

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO BOX 76940  
Suite 800  
Washington DC 20013  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00519413 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on **11** / **06** / **2018** in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period **10** / **01** / **2018** through **10** / **17** / **2018**

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

Signature of Treasurer *Robasciotti, Rachel, , ,* [Electronically Filed] Date **12** / **06** / **2018**

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**

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Page 2

Write or Type Committee Name

L 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="2018"/>	<input type="text" value=""/>	<input type="text" value="85991.45"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="78167.31"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="82501.00"/>	<input type="text" value="802676.93"/>
(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="160668.31"/>	<input type="text" value="888668.38"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="50581.01"/>	<input type="text" value="778581.08"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="110087.30"/>	<input type="text" value="110087.30"/>
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

**L PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2018 To: M M / D D / Y Y Y Y 10 / 17 / 2018

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).....	43308.00	170423.00
(ii) Unitemized .....	3093.00	17757.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	46401.00	188180.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	46401.00	193180.50
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.).....	36100.00	609496.43
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)).....▶	82501.00	802676.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	82501.00	802676.93

**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 .....	6907.40	18791.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6907.40	18791.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	27000.00
24. Independent Expenditures (use Schedule E) .....	3750.00	23750.00
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	3450.00
(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	3450.00
29. Other Disbursements (Including Non-Federal Donations).....	30923.61	705589.59
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)) ..	50581.01	778581.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50581.01	778581.08

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	46401.00	193180.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	3450.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	46401.00	189730.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6907.40	18791.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6907.40	18791.49

: 97 `A-G79 @C5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

This report contains MEMO entries under Line 21(b) of Schedule B to describe the portion of administrative expenses itemized under Line 29 of Schedule B that were attributable to the committee's contribution account due to the relative financial activity between the committee's contribution and non-contribution accounts. Consistent with the stipulated judgment in Carey v. FEC, a transfer from the contribution account to the non-contribution account was made to cover these administrative expenses. MEMO entries were then used to report the portion of the administrative expenses attributable to the non-contribution account under Line 21(b) in order to avoid double-counting the disbursements on the report's summary pages.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 36
<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)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Abbott, Nancy, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2018
Mailing Address 394 Commercial St Unit 1		<b>Transaction ID : VNW3HGD7GY4</b>
City Provincetown	State MA	Zip Code 02657-2319
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Allman, Cindy, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2018
Mailing Address 70 Tuttle Rd		<b>Transaction ID : VNW3HGCKE48</b>
City Watchung	State NJ	Zip Code 07069-6114
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Newmark	Occupation (for Individual) Education	<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. Berk, Donna, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2018
Mailing Address 304 Halsey Ave Unit C		<b>Transaction ID : VNW3HGCKE64</b>
City Seaside Heights	State NJ	Zip Code 08751-1660
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Emericin	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 ▼ 600.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Berk, Donna, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 11 / 2018
Mailing Address 304 Halsey Ave Unit C		<b>Transaction ID : VNW3HGCWVP1</b>
City Seaside Heights	State NJ	Zip Code 08751-1660
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Emerclin	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 ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Clarson, Jennifer, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2018
Mailing Address 212 Main St FI 2		<b>Transaction ID : VNW3HGGR667</b>
City Northampton	State MA	Zip Code 01060-3583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) NPS	Occupation (for Individual) Librarian	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Emes, Radley, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 16 / 2018
Mailing Address 1441 Q St NW		<b>Transaction ID : VNW3HGD6SG6</b>
City Washington	State DC	Zip Code 20009-3807
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Self	Occupation (for Individual) Landlord/Property Manager	<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).....▶	5600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Fitzpatrick, Maggie, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2018
Mailing Address 2023 Allen Pl NW			<b>Transaction ID : VNW3HGCDX93</b>
City Washington	State DC	Zip Code 20009-5273	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Exelon		Occupation (for Individual) Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Fust, Matthew, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2018
Mailing Address 4104 24Th St # 529			<b>Transaction ID : VNW3HGD6R80</b>
City San Francisco	State CA	Zip Code 94114-3615	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self-Employed		Occupation (for Individual) Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Gluck, Michael, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2018
Mailing Address 428 River View Plz			<b>Transaction ID : VNW3HGCX3Q3</b>
City Trenton	State NJ	Zip Code 08611-3420	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Gluckwalrath, Llp		Occupation (for Individual) Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1000.00	

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

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

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

FOR LINE NUMBER: PAGE 10 OF 36  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Grauman, Lillian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 3163  
 City Long Branch State NJ Zip Code 07740-3163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New Jersey Turnpike Authority Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : VNW3HGCKCT8**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Halligan, Catherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 234 Caselli Ave  
 City San Francisco State CA Zip Code 94114-2323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ulta Beauty Occupation (for Individual) Board Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : VNW3HGD7GJ1**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**C. Hatch, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 165 Mercer St  
 City Trenton State NJ Zip Code 08611-1723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Clarke Caton Hintz Occupation (for Individual) Architect  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : VNW3HGCKDW5**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 165 Mercer St

City Trenton	State NJ	Zip Code 08611-1723
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Clarke Caton Hintz	Occupation (for Individual) Architect
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2018

**Transaction ID : VNW3HGCWX40**

Amount of Each Receipt this Period  
200.00

Memo Item

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

Mailing Address 3523 Porter St NW

City Washington	State DC	Zip Code 20016-3177
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Buckley Sandler LLP	Occupation (for Individual) Attorney
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2018

**Transaction ID : VNW3HGD5796**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 15 Rivergate Way

City Long Branch	State NJ	Zip Code 07740-7800
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Media Specialist
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2018

**Transaction ID : VNW3HGCKCR2**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1700.00
<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 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Machida, Jenny, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 03 / 2018
Mailing Address 10793 Ashton Ave Apt 12		<b>Transaction ID : VNW3HGBZRN6</b>
City Los Angeles	State CA	Zip Code 90024-5097
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) IMB Development Corporation	Occupation (for Individual) Managing Director	<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. Matalon, Vivian, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2018
Mailing Address 398 Hall Ct		<b>Transaction ID : VNW3HGCKE14</b>
City South Orange	State NJ	Zip Code 07079-2322
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Klick	Occupation (for Individual) Account Director	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mondini, Elena J, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 04 / 2018
Mailing Address 1326 Laurel Ave		<b>Transaction ID : VNW3HGC1Y40</b>
City Ocean	State NJ	Zip Code 07712-4607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Spectrotel Inc	Occupation (for Individual) VP	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<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 13 OF 36  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Mondini, Elena J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1326 Laurel Ave  
 City Ocean State NJ Zip Code 07712-4607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : VNW3HGCKDY1**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Mondini, Elena J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1326 Laurel Ave  
 City Ocean State NJ Zip Code 07712-4607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Spectrotel Inc Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : VNW3HGCWYG5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Newstat, Joyce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 California St Unit 27C  
 City San Francisco State CA Zip Code 94109-0004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Policy Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 07 / 2018  
**Transaction ID : VNW3HGC3417**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3600.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Owens, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39 Gatehouse Rd  
 City Bedminster State NJ Zip Code 07921-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : VNW3HGCKDM2**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Owens, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39 Gatehouse Rd  
 City Bedminster State NJ Zip Code 07921-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : VNW3HGCKX3H6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Pezzina, Claudia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Springhouse Cir  
 City Manalapan State NJ Zip Code 07726-4123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bristol Myers Squibb Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : VNW3HGCKDX3**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Ricketts, Brooke, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 430 Sheridan Rd  
 City Wilmette State IL Zip Code 60091-2821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CARS Occupation (for Individual) Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 15 / 2018  
**Transaction ID : VNW3HGD26T4**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Rieur, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 400 Hollinshead Spring Road  
 City Skillman State NJ Zip Code 08558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : VNW3HGCWVX6**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. Sadoff, Carla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 68 N 5Th St  
 City Hudson State NY Zip Code 12534-1722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lumeri Occupation (for Individual) Management Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1008.00

Date of Receipt 10 / 07 / 2018  
**Transaction ID : VNW3HGC2GP0**  
 Amount of Each Receipt this Period 1008.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2308.00
<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 36
	<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)  
**L PAC**

**A. Stribling-Kivlan, Elizabeth Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 90 Furman St  
 N-528  
 City Brooklyn State NY Zip Code 11201-7083  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Stribling & Associates Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : VNW3HGD6PN9**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Sweeney, Kate, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 Hiram Sq  
 City New Brunswick State NJ Zip Code 08901-1270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Morgan Stanley Occupation (for Individual) Financial Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : VNW3HGCX3P5**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. The Asbury Hotel**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 210 5Th Ave  
 City Asbury Park State NJ Zip Code 07712-5503  
 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 ▼ 5750.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : VNW3HGJN268**  
 Amount of Each Receipt this Period 5750.00  
 Memo Item  
 \* In-Kind: Inkind - Event Space - non-contribution account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11750.00
<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 36
	<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	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Tomchin, Joy, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y <b>10 / 11 / 2018</b>
Mailing Address <b>252 7Th Ave Apt 15D</b>		<b>Transaction ID : VNW3HGCK175</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10001-7348</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>5000.00</b>
Name of Employer (for Individual) <b>N/A</b>	Occupation (for Individual) <b>Retired</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>5000.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. VanderLinden, John, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y <b>10 / 12 / 2018</b>
Mailing Address <b>2430 N Lakeview Ave</b>		<b>Transaction ID : VNW3HG CX412</b>
City <b>Chicago</b>	State <b>IL</b>	Zip Code <b>60614-2877</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer (for Individual) <b>BH KR</b>	Occupation (for Individual) <b>Real Estate Broker</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>700.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Weiner, Sharon, L, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y <b>10 / 06 / 2018</b>
Mailing Address <b>30 E 81St St Apt 3E</b>		<b>Transaction ID : VNW3HG CX3V5</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10028-0247</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>3900.00</b>
Name of Employer (for Individual) <b>Stribling &amp; Co</b>	Occupation (for Individual) <b>Real Estate Broker</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <b>5000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>9400.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>43308.00</b>

**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 36
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

**A. Emes, Radley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1441 Q St NW  
 City Washington State DC Zip Code 20009-3807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Landlord/Property Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 9500.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : VNW3HGD6SH4**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Non-contribution account

**B. Newstat, Joyce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 California St Unit 27C  
 City San Francisco State CA Zip Code 94109-0004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Policy Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 27000.00

Date of Receipt 10 / 07 / 2018  
**Transaction ID : VNW3HGFZ9T3**  
 Amount of Each Receipt this Period 27000.00  
 Memo Item  
 Non-contribution account

**C. Ritchie, Alix, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 030220  
 City Fort Lauderdale State FL Zip Code 33303-0220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 89500.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : VNW3HGD7FZ1**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-contribution account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	34500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 36
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

**A. Weiner, Sharon, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 E 81St St  
 Apt 3E  
 City New York State NY Zip Code 10028-0247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Stribling & Co Occupation (for Individual) Real Estate Broker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 10 / 06 / 2018  
**Transaction ID : VNW3HGFZ9J9**  
 Amount of Each Receipt this Period 1100.00  
 Memo Item  
 Non-contribution account

**B. Weiner, Sharon, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 E 81St St  
 Apt 3E  
 City New York State NY Zip Code 10028-0247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Stribling & Co Occupation (for Individual) Real Estate Broker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : VNW3HGCWXM7**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non-contribution account

**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  
 Amount of Each Receipt this Period  
 Memo Item  
 Non-contribution account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	36100.00

# 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)  
**L PAC**

Full Name (Last, First, Middle Initial)

### A. Bankcard

Mailing Address 28720 Roadside Dr  
Ste 299

City  
Agoura Hills

State  
CA

Zip Code  
91301-4574

Purpose of Disbursement  
Contribution Processing 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	Y	Y
1	0		0	1		2	0	1	8		

FEC Identification Number

**C** [Redacted]

Transaction ID : **VNV499Y79D**

Amount of Each Disbursement this Period

[Redacted] 1157.40

Memo Item

Full Name (Last, First, Middle Initial)

### B. Fouracre, Matt, , ,

Mailing Address 309 Cooper St  
# 3B

City  
Brooklyn

State  
NY

Zip Code  
11237-6401

Purpose of Disbursement  
Salary

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
1	0		1	5		2	0	1	8		

FEC Identification Number

**C** [Redacted]

Transaction ID : **VNV499YDQT**

Amount of Each Disbursement this Period

[Redacted] 336.90

Memo Item \* portion of admin. expense allocable to contribution account

Full Name (Last, First, Middle Initial)

### C. Paychex

Mailing Address 911 Panorama Trl S

City  
Rochester

State  
NY

Zip Code  
14625-2396

Purpose of Disbursement  
Payroll 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
1	0		0	1		2	0	1	8		

FEC Identification Number

**C** [Redacted]

Transaction ID : **VNV499YDR,**

Amount of Each Disbursement this Period

[Redacted] 22.68

Memo Item \* portion of admin. expense allocable to contribution account

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

[Redacted] 1157.40

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

[Redacted]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499YDR6</b>	
City Rochester	State NY	Zip Code 14625-2396	Amount of Each Disbursement this Period [REDACTED] 645.96
Purpose of Disbursement Payroll Taxes		Category/ Type [REDACTED]	* portion of admin. expense allocable to contribution account <input checked="" type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499YDR9</b>	
City Rochester	State NY	Zip Code 14625-2396	Amount of Each Disbursement this Period [REDACTED] 30.55
Purpose of Disbursement Payroll Fee		Category/ Type [REDACTED]	* portion of admin. expense allocable to contribution account <input checked="" type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. PoliOps, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2018	
Mailing Address PO Box 1572		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499YDR1</b>	
City Glen Allen	State VA	Zip Code 23060-1572	Amount of Each Disbursement this Period [REDACTED] 538.20
Purpose of Disbursement Compliance Consulting		Category/ Type [REDACTED]	* portion of admin. expense allocable to contribution account <input checked="" type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 10 / 15 / 2018

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : VNV499YDQ

Amount of Each Disbursement this Period: 952.60

Memo Item \* portion of admin. expense allocable to contribution account

**B. The Asbury Hotel**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 10 / 11 / 2018

Mailing Address 210 5Th Ave

City Asbury Park State NJ Zip Code 07712-5503

Purpose of Disbursement Inkind - Event Space - non-contribution account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : VNW3HGJN2

Amount of Each Disbursement this Period: 5750.00

Memo Item \* In-Kind Received

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement:

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6907.40

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. ANGIE CRAIG FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

M M M	/	D D D	/	Y Y Y Y Y
10		03		2018

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement Contribution

C	C00575209
---	-----------

Candidate Name

**CRAIG, ANGELA DAWN, , ,**

Category/Type

**Transaction ID : VNV499Y8G2**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

1000.00
---------

State: MN District: 02

Memo Item

**B. DONNA SHALALA FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 330602

M M M	/	D D D	/	Y Y Y Y Y
10		03		2018

City Miami State FL Zip Code 33233-0602

FEC Identification Number

Purpose of Disbursement Contribution

C	C00672311
---	-----------

Candidate Name

**SHALALA, DONNA, , ,**

Category/Type

**Transaction ID : VNV499Y8G1**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

1000.00
---------

State: FL District: 27

Memo Item

**C. Gina Ortiz Jones For Congress**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 769186

M M M	/	D D D	/	Y Y Y Y Y
10		03		2018

City San Antonio State TX Zip Code 78245-9186

FEC Identification Number

Purpose of Disbursement Contribution

C	C00652297
---	-----------

Candidate Name

**Ortiz Jones, Gina, , ,**

Category/Type

**Transaction ID : VNV499Y8Gt**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

1000.00
---------

State: TX District: 23

Memo Item

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

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

3000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Lauren Baer For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y Y 10 / 03 / 2018	
Mailing Address 6231 Pga Blvd			
City West Palm Beach	State FL	Zip Code 33418-4033	
Purpose of Disbursement Contribution		FEC Identification Number <b>C</b> C00652594 <b>Transaction ID : VNV499Y8FZ</b>	
Candidate Name <b>Baer, Lauren, , ,</b>		Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: FL District: 18	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. SINEMA FOR ARIZONA</b>		Date of Disbursement M M / D D / Y Y Y Y Y 10 / 03 / 2018	
Mailing Address PO Box 7586			
City Phoenix	State AZ	Zip Code 85011-7586	
Purpose of Disbursement Contribution		FEC Identification Number <b>C</b> C00508804 <b>Transaction ID : VNV499Y79A</b>	
Candidate Name <b>SINEMA, KYRSTEN, , ,</b>		Amount of Each Disbursement this Period 5000.00	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AZ District: 00	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		FEC Identification Number <b>C</b>	
Candidate Name		Amount of Each Disbursement this Period	
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		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9000.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Authorize.Net**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 8999

City San Francisco State CA Zip Code 94128-8999

Purpose of Disbursement Contribution Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 02 / 2018

FEC Identification Number: C

Transaction ID : VNV499Y7EA

Amount of Each Disbursement this Period: 40.00

Memo Item

**B. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C

Transaction ID : VNV499Y7EJI

Amount of Each Disbursement this Period: 15.00

Memo Item

**C. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C

Transaction ID : VNV499Y7EF

Amount of Each Disbursement this Period: 10.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 65.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address 700 13Th St NW

City Washington State DC Zip Code 20005-3950

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2018

FEC Identification Number: C

Transaction ID : VNV499YC1Y

Amount of Each Disbursement this Period: 10.00

Memo Item

**B. Bankcard**

Full Name (Last, First, Middle Initial)

Mailing Address 28720 Roadside Dr Ste 299

City Agoura Hills State CA Zip Code 91301-4574

Purpose of Disbursement Contribution Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C

Transaction ID : VNV499Y7E5I

Amount of Each Disbursement this Period: 127.21

Memo Item

**C. Brown, Pat, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 470 Malcolm X Blvd Apt 7H

City New York State NY Zip Code 10037-3024

Purpose of Disbursement Talent Fee - Fundraising Event

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C

Transaction ID : VNV499YC1Y

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1137.21

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

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

Full Name (Last, First, Middle Initial) <b>A. CNA</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2018
Mailing Address 1 Meridian Blvd Ste 3A01		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499Y79N</b>
City Wyomissing	State PA	Zip Code 19610-3235
Purpose of Disbursement Insurance		Amount of Each Disbursement this Period [REDACTED] 268.65
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> non-contribution account
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement MM / DD / YYYY 10 / 09 / 2018
Mailing Address 1 Hacker Way		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499Y79M</b>
City Menlo Park	State CA	Zip Code 94025-1456
Purpose of Disbursement Online Advertising		Amount of Each Disbursement this Period [REDACTED] 360.35
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> non-contribution account
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fouracre, Matt, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2018
Mailing Address 309 Cooper St # 3B		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499YC1F</b>
City Brooklyn	State NY	Zip Code 11237-6401
Purpose of Disbursement Reimbursement		Amount of Each Disbursement this Period [REDACTED] 1115.71
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> non-contribution account
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1744.71
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2018
Mailing Address 201 I St NE		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499YCZ4</b> Amount of Each Disbursement this Period 872.00 * Non contribution account <input checked="" type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20002-4449	Purpose of Disbursement Reimbursement - Train Travel	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>B. Fouracre, Matt, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018
Mailing Address 309 Cooper St # 3B		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499YC28!</b> Amount of Each Disbursement this Period 1871.66 non-contribution account <input type="checkbox"/> Memo Item
City Brooklyn	State NY	
Zip Code 11237-6401	Purpose of Disbursement Salary	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>C. Google</b>		Date of Disbursement MM / DD / YYYY 10 / 02 / 2018
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499Y7E9</b> Amount of Each Disbursement this Period 42.00 non-contribution account <input type="checkbox"/> Memo Item
City Mountain View	State CA	
Zip Code 94043-1351	Purpose of Disbursement Subscription	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1913.66
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Google</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2018
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499Y7EN</b>
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Subscription		Amount of Each Disbursement this Period [REDACTED] 15.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Grasshopper.Com</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2018
Mailing Address 197 1St Ave Ste 200		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499Y7EB</b>
City Needham	State MA	Zip Code 02494-2873
Purpose of Disbursement Subscription		Amount of Each Disbursement this Period [REDACTED] 33.06
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Hampton Inn - SF</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2018
Mailing Address 942 Mission St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499Y79K</b>
City San Francisco	State CA	Zip Code 94103-2911
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period [REDACTED] 394.75
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 442.81
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Harmon, Curran, Spielberg & Eisenberg, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1726 M St NW  
Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 09 / 2018

FEC Identification Number: **C**

Transaction ID : **VNV499Y79C**

Amount of Each Disbursement this Period: 1231.20

Memo Item

**B. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 03 / 2018

FEC Identification Number: **C**

Transaction ID : **VNV499Y7ED**

Amount of Each Disbursement this Period: 25.00

Memo Item

**C. Olive Street Design**

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 03 / 2018

FEC Identification Number: **C**

Transaction ID : **VNV499Y7EE**

Amount of Each Disbursement this Period: 25.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1281.20

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C

Transaction ID : VNV499Y7E6

Amount of Each Disbursement this Period: 126.00

Memo Item

**B. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C

Transaction ID : VNV499YC1S

Amount of Each Disbursement this Period: 3588.66

Memo Item

**C. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C

Transaction ID : VNV499YC1)

Amount of Each Disbursement this Period: 169.72

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3884.38

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial) <b>A. PoliOps, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2018	
Mailing Address PO Box 1572		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499YC1T</b> Amount of Each Disbursement this Period 2990.00 non-contribution account <input type="checkbox"/> Memo Item	
City Glen Allen	State VA	Zip Code 23060-1572	Category/ Type
Purpose of Disbursement Compliance Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. PowerThru</b>		Date of Disbursement MM / DD / YYYY 10 / 09 / 2018	
Mailing Address 3205 Lincoln St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499Y799</b> Amount of Each Disbursement this Period 10000.00 non-contribution account <input type="checkbox"/> Memo Item	
City Columbia	State SC	Zip Code 29201-1205	Category/ Type
Purpose of Disbursement Communications Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Premium Assignment Corporation</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 3522 Thomasville Rd Ste 400		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499Y79E</b> Amount of Each Disbursement this Period 1126.93 non-contribution account <input type="checkbox"/> Memo Item	
City Tallahassee	State FL	Zip Code 32309-3488	Category/ Type
Purpose of Disbursement Insurance		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14116.93
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

**A. Sandberg, Stephanie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 32 Vreeland Ct

City Princeton State NJ Zip Code 08540-6760

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C

Transaction ID : VNV499YC2E

Amount of Each Disbursement this Period: 5292.20

Memo Item

**B. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-6462

Purpose of Disbursement Airfare

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 04 / 2018

FEC Identification Number: C

Transaction ID : VNV499Y7E7

Amount of Each Disbursement this Period: 75.00

Memo Item

**C. Witeck Communications**

Full Name (Last, First, Middle Initial)

Mailing Address 2120 L St NW Ste 850

City Washington State DC Zip Code 20037-1550

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 09 / 2018

FEC Identification Number: C

Transaction ID : VNV499Y79J

Amount of Each Disbursement this Period: 450.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5817.20

**TOTAL** This Period (last page this line number only)..... ▶ 30403.10

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
L PAC
FEC IDENTIFICATION NUMBER
C C00519413

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Facebook
non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising (non-contribution account)
Category/Type:
Name of Federal Candidate: VUKMIR, LEAH, ,
Support: [ ], Oppose: [x]
Office Sought: [ ] House, [x] Senate, District: 00, State: WI
Amount: 750.00
Transaction ID: VNV499Y79H2
Date of Disbursement or Obligation: 10/04/2018
Disbursement For: [ ] Primary, [x] General 2018

Full Name of Payee: Facebook
non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising (non-contribution account)
Category/Type:
Name of Federal Candidate: VUKMIR, LEAH, ,
Support: [ ], Oppose: [x]
Office Sought: [ ] House, [x] Senate, District: 00, State: WI
Amount: 750.00
Transaction ID: VNV499Y79F6
Date of Disbursement or Obligation: 10/09/2018
Disbursement For: [ ] Primary, [x] General 2018

(a) SUBTOTAL of Itemized Independent Expenditures ..... 1500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robasciotti, Rachel, ,

[Electronically Filed]

Date 12/06/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
L PAC
FEC IDENTIFICATION NUMBER
C C00519413

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Facebook
non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising (non-contribution account)
Category/Type:
Name of Federal Candidate: VUKMIR, LEAH, ,
Support: [ ], Oppose: [x]
Office Sought: [ ] House, [x] Senate, District: 00, State: WI
Calendar Year-To-Date Per Election for Office Sought: 3750.00
Disbursement For: [ ] Primary, [x] General 2018, [ ] Other (specify)

Full Name of Payee: Facebook
non-contribution account
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising (non-contribution account)
Category/Type:
Name of Federal Candidate: VUKMIR, LEAH, ,
Support: [ ], Oppose: [x]
Office Sought: [ ] House, [x] Senate, District: 00, State: WI
Calendar Year-To-Date Per Election for Office Sought: 3750.00
Disbursement For: [ ] Primary, [x] General 2018, [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 1500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robasciotti, Rachel, ,

[Electronically Filed]

Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
L PAC
FEC IDENTIFICATION NUMBER
C C00519413

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Facebook
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025-1456
Purpose of Expenditure: Online Advertising (non-contribution account)
Amount: 750.00
Transaction ID: VNV499YC0H0
Date of Disbursement or Obligation: 10/17/2018
Name of Federal Candidate: VUKMIR, LEAH, ,
Office Sought: Senate, State: WI
Disbursement For: General

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type
Name of Federal Candidate
Office Sought
Disbursement For

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures: 750.00; (b) SUBTOTAL of Unitemized Independent Expenditures; (c) TOTAL Independent Expenditures: 3750.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robasciotti, Rachel, ,

[Electronically Filed]

Date 12/06/2018

Signature