

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
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

ADDRESS (number and street) 430 SOUTH CAPITOL STREET SE
Check if different than previously reported. (ACC) WASHINGTON DC 20003

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00460147
3. IS THIS REPORT NEW OR AMENDED (N) (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special
(d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 02 / 01 / 2017 through 02 / 28 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Derrough, William, , ,
Type or Print Name of Treasurer

Signature of Treasurer Derrough, William, , , [Electronically Filed] Date 03 / 17 / 2017

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		1033178.78
(b) Cash on Hand at Beginning of Reporting Period.....	264173.17	
(c) Total Receipts (from Line 19)	3598.15	68623.90
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	267771.32	1101802.68
7. Total Disbursements (from Line 31).....	87297.39	921328.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	180473.93	180473.93
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
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).....	3598.15	68623.90
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	3598.15	68623.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3598.15	68623.90

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	87297.39	921328.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	87297.39	921328.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	87297.39	921328.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	87297.39	921328.75

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	87297.39	921328.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3598.15	68623.90
38. Net Operating Expenditures (subtract Line 37 from Line 36)	83699.24	852704.85

**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 54
<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 checked="" type="checkbox"/> 15	<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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A. Democratic Senatorial Campaign Committee

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

Mailing Address 120 Maryland Avenue, NE

City Washington	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00042366

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3598.15

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		28		2017

Transaction ID : SA15-11983

Amount of Each Receipt this Period
3598.15

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	/	D D	/	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	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3598.15
TOTAL This Period (last page this line number only).....	3598.15

**SCHEDULE B (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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Fogarty, Paula, A., ,			Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 1299 Pennsylvania Ave, NW Suite 800				
City Washington	State DC	Zip Code 20004		
Purpose of Disbursement Airline Baggage Fees		Category/Type <input type="checkbox"/>		
Candidate Name			FEC Identification Number C	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:			Transaction ID : SB21B-11840 Amount of Each Disbursement this Period -50.00 <input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) B. Fogarty, Paula, A., ,			Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 1299 Pennsylvania Ave, NW Suite 800				
City Washington	State DC	Zip Code 20004		
Purpose of Disbursement Advance Logistics Services		Category/Type <input type="checkbox"/>		
Candidate Name			FEC Identification Number C	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:			Transaction ID : SB21B-11841 Amount of Each Disbursement this Period -1000.00 <input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) C. Fogarty, Paula, A., ,			Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 1299 Pennsylvania Ave, NW Suite 800				
City Washington	State DC	Zip Code 20004		
Purpose of Disbursement Travel Taxi/Public/POV		Category/Type <input type="checkbox"/>		
Candidate Name			FEC Identification Number C	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:			Transaction ID : SB21B-1184; Amount of Each Disbursement this Period -9.97 <input type="checkbox"/> Memo Item	
SUBTOTAL of Disbursements This Page (optional)..... ▶			-1059.97	
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Denbo, James, R., ,			Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 6006 Overlea Road				
City Bethesda	State MD	Zip Code 20816		
Purpose of Disbursement Advance Logistics Services		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11843 Amount of Each Disbursement this Period 750.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) B. Denbo, James, R., ,			Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 6006 Overlea Road				
City Bethesda	State MD	Zip Code 20816		
Purpose of Disbursement Travel Taxi/Public/POV		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11844 Amount of Each Disbursement this Period 50.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) C. Denbo, James, R., ,			Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 6006 Overlea Road				
City Bethesda	State MD	Zip Code 20816		
Purpose of Disbursement Travel Fuel		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11844 Amount of Each Disbursement this Period 5.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			805.60	
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Dundas, Michael, J., ,			Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 1838 Alsace Avenue				
City Los Angeles	State CA	Zip Code 90019		
Purpose of Disbursement Advance Logistics Services		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11846 Amount of Each Disbursement this Period 1000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) B. Eckert, Brittny, , ,			Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 400 South Hobart Blvd #304				
City Los Angeles	State CA	Zip Code 90020		
Purpose of Disbursement Advance Logistics Services		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11847 Amount of Each Disbursement this Period 750.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) C. Eckert, Brittny, , ,			Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 400 South Hobart Blvd #304				
City Los Angeles	State CA	Zip Code 90020		
Purpose of Disbursement Travel Taxi/Public/POV		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11848 Amount of Each Disbursement this Period 69.30	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			1819.30	
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Fogarty, Paula, A., ,		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 1299 Pennsylvania Ave, NW Suite 800		FEC Identification Number C [] Transaction ID : SB21B-11849 Amount of Each Disbursement this Period 50.00	
City Washington	State DC	Zip Code 20004	Category/ Type []
Purpose of Disbursement Airline Baggage Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Fogarty, Paula, A., ,		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 1299 Pennsylvania Ave, NW Suite 800		FEC Identification Number C [] Transaction ID : SB21B-11850 Amount of Each Disbursement this Period 1000.00	
City Washington	State DC	Zip Code 20004	Category/ Type []
Purpose of Disbursement Advance Logistics Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Fogarty, Paula, A., ,		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 1299 Pennsylvania Ave, NW Suite 800		FEC Identification Number C [] Transaction ID : SB21B-11851 Amount of Each Disbursement this Period 9.97	
City Washington	State DC	Zip Code 20004	Category/ Type []
Purpose of Disbursement Travel Taxi/Public/POV		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

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

1059.97

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Greelish, David, , ,		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 33 Howard Street, #3		FEC Identification Number C [] Transaction ID : SB21B-11852 Amount of Each Disbursement this Period [] 1125.00	
City Newport	State RI	Zip Code 02840	Category/ Type []
Purpose of Disbursement Advance Logistics Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
Full Name (Last, First, Middle Initial) B. Greelish, David, , ,		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 33 Howard Street, #3		FEC Identification Number C [] Transaction ID : SB21B-11853 Amount of Each Disbursement this Period [] 100.00	
City Newport	State RI	Zip Code 02840	Category/ Type []
Purpose of Disbursement Travel Taxi/Public/POV		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
Full Name (Last, First, Middle Initial) C. Holliday, Christopher, , ,		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 1580 Madison, Apt#102		FEC Identification Number C [] Transaction ID : SB21B-11854 Amount of Each Disbursement this Period [] 1000.00	
City Oakland	State CA	Zip Code 94612	Category/ Type []
Purpose of Disbursement Advance Logistics Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 2225.00	
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Holliday, Christopher, , ,

Mailing Address 1580 Madison, Apt#102

City Oakland State CA Zip Code 94612

Purpose of Disbursement
Travel Parking

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11855
Amount of Each Disbursement this Period
206.26

Memo Item

Full Name (Last, First, Middle Initial)

B. Holliday, Christopher, , ,

Mailing Address 1580 Madison, Apt#102

City Oakland State CA Zip Code 94612

Purpose of Disbursement
Advance Logistics Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11856
Amount of Each Disbursement this Period
750.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Holliday, Christopher, , ,

Mailing Address 1580 Madison, Apt#102

City Oakland State CA Zip Code 94612

Purpose of Disbursement
Travel Parking

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11857
Amount of Each Disbursement this Period
160.29

Memo Item

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

1116.55

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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Kent, Jill, F. Bartscht, ,		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 6005 Washington Blvd.		FEC Identification Number C [] Transaction ID : SB21B-11858 Amount of Each Disbursement this Period [] 27.45	
City Arlington	State VA	Zip Code 22205	Category/ Type []
Purpose of Disbursement Travel Parking		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Long, Jeannie, R., ,		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 6038 Carlton Way, #203		FEC Identification Number C [] Transaction ID : SB21B-11859 Amount of Each Disbursement this Period [] 1000.00	
City Los Angeles	State CA	Zip Code 90028	Category/ Type []
Purpose of Disbursement Advance Logistics Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. McComb, John, Depke, ,		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 670 W Wayman St., Apt 403		FEC Identification Number C [] Transaction ID : SB21B-11861 Amount of Each Disbursement this Period [] 1125.00	
City Chicago	State IL	Zip Code 60661	Category/ Type []
Purpose of Disbursement Advance Logistics Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2152.45
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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Polenzani, Jennifer, Benson, ,		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 7918 Electra Drive		FEC Identification Number C [] Transaction ID : SB21B-11861 Amount of Each Disbursement this Period [] 500.00	
City Los Angeles	State CA	Zip Code 90046	Category/ Type []
Purpose of Disbursement Advance Logistics Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Handford, Benjamin, S., ,		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address 3021 Peggy Street		FEC Identification Number C [] Transaction ID : SB21B-11886 Amount of Each Disbursement this Period [] 875.00	
City Batesville	State AR	Zip Code 72501	Category/ Type []
Purpose of Disbursement Advance Logistics Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Handford, Benjamin, S., ,		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address 3021 Peggy Street		FEC Identification Number C [] Transaction ID : SB21B-11887 Amount of Each Disbursement this Period [] 65.94	
City Batesville	State AR	Zip Code 72501	Category/ Type []
Purpose of Disbursement Travel Fuel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1440.94
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Handford, Benjamin, S., ,		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address 3021 Peggy Street		FEC Identification Number C [] Transaction ID : SB21B-11888 Amount of Each Disbursement this Period [] 61.04	
City Batesville	State AR	Zip Code 72501	Category/ Type []
Purpose of Disbursement Travel Parking		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Enterprise Damage Recovery		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address PO Box 801770		FEC Identification Number C [] Transaction ID : SB21B-11889 Amount of Each Disbursement this Period [] 475.00	
City Kansas City	State MO	Zip Code 64180	Category/ Type []
Purpose of Disbursement Car Rental		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Murphy, Katherine, B., ,		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address 235 E. Blodgett		FEC Identification Number C [] Transaction ID : SB21B-11891 Amount of Each Disbursement this Period [] 11.30	
City Lake Bluff	State IL	Zip Code 60044	Category/ Type []
Purpose of Disbursement Travel Expense		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 547.34
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Murphy, Katherine, B., ,			Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address 235 E. Blodgett				
City Lake Bluff	State IL	Zip Code 60044		
Purpose of Disbursement Airline Baggage Fees		Category/Type <input type="checkbox"/>		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEC Identification Number C Transaction ID : SB21B-11891 Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) B. Murphy, Katherine, B., ,			Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address 235 E. Blodgett				
City Lake Bluff	State IL	Zip Code 60044		
Purpose of Disbursement Advance Logistics Services		Category/Type <input type="checkbox"/>		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEC Identification Number C Transaction ID : SB21B-11892 Amount of Each Disbursement this Period 875.00 <input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) C. Murphy, Katherine, B., ,			Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address 235 E. Blodgett				
City Lake Bluff	State IL	Zip Code 60044		
Purpose of Disbursement Travel Taxi/Public/POV		Category/Type <input type="checkbox"/>		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEC Identification Number C Transaction ID : SB21B-11893 Amount of Each Disbursement this Period 37.85 <input type="checkbox"/> Memo Item	
SUBTOTAL of Disbursements This Page (optional)..... ▶			937.85	
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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Sanders, Valentine, , ,		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address 104 East 81st St., Apt. 1H		FEC Identification Number C [] Transaction ID : SB21B-11894 Amount of Each Disbursement this Period [] 875.00	
City New York	State NY	Zip Code 10028	Category/ Type []
Purpose of Disbursement Advance Logistics Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Sanders, Valentine, , ,		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address 104 East 81st St., Apt. 1H		FEC Identification Number C [] Transaction ID : SB21B-11895 Amount of Each Disbursement this Period [] 89.58	
City New York	State NY	Zip Code 10028	Category/ Type []
Purpose of Disbursement Travel Taxi/Public/POV		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. BOLDUC, CHAD, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 281 Nevada Street		FEC Identification Number C [] Transaction ID : SB21B-11896 Amount of Each Disbursement this Period [] 194.99	
City San Francisco	State CA	Zip Code 94110	Category/ Type []
Purpose of Disbursement Travel Expense		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1159.57
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 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Broderick, Janice, A., ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 450 Lexington Avenue, #162				
City New York	State NY	Zip Code 10017		
Purpose of Disbursement Travel Expense		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11897 Amount of Each Disbursement this Period 27.75	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) B. Broderick, Janice, A., ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 450 Lexington Avenue, #162				
City New York	State NY	Zip Code 10017		
Purpose of Disbursement Travel Expense		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11898 Amount of Each Disbursement this Period 105.45	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) C. ERICKSON, LARS, W., ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1711 East Olive Way #115				
City Seattle	State WA	Zip Code 98102		
Purpose of Disbursement Travel Expense		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11899 Amount of Each Disbursement this Period 192.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			325.60	
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Flores, Tanya, Leigh, ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1838 Alsace Avenue				
City Los Angeles	State CA	Zip Code 90019		
Purpose of Disbursement Travel Expense		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11900 Amount of Each Disbursement this Period 33.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) B. Flores, Tanya, Leigh, ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1838 Alsace Avenue				
City Los Angeles	State CA	Zip Code 90019		
Purpose of Disbursement Travel Expense		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11901 Amount of Each Disbursement this Period 96.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) C. Flores, Tanya, Leigh, ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1838 Alsace Avenue				
City Los Angeles	State CA	Zip Code 90019		
Purpose of Disbursement Travel Expense		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-1190; Amount of Each Disbursement this Period 28.80	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			158.40	
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Flores, Tanya, Leigh, ,

Mailing Address 1838 Alsace Avenue

City
Los Angeles

State
CA

Zip Code
90019

Purpose of Disbursement
Airline Baggage Fees

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 : SB21B-11903
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Flores, Tanya, Leigh, ,

Mailing Address 1838 Alsace Avenue

City
Los Angeles

State
CA

Zip Code
90019

Purpose of Disbursement
Airline Baggage Fees

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 : SB21B-11904
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Flores, Tanya, Leigh, ,

Mailing Address 1838 Alsace Avenue

City
Los Angeles

State
CA

Zip Code
90019

Purpose of Disbursement
Airline Baggage Fees

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 : SB21B-1190!
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER: (check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Flores, Tanya, Leigh, ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017		
Mailing Address 1838 Alsace Avenue					
City Los Angeles	State CA	Zip Code 90019	FEC Identification Number C [] Transaction ID : SB21B-11906 Amount of Each Disbursement this Period [] 1.89		
Purpose of Disbursement Travel Fuel		Category/ Type []			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) B. Flores, Tanya, Leigh, ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017		
Mailing Address 1838 Alsace Avenue					
City Los Angeles	State CA	Zip Code 90019	FEC Identification Number C [] Transaction ID : SB21B-11907 Amount of Each Disbursement this Period [] 5.41		
Purpose of Disbursement Travel Fuel		Category/ Type []			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) C. Flores, Tanya, Leigh, ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017		
Mailing Address 1838 Alsace Avenue					
City Los Angeles	State CA	Zip Code 90019	FEC Identification Number C [] Transaction ID : SB21B-11908 Amount of Each Disbursement this Period [] 1.62		
Purpose of Disbursement Travel Fuel		Category/ Type []			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
SUBTOTAL of Disbursements This Page (optional)..... ▶			[] 8.92		
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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Flores, Tanya, Leigh, ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1838 Alsace Avenue		FEC Identification Number C [] Transaction ID : SB21B-11909 Amount of Each Disbursement this Period [] 0.07	
City Los Angeles	State CA	Zip Code 90019	Category/ Type []
Purpose of Disbursement Travel Parking		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Flores, Tanya, Leigh, ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1838 Alsace Avenue		FEC Identification Number C [] Transaction ID : SB21B-11910 Amount of Each Disbursement this Period [] 0.20	
City Los Angeles	State CA	Zip Code 90019	Category/ Type []
Purpose of Disbursement Travel Parking		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Flores, Tanya, Leigh, ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1838 Alsace Avenue		FEC Identification Number C [] Transaction ID : SB21B-11911 Amount of Each Disbursement this Period [] 0.06	
City Los Angeles	State CA	Zip Code 90019	Category/ Type []
Purpose of Disbursement Travel Parking		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.33
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Grace, Jennifer, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 4673 Bailey Road		FEC Identification Number C [] Transaction ID : SB21B-11912 Amount of Each Disbursement this Period [] 336.00	
City Dimondale	State MI	Zip Code 48821	Category/ Type []
Purpose of Disbursement Travel Expense		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
Full Name (Last, First, Middle Initial) B. Grace, Jennifer, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 4673 Bailey Road		FEC Identification Number C [] Transaction ID : SB21B-11913 Amount of Each Disbursement this Period [] 11.14	
City Dimondale	State MI	Zip Code 48821	Category/ Type []
Purpose of Disbursement Travel Taxi/Public/POV		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
Full Name (Last, First, Middle Initial) C. Graves, Donet, D., ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 6713 Tildenwood Lane		FEC Identification Number C [] Transaction ID : SB21B-11914 Amount of Each Disbursement this Period [] 3.36	
City North Bethesda	State MD	Zip Code 20852	Category/ Type []
Purpose of Disbursement Travel Expense		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 350.50	
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Graves, Donet, D., ,

Mailing Address 6713 Tildenwood Lane

City
North Bethesda

State
MD

Zip Code
20852

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11915
Amount of Each Disbursement this Period
[] 9.60

Memo Item

Full Name (Last, First, Middle Initial)

B. Graves, Donet, D., ,

Mailing Address 6713 Tildenwood Lane

City
North Bethesda

State
MD

Zip Code
20852

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11916
Amount of Each Disbursement this Period
[] 2.88

Memo Item

Full Name (Last, First, Middle Initial)

C. Graves, Donet, D., ,

Mailing Address 6713 Tildenwood Lane

City
North Bethesda

State
MD

Zip Code
20852

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11917
Amount of Each Disbursement this Period
[] 78.40

Memo Item

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

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

9	0	8	8
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Hart, Elizabeth, A., ,

Mailing Address 401 Massachusetts Ave, NW, #505

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11918
Amount of Each Disbursement this Period
2.88

Memo Item

Full Name (Last, First, Middle Initial)

B. Hart, Elizabeth, A., ,

Mailing Address 401 Massachusetts Ave, NW, #505

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Travel Taxi/Public/POV

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11919
Amount of Each Disbursement this Period
1.63

Memo Item

Full Name (Last, First, Middle Initial)

C. Holliday, Christopher, , ,

Mailing Address 1580 Madison, Apt#102

City
Oakland

State
CA

Zip Code
94612

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11921
Amount of Each Disbursement this Period
22.12

Memo Item

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

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

26.63

**SCHEDULE B (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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Holliday, Christopher, , ,

Mailing Address 1580 Madison, Apt#102

City Oakland State CA Zip Code 94612

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11921
Amount of Each Disbursement this Period
63.20

Memo Item

Full Name (Last, First, Middle Initial)

B. Holliday, Christopher, , ,

Mailing Address 1580 Madison, Apt#102

City Oakland State CA Zip Code 94612

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11922
Amount of Each Disbursement this Period
18.96

Memo Item

Full Name (Last, First, Middle Initial)

C. Holliday, Christopher, , ,

Mailing Address 1580 Madison, Apt#102

City Oakland State CA Zip Code 94612

Purpose of Disbursement
Travel Taxi/Public/POV

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

C
Transaction ID : SB21B-1192:
Amount of Each Disbursement this Period
9.26

Memo Item

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

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

91.42

**SCHEDULE B (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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Holliday, Christopher, , ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1580 Madison, Apt#102				
City Oakland	State CA	Zip Code 94612		
Purpose of Disbursement Travel Taxi/Public/POV		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11924 Amount of Each Disbursement this Period 26.44	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) B. Holliday, Christopher, , ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1580 Madison, Apt#102				
City Oakland	State CA	Zip Code 94612		
Purpose of Disbursement Travel Taxi/Public/POV		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11925 Amount of Each Disbursement this Period 7.93	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) C. Iridian Corp. Nicole Lynch			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 268 Smith Street, #4				
City Brooklyn	State NY	Zip Code 11231		
Purpose of Disbursement Travel Expense		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11926 Amount of Each Disbursement this Period 27.75	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			62.12	
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Iridian Corp. Nicole Lynch

Mailing Address 268 Smith Street, #4

City Brooklyn State NY Zip Code 11231

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11927
Amount of Each Disbursement this Period
105.45

Memo Item

Full Name (Last, First, Middle Initial)

B. Iridian Corp. Nicole Lynch

Mailing Address 268 Smith Street, #4

City Brooklyn State NY Zip Code 11231

Purpose of Disbursement
Travel Taxi/Public/POV

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11928
Amount of Each Disbursement this Period
4.05

Memo Item

Full Name (Last, First, Middle Initial)

C. Iridian Corp. Nicole Lynch

Mailing Address 268 Smith Street, #4

City Brooklyn State NY Zip Code 11231

Purpose of Disbursement
Travel Taxi/Public/POV

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11925
Amount of Each Disbursement this Period
15.37

Memo Item

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

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

124.87

**SCHEDULE B (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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Johnson, Virginia, , ,

Mailing Address c/o Houston Johnson
2131 10th St., NW, Unit 1

City Washington State DC Zip Code 20001

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11930
Amount of Each Disbursement this Period
200.76

Memo Item

Full Name (Last, First, Middle Initial)

B. Kantamneni, Divya, , ,

Mailing Address 407 N Fillmore Street

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11931
Amount of Each Disbursement this Period
288.60

Memo Item

Full Name (Last, First, Middle Initial)

C. Kantamneni, Divya, , ,

Mailing Address 407 N Fillmore Street

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11932
Amount of Each Disbursement this Period
168.35

Memo Item

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

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

657.71

**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 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Kantamneni, Divya, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 407 N Fillmore Street		FEC Identification Number C [] Transaction ID : SB21B-11933 Amount of Each Disbursement this Period [] 30.00	
City Arlington	State VA	Zip Code 22201	Category/ Type
Purpose of Disbursement Airline Baggage Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
Full Name (Last, First, Middle Initial) B. Kantamneni, Divya, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 407 N Fillmore Street		FEC Identification Number C [] Transaction ID : SB21B-11934 Amount of Each Disbursement this Period [] 17.50	
City Arlington	State VA	Zip Code 22201	Category/ Type
Purpose of Disbursement Airline Baggage Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
Full Name (Last, First, Middle Initial) C. Kantamneni, Divya, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 407 N Fillmore Street		FEC Identification Number C [] Transaction ID : SB21B-1193! Amount of Each Disbursement this Period [] 111.69	
City Arlington	State VA	Zip Code 22201	Category/ Type
Purpose of Disbursement Travel Taxi/Public/POV		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 159.19	
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Kantamneni, Divya, , ,

Mailing Address 407 N Fillmore Street

City
Arlington

State
VA

Zip Code
22201

Purpose of Disbursement
Travel Taxi/Public/POV

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11936
 Amount of Each Disbursement this Period
 [] 65.15

Memo Item

Full Name (Last, First, Middle Initial)

B. LAVENDER, BETSY, , ,

Mailing Address 1939 North Starr Drive

City
Fayetteville

State
AR

Zip Code
72701

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11937
 Amount of Each Disbursement this Period
 [] 247.80

Memo Item

Full Name (Last, First, Middle Initial)

C. LAVENDER, BETSY, , ,

Mailing Address 1939 North Starr Drive

City
Fayetteville

State
AR

Zip Code
72701

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11938
 Amount of Each Disbursement this Period
 [] 28.00

Memo Item

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

[] 340.95

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. LAVENDER, BETSY, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1939 North Starr Drive			
City Fayetteville	State AR	Zip Code 72701	
Purpose of Disbursement Travel Taxi/Public/POV		<input type="checkbox"/> Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) B. Leighton, Zachary, S., ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 111 Foxwood Drive			
City Jericho	State NY	Zip Code 11753	
Purpose of Disbursement Travel Expense		<input type="checkbox"/> Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) C. Leighton, Zachary, S., ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 111 Foxwood Drive			
City Jericho	State NY	Zip Code 11753	
Purpose of Disbursement Travel Expense		<input type="checkbox"/> Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶		216.98	
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Leighton, Zachary, S., ,

Mailing Address 111 Foxwood Drive

City
Jericho

State
NY

Zip Code
11753

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11942
Amount of Each Disbursement this Period
[] 26.96

Memo Item

Full Name (Last, First, Middle Initial)

B. Leighton, Zachary, S., ,

Mailing Address 111 Foxwood Drive

City
Jericho

State
NY

Zip Code
11753

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11943
Amount of Each Disbursement this Period
[] 3.50

Memo Item

Full Name (Last, First, Middle Initial)

C. Leighton, Zachary, S., ,

Mailing Address 111 Foxwood Drive

City
Jericho

State
NY

Zip Code
11753

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11944
Amount of Each Disbursement this Period
[] 10.00

Memo Item

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

[]	4	0	.	4	6
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TOTAL This Period (last page this line number only)..... ▶

[]	4	0	.	4	6
-----	---	---	---	---	---

**SCHEDULE B (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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Leighton, Zachary, S., ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 111 Foxwood Drive		FEC Identification Number C [] Transaction ID : SB21B-11945 Amount of Each Disbursement this Period [] 3.00	
City Jericho	State NY	Zip Code 11753	Category/ Type []
Purpose of Disbursement Airline Baggage Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Leighton, Zachary, S., ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 111 Foxwood Drive		FEC Identification Number C [] Transaction ID : SB21B-11946 Amount of Each Disbursement this Period [] 7.62	
City Jericho	State NY	Zip Code 11753	Category/ Type []
Purpose of Disbursement Travel Taxi/Public/POV		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Leighton, Zachary, S., ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 111 Foxwood Drive		FEC Identification Number C [] Transaction ID : SB21B-11947 Amount of Each Disbursement this Period [] 21.76	
City Jericho	State NY	Zip Code 11753	Category/ Type []
Purpose of Disbursement Travel Taxi/Public/POV		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 32.38
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 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Leighton, Zachary, S., ,

Mailing Address 111 Foxwood Drive

City
Jericho

State
NY

Zip Code
11753

Purpose of Disbursement
Travel Taxi/Public/POV

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	22	/	2017

FEC Identification Number

C []

Transaction ID : SB21B-11948

Amount of Each Disbursement this Period

[] 6.53

Memo Item

Full Name (Last, First, Middle Initial)

B. Martinez, Frankie, A., ,

Mailing Address 133 Leonard Street, Apt 4L

City
Brooklyn

State
NY

Zip Code
11206

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	22	/	2017

FEC Identification Number

C []

Transaction ID : SB21B-11949

Amount of Each Disbursement this Period

[] 24.05

Memo Item

Full Name (Last, First, Middle Initial)

C. Martinez, Frankie, A., ,

Mailing Address 133 Leonard Street, Apt 4L

City
Brooklyn

State
NY

Zip Code
11206

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	22	/	2017

FEC Identification Number

C []

Transaction ID : SB21B-11951

Amount of Each Disbursement this Period

[] 91.39

Memo Item

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

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

[] 121.97

[]

**SCHEDULE B (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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Mokros, Andrea, , ,

Mailing Address 643 N 5th Street, Apt 432

City
Minneapolis

State
MN

Zip Code
55401

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	22	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-11951
 Amount of Each Disbursement this Period
 [] 37.44

Memo Item

Full Name (Last, First, Middle Initial)

B. Mokros, Andrea, , ,

Mailing Address 643 N 5th Street, Apt 432

City
Minneapolis

State
MN

Zip Code
55401

Purpose of Disbursement
Travel Taxi/Public/POV

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	22	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-11952
 Amount of Each Disbursement this Period
 [] 8.55

Memo Item

Full Name (Last, First, Middle Initial)

C. Montoya, Jordan, R., ,

Mailing Address 1911 Hamersley Lane

City
Lincoln

State
CA

Zip Code
95648

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	22	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-1195:
 Amount of Each Disbursement this Period
 [] 149.11

Memo Item

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

[] 195.10

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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Reddy, Vinay, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1840 Vernon Street, NW, Unit 102		FEC Identification Number C [] Transaction ID : SB21B-11954 Amount of Each Disbursement this Period [] 3.36	
City Washington	State DC	Zip Code 20009	Category/ Type []
Purpose of Disbursement Travel Expense		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Reddy, Vinay, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1840 Vernon Street, NW, Unit 102		FEC Identification Number C [] Transaction ID : SB21B-11955 Amount of Each Disbursement this Period [] 9.60	
City Washington	State DC	Zip Code 20009	Category/ Type []
Purpose of Disbursement Travel Expense		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Reddy, Vinay, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1840 Vernon Street, NW, Unit 102		FEC Identification Number C [] Transaction ID : SB21B-11956 Amount of Each Disbursement this Period [] 2.88	
City Washington	State DC	Zip Code 20009	Category/ Type []
Purpose of Disbursement Travel Expense		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 15.84
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Reddy, Vinay, , ,

Mailing Address 1840 Vernon Street, NW, Unit 102

City
Washington

State
DC

Zip Code
20009

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11957
 Amount of Each Disbursement this Period
 [] 78.40

Memo Item

Full Name (Last, First, Middle Initial)

B. Rozenbaum, Zhanna, , ,

Mailing Address 1775 E. 18th Street, Apt 5A

City
Brooklyn

State
NY

Zip Code
11229

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11958
 Amount of Each Disbursement this Period
 [] 31.96

Memo Item

Full Name (Last, First, Middle Initial)

C. Rozenbaum, Zhanna, , ,

Mailing Address 1775 E. 18th Street, Apt 5A

City
Brooklyn

State
NY

Zip Code
11229

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11959
 Amount of Each Disbursement this Period
 [] 91.30

Memo Item

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

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

2	0	1	7
2	0	1	6

2	0	1	6
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Rozenbaum, Zhanna, , ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1775 E. 18th Street, Apt 5A				
City Brooklyn	State NY	Zip Code 11229		
Purpose of Disbursement Travel Expense		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11960 Amount of Each Disbursement this Period 27.39	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) B. Rozenbaum, Zhanna, , ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1775 E. 18th Street, Apt 5A				
City Brooklyn	State NY	Zip Code 11229		
Purpose of Disbursement Travel Taxi/Public/POV		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11961 Amount of Each Disbursement this Period 7.86	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) C. Rozenbaum, Zhanna, , ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1775 E. 18th Street, Apt 5A				
City Brooklyn	State NY	Zip Code 11229		
Purpose of Disbursement Travel Taxi/Public/POV		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11962 Amount of Each Disbursement this Period 22.46	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			57.71	
TOTAL This Period (last page this line number only)..... ▶				

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. Rozenbaum, Zhanna, , ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1775 E. 18th Street, Apt 5A				
City Brooklyn	State NY	Zip Code 11229		
Purpose of Disbursement Travel Taxi/Public/POV		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11963 Amount of Each Disbursement this Period 6.74	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) B. Rozenbaum, Zhanna, , ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1775 E. 18th Street, Apt 5A				
City Brooklyn	State NY	Zip Code 11229		
Purpose of Disbursement Travel Fuel		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11964 Amount of Each Disbursement this Period 0.64	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) C. Rozenbaum, Zhanna, , ,			Date of Disbursement MM / DD / YYYY 02 / 22 / 2017	
Mailing Address 1775 E. 18th Street, Apt 5A				
City Brooklyn	State NY	Zip Code 11229		
Purpose of Disbursement Travel Fuel		Category/ Type	FEC Identification Number C	
Candidate Name			Transaction ID : SB21B-11966 Amount of Each Disbursement this Period 1.83	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			9.21	
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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Rozenbaum, Zhanna, , ,

Mailing Address 1775 E. 18th Street, Apt 5A

City
Brooklyn

State
NY

Zip Code
11229

Purpose of Disbursement
Travel Fuel

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
0	2		2	2		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B-11966

Amount of Each Disbursement this Period

0.55

Memo Item

Full Name (Last, First, Middle Initial)

B. Sanders, Valentine, , ,

Mailing Address 104 East 81st St., Apt. 1H

City
New York

State
NY

Zip Code
10028

Purpose of Disbursement
Travel Expense

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
0	2		2	2		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B-11967

Amount of Each Disbursement this Period

31.45

Memo Item

Full Name (Last, First, Middle Initial)

C. Sanders, Valentine, , ,

Mailing Address 104 East 81st St., Apt. 1H

City
New York

State
NY

Zip Code
10028

Purpose of Disbursement
Travel Expense

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
0	2		2	2		2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B-11968

Amount of Each Disbursement this Period

119.51

Memo Item

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

151.51

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 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Sanders, Valentine, , ,

Mailing Address 104 East 81st St., Apt. 1H

City
New York

State
NY

Zip Code
10028

Purpose of Disbursement
Travel Taxi/Public/POV

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B-11969

Amount of Each Disbursement this Period

8.86

Memo Item

Full Name (Last, First, Middle Initial)

B. Sanders, Valentine, , ,

Mailing Address 104 East 81st St., Apt. 1H

City
New York

State
NY

Zip Code
10028

Purpose of Disbursement
Travel Taxi/Public/POV

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B-11970

Amount of Each Disbursement this Period

33.66

Memo Item

Full Name (Last, First, Middle Initial)

C. Schrum, E., Michael, ,

Mailing Address 433 15th Street, NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B-11971

Amount of Each Disbursement this Period

3.36

Memo Item

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

45.88

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Schrum, E., Michael, ,

Mailing Address 433 15th Street, NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11972
 Amount of Each Disbursement this Period
 [] 9.60

Memo Item

Full Name (Last, First, Middle Initial)

B. Schrum, E., Michael, ,

Mailing Address 433 15th Street, NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11973
 Amount of Each Disbursement this Period
 [] 2.88

Memo Item

Full Name (Last, First, Middle Initial)

C. Schrum, E., Michael, ,

Mailing Address 433 15th Street, NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B-11974
 Amount of Each Disbursement this Period
 [] 78.40

Memo Item

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

[] 90.88

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Schrum, E., Michael, ,

Mailing Address 433 15th Street, NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	22	/	2017

FEC Identification Number

C

Transaction ID : SB21B-11975

Amount of Each Disbursement this Period

6.48

Memo Item

Full Name (Last, First, Middle Initial)

B. Schrum, E., Michael, ,

Mailing Address 433 15th Street, NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	22	/	2017

FEC Identification Number

C

Transaction ID : SB21B-11976

Amount of Each Disbursement this Period

24.61

Memo Item

Full Name (Last, First, Middle Initial)

C. Schultz, Gregory, , ,

Mailing Address 2125 14th Street, NW, Apt 315

City
Washington

State
DC

Zip Code
20009

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	22	/	2017

FEC Identification Number

C

Transaction ID : SB21B-11977

Amount of Each Disbursement this Period

3.36

Memo Item

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

34.45

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Schultz, Gregory, , ,

Mailing Address 2125 14th Street, NW, Apt 315

City
Washington

State
DC

Zip Code
20009

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : **SB21B-11978**
Amount of Each Disbursement this Period
[] 9.60

Memo Item

Full Name (Last, First, Middle Initial)

B. Schultz, Gregory, , ,

Mailing Address 2125 14th Street, NW, Apt 315

City
Washington

State
DC

Zip Code
20009

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : **SB21B-11979**
Amount of Each Disbursement this Period
[] 2.88

Memo Item

Full Name (Last, First, Middle Initial)

C. Schultz, Gregory, , ,

Mailing Address 2125 14th Street, NW, Apt 315

City
Washington

State
DC

Zip Code
20009

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : **SB21B-11981**
Amount of Each Disbursement this Period
[] 78.40

Memo Item

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

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

9	0	8	8
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Schultz, Gregory, , ,

Mailing Address 2125 14th Street, NW, Apt 315

City
Washington

State
DC

Zip Code
20009

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	22	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-11981
 Amount of Each Disbursement this Period
 [] 5.55

Memo Item

Full Name (Last, First, Middle Initial)

B. Schultz, Gregory, , ,

Mailing Address 2125 14th Street, NW, Apt 315

City
Washington

State
DC

Zip Code
20009

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	22	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-11982
 Amount of Each Disbursement this Period
 [] 21.09

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P O BOX 1270

City
NEWARK

State
NJ

Zip Code
07101

Purpose of Disbursement
Travel Agent fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-11984
 Amount of Each Disbursement this Period
 [] 175.84

See Attached Memo Entry

Memo Item

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

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

[] 202.48

[]

**SCHEDULE B (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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. DEPARTMENT OF TREASURY

Mailing Address P.O. BOX 27800

City
WASHINGTON

State
DC

Zip Code
20038-7800

Purpose of Disbursement
Travel Agent fee

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
0	2		2	7		2	0	1	7		

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-11984
Amount of Each Disbursement this Period
[REDACTED] 152.82

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P O BOX 1270

City
NEWARK

State
NJ

Zip Code
07101

Purpose of Disbursement
Travel Expense

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
0	2		2	7		2	0	1	7		

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-11989
Amount of Each Disbursement this Period
[REDACTED] -45.83
See Attached Memo Entry

Memo Item

Full Name (Last, First, Middle Initial)

C. DEPARTMENT OF TREASURY

Mailing Address P.O. BOX 27800

City
WASHINGTON

State
DC

Zip Code
20038-7800

Purpose of Disbursement
Travel Expense

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
0	2		2	7		2	0	1	7		

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-11988
Amount of Each Disbursement this Period
[REDACTED] -20.79
Memo Entry

Memo Item

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

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

[REDACTED]	-45.83
[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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P O BOX 1270

City
NEWARK

State
NJ

Zip Code
07101

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-11991
Amount of Each Disbursement this Period
[] 2671.88

Memo Item See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Boulevard

City
Fort Worth

State
TX

Zip Code
76155

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-11991
Amount of Each Disbursement this Period
[] -3685.17

Memo Item Memo Entry

Full Name (Last, First, Middle Initial)

C. Delta Air Lines, Inc.

Mailing Address 1030 Delta Boulevard

City
Atlanta

State
GA

Zip Code
30320

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-11991
Amount of Each Disbursement this Period
[] -3863.00

Memo Item Memo Entry

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

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

[] 2671.88

[]

**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 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. DEPARTMENT OF TREASURY

Mailing Address P.O. BOX 27800

City
WASHINGTON

State
DC

Zip Code
20038-7800

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-11991

Amount of Each Disbursement this Period

[REDACTED] 12564.60

Memo Entry

Memo Item

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 77 W. Wacker Drive

City
Chicago

State
IL

Zip Code
60601

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-11991

Amount of Each Disbursement this Period

[REDACTED] -2344.55

Memo Entry

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P O BOX 1270

City
NEWARK

State
NJ

Zip Code
07101

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-11991

Amount of Each Disbursement this Period

[REDACTED] 40343.82

See Attached Memo Entry

Memo Item

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

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

[REDACTED] 40343.82

[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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Courtyard Columbia Downtown USC

Mailing Address 630 Assembly Street

City Columbia State SC Zip Code 29201

Purpose of Disbursement Lodging & Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11996
Amount of Each Disbursement this Period
7963.24

Memo Entry
 Memo Item

Full Name (Last, First, Middle Initial)

B. Embassy Raleigh Durham

Mailing Address 201 Harrison Oaks Blvd

City Cary State NC Zip Code 27513

Purpose of Disbursement Lodging & Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11996
Amount of Each Disbursement this Period
5716.50

Memo Entry
 Memo Item

Full Name (Last, First, Middle Initial)

C. DEPARTMENT OF TREASURY

Mailing Address P.O. BOX 27800

City WASHINGTON State DC Zip Code 20038-7800

Purpose of Disbursement Lodging & Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11996
Amount of Each Disbursement this Period
8485.38

Memo Entry
 Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Hilton La Jolla Torrey Pines

Mailing Address 10950 N. Torrey Pines

City La Jolla State CA Zip Code 92037

Purpose of Disbursement Lodging & Catering

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11996
Amount of Each Disbursement this Period
8353.00

Memo Item

Full Name (Last, First, Middle Initial)

B. The Palmer House Hilton

Mailing Address 17 E Monroe Street

City Chicago State IL Zip Code 60603

Purpose of Disbursement Lodging & Catering

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11996
Amount of Each Disbursement this Period
6023.87

Memo Item

Full Name (Last, First, Middle Initial)

C. InterContinental New York Barclay

Mailing Address 111 East 48th Street

City New York State NY Zip Code 10017

Purpose of Disbursement Lodging & Catering

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2017

FEC Identification Number

C
Transaction ID : SB21B-11996
Amount of Each Disbursement this Period
3801.83

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P O BOX 1270

City
NEWARK

State
NJ

Zip Code
07101

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2017

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-12005
Amount of Each Disbursement this Period
[REDACTED] 18925.08

Memo Item See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. DEPARTMENT OF TREASURY

Mailing Address P.O. BOX 27800

City
WASHINGTON

State
DC

Zip Code
20038-7800

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2017

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-12005
Amount of Each Disbursement this Period
[REDACTED] -210.17

Memo Item Memo Entry

Full Name (Last, First, Middle Initial)

C. Budget Rent-A-Car

Mailing Address WB/Scranton Airport
100 Terminal Road, Lower Level

City
Avoca

State
PA

Zip Code
18641

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2017

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-1200!
Amount of Each Disbursement this Period
[REDACTED] 278.24

Memo Item Memo Entry

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

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

[REDACTED]	18925.08
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[REDACTED]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. PlatePass

Mailing Address 1150 N. Alma School Road

City Mesa State AZ Zip Code 85209

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-12005

Amount of Each Disbursement this Period

[REDACTED] 30.35

Memo Entry

Memo Item

Full Name (Last, First, Middle Initial)

B. Enterprise Rent-A-Car

Mailing Address PO Box 402383

City Atlanta State GA Zip Code 30384

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-12005

Amount of Each Disbursement this Period

[REDACTED] 18826.66

Memo Entry

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P O BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
White House Airlift Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-12006

Amount of Each Disbursement this Period

[REDACTED] 9278.68

See Attached Memo Entry

Memo Item

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

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

[REDACTED] 9278.68

[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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial) A. DEPARTMENT OF TREASURY		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address P.O. BOX 27800		FEC Identification Number C [REDACTED] Transaction ID : SB21B-12006 Amount of Each Disbursement this Period 9278.68
City WASHINGTON	State DC	Zip Code 20038-7800
Purpose of Disbursement White House Airlift Airfare		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address P O BOX 1270		FEC Identification Number C [REDACTED] Transaction ID : SB21B-12007 Amount of Each Disbursement this Period 6.00
City NEWARK	State NJ	Zip Code 07101
Purpose of Disbursement White House Airlift In-flight Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item See Attached Memo Entry	

Full Name (Last, First, Middle Initial) C. WHITE HOUSE AIRLIFT OPERATIONS		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address Eisenhower Exec Office Bldg Room 25		FEC Identification Number C [REDACTED] Transaction ID : SB21B-12007 Amount of Each Disbursement this Period 6.00
City Washington	State DC	Zip Code 20502
Purpose of Disbursement White House Airlift In-flight Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	6.00
TOTAL This Period (last page this line number only).....▶	87297.39