of Each Disbursement this Period: 8.04

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement Taxi

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 09 / 2019

FEC Identification Number: C

Transaction ID : VNV49A0891

Amount of Each Disbursement this Period: 22.29

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 104.44

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Uber</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y Y Y<br>12 / 30 / 2019   |  |
| Mailing Address 182 Howard St   |  |   |  |
| City<br>San Francisco   | State<br>CA  | Zip Code<br>94105-1611  |  |
| Purpose of Disbursement<br>Taxi   |  | Category/Type<br><input type="checkbox"/>   |  |
| Candidate Name  |  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  |  |   |  |
|   |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A089K</b><br>Amount of Each Disbursement this Period<br>74.11<br><input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. United Airlines</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y Y Y<br>07 / 05 / 2019   |  |
| Mailing Address 233 S Wacker Dr<br>Ste 430  |  |   |  |
| City<br>Chicago   | State<br>IL  | Zip Code<br>60606-6435  |  |
| Purpose of Disbursement<br>Travel   |  | Category/Type<br><input type="checkbox"/>   |  |
| Candidate Name  |  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |
| State: District:  |  |   |  |
|   |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A089P</b><br>Amount of Each Disbursement this Period<br>17.25<br><input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. United Airlines</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y Y Y<br>07 / 05 / 2019  |  |
| Mailing Address 233 S Wacker Dr<br>Ste 430  |  |  |  |
| City<br>Chicago   | State<br>IL  | Zip Code<br>60606-6435   |  |
| Purpose of Disbursement<br>Travel   |  | Category/Type<br><input type="checkbox"/>  |  |
| Candidate Name  |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| State: District:  |  |  |  |
|   |  | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A089V</b><br>Amount of Each Disbursement this Period<br>465.45<br><input type="checkbox"/> Non-contribution account<br><input type="checkbox"/> Memo Item |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶      | 556.81 |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶ |        |



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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. United Airlines</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 12 / 2019   |
| Mailing Address 233 S Wacker Dr<br>Ste 430   |   | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A089Q</b><br>Amount of Each Disbursement this Period<br>22.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Chicago  | State<br>IL   |  |
| Zip Code<br>60606-6435   | Purpose of Disbursement<br>Travel   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. United Airlines</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 19 / 2019  |
| Mailing Address 233 S Wacker Dr<br>Ste 430   |   | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A089S</b><br>Amount of Each Disbursement this Period<br>312.53<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Chicago  | State<br>IL   |   |
| Zip Code<br>60606-6435   | Purpose of Disbursement<br>Travel   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. United Airlines</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 03 / 2019  |
| Mailing Address 233 S Wacker Dr<br>Ste 430   |   | FEC Identification Number<br>C<br><b>Transaction ID : VNV49A089F</b><br>Amount of Each Disbursement this Period<br>172.95<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Chicago  | State<br>IL   |   |
| Zip Code<br>60606-6435   | Purpose of Disbursement<br>Travel   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 507.98 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. United Airlines</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 11 / 2019                        |
| Mailing Address 233 S Wacker Dr<br>Ste 430   |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A089T</b> |
| City Chicago   | State IL  | Zip Code 60606-6435   |
| Purpose of Disbursement<br>Travel  | Amount of Each Disbursement this Period<br>[REDACTED] 412.20  |   |
| Candidate Name   | Category/Type   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   | <input type="checkbox"/> Memo Item  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. United Airlines</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>11 / 07 / 2019                        |
| Mailing Address 233 S Wacker Dr<br>Ste 430   |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A089W</b> |
| City Chicago   | State IL  | Zip Code 60606-6435   |
| Purpose of Disbursement<br>Travel  | Amount of Each Disbursement this Period<br>[REDACTED] 484.20  |   |
| Candidate Name   | Category/Type   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   | <input type="checkbox"/> Memo Item  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. USPS</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 01 / 2019                        |
| Mailing Address 1800 M St NW   |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A089Y</b> |
| City Washington  | State DC  | Zip Code 20036-5802   |
| Purpose of Disbursement<br>Shipping  | Amount of Each Disbursement this Period<br>[REDACTED] 14.24   |   |
| Candidate Name   | Category/Type   |   |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:   | <input type="checkbox"/> Memo Item  |   |

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

[REDACTED] 910.64

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. USPS**

Full Name (Last, First, Middle Initial)

Mailing Address 1800 M St NW

City Washington State DC Zip Code 20036-5802

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2019

FEC Identification Number: C

Transaction ID : VNV49A089Z

Amount of Each Disbursement this Period: 21.49

Memo Item

**B. USPS**

Full Name (Last, First, Middle Initial)

Mailing Address 1800 M St NW

City Washington State DC Zip Code 20036-5802

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 18 / 2019

FEC Identification Number: C

Transaction ID : VNV49A089X

Amount of Each Disbursement this Period: 10.76

Memo Item

**C. USPS**

Full Name (Last, First, Middle Initial)

Mailing Address 1800 M St NW

City Washington State DC Zip Code 20036-5802

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 27 / 2019

FEC Identification Number: C

Transaction ID : VNV49A08A

Amount of Each Disbursement this Period: 37.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 69.75

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. VistaPrint**

Full Name (Last, First, Middle Initial)

Mailing Address 45 Victoria St

City Hamilton ON Canada State ZZ Zip Code 00000

Purpose of Disbursement Printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2019

FEC Identification Number: C

Transaction ID : VNV49A08A2

Amount of Each Disbursement this Period: 79.76

Memo Item

**B. VistaPrint**

Full Name (Last, First, Middle Initial)

Mailing Address 45 Victoria St

City Hamilton ON Canada State ZZ Zip Code 00000

Purpose of Disbursement Printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 08 / 2019

FEC Identification Number: C

Transaction ID : VNV49A08A3

Amount of Each Disbursement this Period: 60.85

Memo Item

**C. VistaPrint**

Full Name (Last, First, Middle Initial)

Mailing Address 45 Victoria St

City Hamilton ON Canada State ZZ Zip Code 00000

Purpose of Disbursement Printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 13 / 2019

FEC Identification Number: C

Transaction ID : VNV49A08A4

Amount of Each Disbursement this Period: 75.90

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 216.51

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Witeck Communications</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 01 / 2019  |
| Mailing Address 2120 L St NW<br>Ste 850   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A08A9</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 487.50 |
| City<br>Washington  | State<br>DC  | Zip Code<br>20037-1550  |
| Purpose of Disbursement<br>Rent   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Witeck Communications</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 23 / 2019  |
| Mailing Address 2120 L St NW<br>Ste 850   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A08AA</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 487.50 |
| City<br>Washington  | State<br>DC  | Zip Code<br>20037-1550  |
| Purpose of Disbursement<br>Rent   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Witeck Communications</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019  |
| Mailing Address 2120 L St NW<br>Ste 850   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VNV49A08Ae</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 337.50 |
| City<br>Washington  | State<br>DC  | Zip Code<br>20037-1550  |
| Purpose of Disbursement<br>Rent   |  | Category/<br>Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|  |                    |
|--|--------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 1312.50 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

|  |             |  |
|--|-------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Witeck Communications</b>   |             | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019   |
| Mailing Address 2120 L St NW<br>Ste 850  |             | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A08A7</b><br>Amount of Each Disbursement this Period<br>337.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC |  |
| Zip Code<br>20037-1550   |             | Category/<br>Type  |
| Purpose of Disbursement<br>Rent  |             |  |
| Candidate Name   |             | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District:  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             |  |

|  |             |  |
|--|-------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Witeck Communications</b>   |             | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019   |
| Mailing Address 2120 L St NW<br>Ste 850  |             | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A08AB</b><br>Amount of Each Disbursement this Period<br>487.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC |  |
| Zip Code<br>20037-1550   |             | Category/<br>Type  |
| Purpose of Disbursement<br>Rent  |             |  |
| Candidate Name   |             | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District:  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             |  |

|  |             |  |
|--|-------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Witeck Communications</b>   |             | Date of Disbursement<br>MM / DD / YYYY<br>08 / 08 / 2019   |
| Mailing Address 2120 L St NW<br>Ste 850  |             | FEC Identification Number<br><b>C</b><br><b>Transaction ID : VNV49A08A8</b><br>Amount of Each Disbursement this Period<br>337.50<br>Non-contribution account<br><input type="checkbox"/> Memo Item |
| City<br>Washington   | State<br>DC |  |
| Zip Code<br>20037-1550   |             | Category/<br>Type  |
| Purpose of Disbursement<br>Rent  |             |  |
| Candidate Name   |             | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District:  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 1162.50 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

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

**A. Witeck Communications**

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW  
Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 23 / 2019

FEC Identification Number: C

Transaction ID : VNV49A08AC

Amount of Each Disbursement this Period: 487.50

Memo Item

**B. Witeck Communications**

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW  
Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A08AD

Amount of Each Disbursement this Period: 487.50

Memo Item

**C. Witeck Communications**

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW  
Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C

Transaction ID : VNV49A08Ae

Amount of Each Disbursement this Period: 487.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1462.50

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Witeck Communications**

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW  
Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

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

State: District:

Date of Disbursement: 10 / 31 / 2019

FEC Identification Number: C

Transaction ID : VNV49A08AF

Amount of Each Disbursement this Period: 487.50

Memo Item

**B. Witeck Communications**

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW  
Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

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

State: District:

Date of Disbursement: 11 / 26 / 2019

FEC Identification Number: C

Transaction ID : VNV49A08AG

Amount of Each Disbursement this Period: 487.50

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

|  |           |
|--|-----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 975.00    |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 151295.64 |