

# 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

Represent PAC

ADDRESS (number and street) PO Box 58432

Check if different than previously reported. (ACC) Philadelphia PA 19102

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

C C00571729

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

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

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

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

5. Covering Period M M / D D / Y Y Y Y Y Y 04 / 01 / 2017 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2017

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

Jacobs, Christine, , ,

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Jacobs, Christine, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 14 / 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.

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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Represent PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		<input type="text" value="3580.19"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="16729.39"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="38520.00"/>	<input type="text" value="61555.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="55249.39"/>	<input type="text" value="65135.19"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20568.45"/>	<input type="text" value="30454.25"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="34680.94"/>	<input type="text" value="34680.94"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Represent PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	37525.00	60550.00
(ii) Unitemized .....	995.00	1005.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	38520.00	61555.00
(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) .....	38520.00	61555.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	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)).....▶	38520.00	61555.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	38520.00	61555.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	4318.45	14204.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4318.45	14204.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	15000.00
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 .....	1250.00	1250.00
(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)).....	1250.00	1250.00
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)) ..	20568.45	30454.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20568.45	30454.25

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	38520.00	61555.00
34. Total Contribution Refunds (from Line 28(d)) .....	1250.00	1250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	37270.00	60305.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4318.45	14204.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4318.45	14204.25

**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 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Represent PAC**

**A. Weiner, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 221 Bainbridge St  
 City Philadelphia State PA Zip Code 19147-2312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Writer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt **05 / 20 / 2017**  
**Transaction ID : VPFCSN4X610**  
 Amount of Each Receipt this Period **500.00**  
 Memo Item

**B. Arkoosh, Valerie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 530 Spring Ln  
 City Glenside State PA Zip Code 19038-8413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Montgomery County PA Occupation (for Individual) Commissioner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1500.00**

Date of Receipt **04 / 28 / 2017**  
**Transaction ID : VPFCSN0S440**  
 Amount of Each Receipt this Period **500.00**  
 Memo Item

**C. Von Seldeneck, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2005 Market St Ste 3300  
 City Philadelphia State PA Zip Code 19103-7041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Diversified Search Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **05 / 18 / 2017**  
**Transaction ID : VPFCSN4M2F0**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Scanlon, Mary Gay, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 230 Park Ave  
 City Swarthmore State PA Zip Code 19081-1728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ballard Spahr Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : VPFCSN64W31**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Santamoor, Eryn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2318 Aspen St  
 City Philadelphia State PA Zip Code 19130-2502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) None  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : VPFCSN4XFA1**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Krain, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3400 Red Lion Rd Apt 6D  
 City Philadelphia State PA Zip Code 19114-1313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) City of Philadelphia Occupation (for Individual) Social Worker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : VPFCSN64VB1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Barr, Sharon, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 19 / 2017
Mailing Address 6500 Wissahickon Ave Apt 3L		<b>Transaction ID : VPFCSN4WYS1</b>
City Philadelphia	State PA	Zip Code 19119-3721
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Horstmann-Allen, Helen, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 17 / 2017
Mailing Address 440 Lombard St		<b>Transaction ID : VPFCSN4GR82</b>
City Philadelphia	State PA	Zip Code 19147-1517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) IC Group	Occupation (for Individual) Business Owner	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Storey, Bayard, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2017
Mailing Address 1919 Brandywine St		<b>Transaction ID : VPFCSN37XB2</b>
City Philadelphia	State PA	Zip Code 19130-3202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) University of Pennsylvania	Occupation (for Individual) Professor Emeritus	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER: PAGE 9 OF 23  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**Represent PAC**

**A. Bazon, Eileen, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3009 Foxx Ln  
City Philadelphia State PA Zip Code 19144-5405  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Bryn Mawr College Occupation (for Individual) Psychiatrist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 06 / 01 / 2017  
**Transaction ID : VPFCN787G2**  
Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Miller, Leslie Anne, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1111 Barberry Rd  
City Bryn Mawr State PA Zip Code 19010-1907  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 5000.00

Date of Receipt 05 / 03 / 2017  
**Transaction ID : VPFCN1RMN2**  
Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Frank, Marilyn, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1908 Spruce St Unit 1  
City Philadelphia State PA Zip Code 19103-6807  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Therapist Occupation (for Individual) Self  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 5000.00

Date of Receipt 05 / 01 / 2017  
**Transaction ID : VPFCN1DQ63**  
Amount of Each Receipt this Period 5000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 10500.00  
**TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 10 OF 23  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**Represent PAC**

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

Mailing Address 1021 W Hortter St

City Philadelphia	State PA	Zip Code 19119-3706
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

**Transaction ID : VPFC SN64W63**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 530 Spring Ln

City Glenside	State PA	Zip Code 19038-8413
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Montgomery County PA	Occupation (for Individual) Commissioner
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2017

**Transaction ID : VPFC SN6H873**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 1800 Mulberry St

City Scranton	State PA	Zip Code 18510-2369
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Executive
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

**Transaction ID : VPFC SN63FQ3**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Borgia, Vicky, , ,</b>			Date of Receipt MM / DD / YYYY 05 / 18 / 2017
Mailing Address 1018 Fitzwater St			<b>Transaction ID : VPFCSN4M2W3</b>
City Philadelphia	State PA	Zip Code 19147-2725	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self		Occupation (for Individual) Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Frank, Marilyn, , ,</b>			Date of Receipt MM / DD / YYYY 05 / 18 / 2017
Mailing Address 1908 Spruce St Unit 1			<b>Transaction ID : VPFCSN4KJ24</b>
City Philadelphia	State PA	Zip Code 19103-6807	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Therapist		Occupation (for Individual) Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Ewing, William, , ,</b>			Date of Receipt MM / DD / YYYY 05 / 17 / 2017
Mailing Address 510 E Mount Pleasant Ave			<b>Transaction ID : VPFCSN4GJ64</b>
City Philadelphia	State PA	Zip Code 19119-1232	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self Employed		Occupation (for Individual) Arbitrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**Represent PAC**

**A. Lunkenheimer, Ashley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1960 Dog Kennel Rd  
 City Media State PA Zip Code 19063-1008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AmeriHealth Caritas Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2017  
**Transaction ID : VPFCSN4GR74**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Feldman, Michelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9679 Pine Rd  
 City Philadelphia State PA Zip Code 19115-2747  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Keep Philadelphia Beautiful Occupation (for Individual) Executive Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2017  
**Transaction ID : VPFCSN4DE94**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. McAleer, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 518 E Murdoch Rd  
 City Philadelphia State PA Zip Code 19119-1026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Melior Group Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : VPFCSN64VX4**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Represent PAC**

**A. Carroll, Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 S 15th St  
 Ph P301  
 City Philadelphia State PA Zip Code 19102-3011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Anheuser-Busch Occupation (for Individual) Planning Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt 06 / 19 / 2017  
**Transaction ID : VPFCSN9TV45**  
 Amount of Each Receipt this Period 425.00  
 Memo Item

**B. West, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2215 Rittenhouse Sq  
 City Philadelphia State PA Zip Code 19103-5504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2017  
**Transaction ID : VPFCSN3WYK5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Jampoler, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43351 Spinks Ferry Rd  
 City Leesburg State VA Zip Code 20176-5631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : VPFCSN4XHR5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	925.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 14 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Uebler, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 518 Newtown Rd  
 City Berwyn State PA Zip Code 19312-2017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Greenblatt Pierce Funt & Flores LLC Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2017  
**Transaction ID : VPFCSN3WTR5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Carroll, Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 S 15th St Ph P301  
 City Philadelphia State PA Zip Code 19102-3011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Anheuser-Busch Occupation (for Individual) Planning Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 04 / 19 / 2017  
**Transaction ID : VPFCSMZPJV5**  
 Amount of Each Receipt this Period 425.00  
 Memo Item

**C. Rodgers, Teresa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 567 W Hartwell Ln  
 City Philadelphia State PA Zip Code 19118-4112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Harp-Weaver LLC Occupation (for Individual) Philanthropy Advisor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 17 / 2017  
**Transaction ID : VPFCSN4GR66**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 1675.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Sheerr, Betsy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 225 S 4th St  
 Apt 205  
 City Philadelphia State PA Zip Code 19106-3823  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sheerr Communications, Inc. Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 06 / 09 / 2017  
**Transaction ID : VPFC SN8BQK6**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Squires, Bonnie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 Arthurs Round Table  
 City Wynnewood State PA Zip Code 19096-1202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Squires Consulting Occupation (for Individual) Communications Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : VPFC SN64VQ6**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Cassanelli, Susan, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 426 Greenview Ln  
 City Havertown State PA Zip Code 19083-4317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) C & R Laboratory Equipment Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : VPFC SN64VW6**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Haas Gravagno, Carole, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1830 Rittenhouse Sq  
 City Philadelphia State PA Zip Code 19103-5802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Philanthropist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : VPFCSN64VD7**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**B. Lanham, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 230 Spruce St  
 City Philadelphia State PA Zip Code 19106-4322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 18 / 2017  
**Transaction ID : VPFCSN4HDH7**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Carroll, Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 S 15th St Ph P301  
 City Philadelphia State PA Zip Code 19102-3011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Anheuser-Busch Occupation (for Individual) Planning Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2125.00

Date of Receipt 05 / 19 / 2017  
**Transaction ID : VPFCSN4QEP7**  
 Amount of Each Receipt this Period 425.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2925.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Mailing Address 233 S 6th St  
Apt 309

City Philadelphia	State PA	Zip Code 19106-3750
----------------------	-------------	------------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) None
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 06 / 2017

**Transaction ID : VPFC SN7ZKB8**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 1424 S 19th St

City Philadelphia	State PA	Zip Code 19146-4656
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Philadelphia City Council	Occupation (for Individual) Director of Communications
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2017

**Transaction ID : VPFC SN4X5F8**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 530 Spring Ln

City Glenside	State PA	Zip Code 19038-8413
------------------	-------------	------------------------

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

Name of Employer (for Individual) Montgomery County PA	Occupation (for Individual) Commissioner
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2017

**Transaction ID : VPFC SNBGKH8**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Bonin, Adam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 530 S 2nd St  
 Apt 501  
 City Philadelphia State PA Zip Code 19147-2421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5500.00**

Date of Receipt **05 / 19 / 2017**  
**Transaction ID : VPFC SN4T3T8**  
 Amount of Each Receipt this Period **500.00**  
 Memo Item

**B. Buttenwieser, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8325 Saint Martins Ln  
 City Philadelphia State PA Zip Code 19118-4122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt **05 / 22 / 2017**  
**Transaction ID : VPFC SN64W89**  
 Amount of Each Receipt this Period **5000.00**  
 Memo Item

**C. Jacobs, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 240 Spruce St  
 City Philadelphia State PA Zip Code 19106-4322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **06 / 07 / 2017**  
**Transaction ID : VPFC SN849M9**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>6500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 19 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 122 W Laurel St

City Philadelphia    State PA    Zip Code 19123-2307

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

Name of Employer (for Individual) AFSC    Occupation (for Individual) Associate General Secretary

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2017

**Transaction ID : VPFC SN4XBY9**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address

City    State    Zip Code

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City    State    Zip Code

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	37525.00

**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)

**Represent PAC**

Full Name (Last, First, Middle Initial)

**A. SAGE Payment Solutions**

Mailing Address 1750 Old Meadow Rd  
Ste 300

City McLean State VA Zip Code 22102-4304

Purpose of Disbursement  
Credit Card Processing

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 02 / 2017

FEC Identification Number

C  
Transaction ID : VPEDHA5HW  
Amount of Each Disbursement this Period  
401.87

Memo Item

Full Name (Last, First, Middle Initial)

**B. PNC Bank**

Mailing Address 1600 Market St

City Philadelphia State PA Zip Code 19103-7240

Purpose of Disbursement  
Bank Fees

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2017

FEC Identification Number

C  
Transaction ID : VPEDHA5HW  
Amount of Each Disbursement this Period  
50.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. The Acorn Club**

Mailing Address 1519 Locust St

City Philadelphia State PA Zip Code 19102-3701

Purpose of Disbursement  
Event Expense

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 25 / 2017

FEC Identification Number

C  
Transaction ID : VPEDHA5AZ  
Amount of Each Disbursement this Period  
3204.00

Memo Item

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

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

3655.87

**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)

**Represent PAC**

Full Name (Last, First, Middle Initial)

**A. SAGE Payment Solutions**

Mailing Address 1750 Old Meadow Rd  
Ste 300

City  
McLean

State  
VA

Zip Code  
22102-4304

Purpose of Disbursement  
Credit Card Processing

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	5		0	2		2	0	1	7

FEC Identification Number

**C**

**Transaction ID : VPEDHA5HW**

Amount of Each Disbursement this Period

31.58

Memo Item

Full Name (Last, First, Middle Initial)

**B. PNC Bank**

Mailing Address 1600 Market St

City  
Philadelphia

State  
PA

Zip Code  
19103-7240

Purpose of Disbursement  
Bank 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	5		3	1		2	0	1	7

FEC Identification Number

**C**

**Transaction ID : VPEDHA5HW**

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. NGP VAN, Inc**

Mailing Address 1101 15th St NW  
Ste 500

City  
Washington

State  
DC

Zip Code  
20005-5006

Purpose of Disbursement  
Database 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
0	5		0	9		2	0	1	7

FEC Identification Number

**C**

**Transaction ID : VPEDHA5AZ**

Amount of Each Disbursement this Period

447.00

Memo Item

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

528.58

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

4184.45

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Klobuchar for Minnesota</b>			Date of Disbursement MM / DD / YYYY 06 / 01 / 2017	
Mailing Address PO Box 4146			FEC Identification Number C00431353 <b>Transaction ID : VPEDHA5BF</b> Amount of Each Disbursement this Period 5000.00	
City Saint Paul	State MN	Zip Code 55104-0146	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contribution		Category/Type		
Candidate Name <b>KLOBUCHAR, AMY, , ,</b>				
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MN	District: 00			

Full Name (Last, First, Middle Initial) <b>B. Gillibrand for Senate</b>			Date of Disbursement MM / DD / YYYY 05 / 22 / 2017	
Mailing Address 126 C St NW FI 2			FEC Identification Number C00413914 <b>Transaction ID : VPEDHA5AZ</b> Amount of Each Disbursement this Period 5000.00	
City Washington	State DC	Zip Code 20001-2132	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contribution		Category/Type		
Candidate Name <b>GILLIBRAND, KIRSTEN ELIZABETH, , ,</b>				
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY	District: 00			

Full Name (Last, First, Middle Initial) <b>C. Massachusetts Wisconsin Victory Fund 2018</b>			Date of Disbursement MM / DD / YYYY 05 / 08 / 2017	
Mailing Address 918 Pennsylvania Ave SE			FEC Identification Number C00633073 <b>Transaction ID : VPEDHA5AZ</b> Amount of Each Disbursement this Period 5000.00	
City Washington	State DC	Zip Code 20003-2140	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contribution		Category/Type		
Candidate Name <b>Massachusetts Wisconsin Victory Fund 2018</b>				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

**Represent PAC**

Full Name (Last, First, Middle Initial)

**A. Santamoore, Eryn, , ,**

Mailing Address 2318 Aspen St

City Philadelphia

State PA

Zip Code 19130-2502

Purpose of Disbursement Refund

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	5		2	5		2	0	1	7

FEC Identification Number

**C** [Redacted]

**Transaction ID : VPEDHA5AZ!**  
Amount of Each Disbursement this Period

[Redacted] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bonin, Adam, , ,**

Mailing Address 530 S 2nd St  
Apt 501

City Philadelphia

State PA

Zip Code 19147-2421

Purpose of Disbursement Refund

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	5		2	5		2	0	1	7

FEC Identification Number

**C** [Redacted]

**Transaction ID : VPEDHA5AZ!**  
Amount of Each Disbursement this Period

[Redacted] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Frank, Marilyn, , ,**

Mailing Address 1908 Spruce St  
Unit 1

City Philadelphia

State PA

Zip Code 19103-6807

Purpose of Disbursement Refund

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	6		3	0		2	0	1	7

FEC Identification Number

**C** [Redacted]

**Transaction ID : VPEDHA5HX**  
Amount of Each Disbursement this Period

[Redacted] 250.00

Memo Item

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

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

[Redacted] 1250.00

[Redacted] 1250.00