

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) 409 7th Street, N.W. Suite #350 WASHINGTON DC 20004 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, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special Election on

5. Covering Period 10 / 01 / 2014 through 10 / 15 / 2014

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

Type or Print Name of Treasurer ALIX RITCHIE

Signature of Treasurer ALIX RITCHIE [Electronically Filed] Date 10 / 23 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2014"/>	<input type="text" value=""/>	<input type="text" value="63712.25"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="243144.86"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="42035.00"/>	<input type="text" value="605090.70"/>
(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="285179.86"/>	<input type="text" value="668802.95"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="43759.88"/>	<input type="text" value="427382.97"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="241419.98"/>	<input type="text" value="241419.98"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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: / / 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).....	14150.00	22150.00
(ii) Unitemized	825.00	1049.58
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	14975.00	23199.58
(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)	14975.00	23199.58
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.).....	27060.00	581891.12
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))..... ▶	42035.00	605090.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	42035.00	605090.70

DETAILED SUMMARY PAGE

of Disbursements

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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	88.99	193.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	88.99	193.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	7500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	43670.89	419689.48
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	43759.88	427382.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43759.88	427382.97

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	14975.00	23199.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14975.00	23199.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	88.99	193.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	88.99	193.49

**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 22
	<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)
L PAC

A. James L Bennet
 Full Name (Last, First, Middle Initial)
 Mailing Address 5353 N. Magnolia
 City Chicago State IL Zip Code 60640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Midwest Reg Office of Lambda Occupation Regional Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 14 / 2014
Transaction ID : SA11Al.7775
 Amount of Each Receipt this Period 5000.00
 Contribution

B. David K Black
 Full Name (Last, First, Middle Initial)
 Mailing Address 2401 NE 26th Ave.
 City Fort Lauderdale State FL Zip Code 33306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Berger Singerman, LLP Occupation Associate Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 14 / 2014
Transaction ID : SA11Al.7776
 Amount of Each Receipt this Period 300.00
 Contribution

C. Robert Bloch
 Full Name (Last, First, Middle Initial)
 Mailing Address 325 N. East
 City Oak Park State IL Zip Code 60302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dowd, Bloch, Bennett & Cervone Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 14 / 2014
Transaction ID : SA11Al.7778
 Amount of Each Receipt this Period 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 6300.00
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 7 OF 22
	<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 (Last, First, Middle Initial)
A. Amy E Crawford

Mailing Address 4800 N. Kenmore Ave, Unit 3

City Chicago State IL Zip Code 60640

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

Name of Employer Kirkland & Ellis, LLP Occupation 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 / 14 / 2014
Transaction ID : SA11AI.7782

Amount of Each Receipt this Period
500.00

Contribution

Full Name (Last, First, Middle Initial)
B. David E Horwich

Mailing Address 724 Sumac Rd.

City Highland Park State IL Zip Code 60035

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

Name of Employer Civitas Public Affairs Group Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2014
Transaction ID : SA11AI.7784

Amount of Each Receipt this Period
250.00

Contribution

Full Name (Last, First, Middle Initial)
C. Pamela M Keith

Mailing Address 521 Quadrant Rd.

City North Palm Beach State FL Zip Code 33458

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2014
Transaction ID : SA11AI.7785

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)
A. Christina H Mitchell

Mailing Address 200 E Pearson St., Apt#4W

City Chicago State IL Zip Code 60611

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

Name of Employer Occupation

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 / 14 / 2014

Transaction ID : SA11AI.7786

Amount of Each Receipt this Period
1000.00

Contribution

Full Name (Last, First, Middle Initial)
B. Gail H Morse

Mailing Address 3739 N. Wilton Ave., Unit 2

City Chicago State IL Zip Code 60613

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

Name of Employer Occupation
Jenner & Block Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11AI.7787

Amount of Each Receipt this Period
2500.00

Contribution

Full Name (Last, First, Middle Initial)
C. Jill Peters

Mailing Address 9 Farrey Lane

City Miami Beach State FL Zip Code 33139

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

Name of Employer Occupation
Self Employed Photographer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11AI.7789

Amount of Each Receipt this Period
300.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 3800.00

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 9 OF 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Joanne Schwartz		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 358 W Archer Place		Transaction ID : SA11AI.7790
City Denver	State CO	Zip Code 80223
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Civitas Public Affairs Group	Occupation Principal	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Debra Shore		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 9232 Ayers Ave.		Transaction ID : SA11AI.7791
City Evanstone	State IL	Zip Code 60203
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Metropolitan Water Reclamation	Occupation Commissioner	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Karin Ward		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 2030 NE 53rd St.		Transaction ID : SA11AI.7792
City For Lauderdale	State FL	Zip Code 33308
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	3050.00
TOTAL This Period (last page this line number only).....▶	14150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Joseph Althouse		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 08 / 2014
Mailing Address 642 Valencia Avenue #407		Transaction ID : SA17.7745
City Coral Gables	State FL	Zip Code 33134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired		Contribution to IE Only Account
Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

Full Name (Last, First, Middle Initial) B. Elizabeth Bremner		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014
Mailing Address 907 Allahna Way		Transaction ID : SA17.7751
City Santa Fe	State NM	Zip Code 87501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Ms Foundation for Women		Contribution to IE Only Account
Occupation Co-Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Full Name (Last, First, Middle Initial) C. Constance Collins		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 04 / 2014
Mailing Address 8841 Garland Avenue		Transaction ID : SA17.7740
City Surfside	State FL	Zip Code 33154
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Lotus House Women's Shelter		Contribution to IE Only Account
Occupation Nonprofit homeless services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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 22
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Margaret Conway		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2014
Mailing Address 2432 20th St NW		Transaction ID : SA17.7812
City Washington	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Conway Strategic	Occupation President	Contribution to IE Only Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Joseph Falk		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2014
Mailing Address 1770 Micanopy Ave		Transaction ID : SA17.7813
City Miami	State FL	Zip Code 33133
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Akerman Sernterfitt	Occupation Consultant	Contribution to IE Only Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Gretchen Hoover		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2014
Mailing Address P.O. Box 1087		Transaction ID : SA17.7754
City Rhinelander	State WI	Zip Code 54501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00
Name of Employer None	Occupation Retired	Contribution to IE Only Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 23000.00	

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
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 12 OF 22
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Gretchen Hoover		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2014
Mailing Address P.O. Box 1087		Transaction ID : SA17.7755
City Rhineland	State WI	Zip Code 54501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer None	Occupation Retired	Contribution to IE Only Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name (Last, First, Middle Initial) B. Bonnie Jones		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2014
Mailing Address 534 Montrose street		Transaction ID : SA17.7756
City Philadelphia	State PA	Zip Code 19147
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer The Women's Centers	Occupation Attorney	Contribution to IE Only Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) c. Shannon Knight		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014
Mailing Address 1732 NE 17th Ave		Transaction ID : SA17.7750
City Fort Lauderdale	State FL	Zip Code 33305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer PTC	Occupation Attorney	Contribution to IE Only Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	2400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 22
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Elizabeth Kritzer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 06 / 2014 Transaction ID : SA17.7744
Mailing Address 429 east 52nd Street		Amount of Each Receipt this Period 300.00
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		Contribution to IE Only Account
Name of Employer Kritzer Marketing Corp.	Occupation Advertising	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Maryann McCarthy		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2014 Transaction ID : SA17.7815
Mailing Address 248 Cortez Rd		Amount of Each Receipt this Period 300.00
City West Palm Beach	State FL	Zip Code 33405
FEC ID number of contributing federal political committee. C		Contribution to IE Only Account
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Laura Obregon		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 03 / 2014 Transaction ID : SA17.7738
Mailing Address 642 Valencia Avenue No. 407		Amount of Each Receipt this Period 500.00
City Coral Gables	State FL	Zip Code 33134
FEC ID number of contributing federal political committee. C		Contribution to IE Only Account
Name of Employer STEP - Miami Branch	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 22
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Catherina Pareto		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2014 Transaction ID : SA17.7742
Mailing Address 2400 Trapp avenue		Amount of Each Receipt this Period 250.00
City Miami	State FL	Zip Code 33133
FEC ID number of contributing federal political committee. C		Contribution to IE Only Account
Name of Employer Cathy Pareto & Associates	Occupation Financial Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. William Peacock		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 08 / 2014 Transaction ID : SA17.7746
Mailing Address 59 SW 3rd Avenue		Amount of Each Receipt this Period 500.00
City Dania Beach	State FL	Zip Code 33004
FEC ID number of contributing federal political committee. C		Contribution to IE Only Account
Name of Employer Self	Occupation Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mayda Perez		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 08 / 2014 Transaction ID : SA17.7747
Mailing Address 9315 Park Drive		Amount of Each Receipt this Period 250.00
City Miami Shores	State FL	Zip Code 33138
FEC ID number of contributing federal political committee. C		Contribution to IE Only Account
Name of Employer Front of the Hills	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 22
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. SARAH SCHMIDT		Date of Receipt 10 / 01 / 2014 Transaction ID : SA17.7722
Mailing Address 845 Michigan ave		Amount of Each Receipt this Period 8500.00
City Wilmette	State IL	Zip Code 60091
FEC ID number of contributing federal political committee. C		Contribution to IE Only Account
Name of Employer Self	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 33500.00	

Full Name (Last, First, Middle Initial) B. William and Barbara Schmidt		Date of Receipt 10 / 05 / 2014 Transaction ID : SA17.7743
Mailing Address N176 DeBruin Road		Amount of Each Receipt this Period 5000.00
City Kaukauna	State WI	Zip Code 54130
FEC ID number of contributing federal political committee. C		Contribution to IE Only Account
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Elizabeth Schwartz		Date of Receipt 10 / 13 / 2014 Transaction ID : SA17.7816
Mailing Address 690 Lincoln Rd		Amount of Each Receipt this Period 500.00
City Miami Beach	State FL	Zip Code 33139
FEC ID number of contributing federal political committee. C		Contribution to IE Only Account
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	14000.00
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 16 OF 22
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Barbara L. Sears		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2014
Mailing Address 306 NE 15th Avenue		Transaction ID : SA17.7795
City Fort Lauderdale	State FL	Zip Code 33301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer	Occupation	Contribution to IE Only Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Kimberly Tuyn		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2014
Mailing Address 127 Seagrape Dr		Transaction ID : SA17.7814
City Jupiter	State FL	Zip Code 33458
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer	Occupation	Contribution to IE Only Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. B. Rodney White		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 03 / 2014
Mailing Address 1035 Adams St.		Transaction ID : SA17.7739
City Hollywood	State FL	Zip Code 33019
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer Making Projects Work, Inc.	Occupation Consultant	Contribution to IE Only Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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 17 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)
A. B. Rodney White

Mailing Address 1035 Adams St.

City State Zip Code
Hollywood FL 33019

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

Name of Employer Occupation
Making Projects Work, Inc. Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2014
Transaction ID : SA17.7748

Amount of Each Receipt this Period
150.00

Contribution to IE Only Account

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶ 26450.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 01 / 2014

Transaction ID : SB21B.7720

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Check Order Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 09 / 2014

Transaction ID : SB21B.7721

Amount of Each Disbursement this Period

78.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

88.00

88.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address PO Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fee - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 02 / 2014

Transaction ID : SB29.7705

Amount of Each Disbursement this Period

47.15

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Bank Fee - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 02 / 2014

Transaction ID : SB29.7706

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Credit Card Processing Fee - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 03 / 2014

Transaction ID : SB29.7707

Amount of Each Disbursement this Period

2374.58

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

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

2446.73

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Bank Fee - IE Only Account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.7709**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Bank Fee - IE Only Account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.7710**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Bank Fee - IE Only Account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.7716**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)

A. Civitas Public Affairs

Mailing Address 601 13th Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Strategic Consulting - IE Only Account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 02 / 2014

Transaction ID : SB29.7704

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

B. Collective Conscience, LLC

Mailing Address 7254 Hollywood Blvd., #1

City Los Angeles State CA Zip Code 90046

Purpose of Disbursement
Fundraising on-line - IE Only Account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 07 / 2014

Transaction ID : SB29.7708

Amount of Each Disbursement this Period

5900.51

Full Name (Last, First, Middle Initial)

C. Ditto Consulting

Mailing Address 428 West 23rd Street, 2B

City New York State NY Zip Code 10011

Purpose of Disbursement
Fundraising on-line Capacity - IE Only Account

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 08 / 2014

Transaction ID : SB29.7713

Amount of Each Disbursement this Period

8000.00

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

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

33900.51

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Friends of Courtney Snowden		Date of Disbursement MM / DD / YYYY 10 / 01 / 2014
Mailing Address P. O. Box1709		Transaction ID : SB29.7702
City Washington	State DC	
Zip Code 20013	Purpose of Disbursement Contribution - IE Only Account	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	
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. Friends of Flores		Date of Disbursement MM / DD / YYYY 10 / 10 / 2014
Mailing Address 420 N Nellis Blvd., Suite A-3 87		Transaction ID : SB29.7715
City Las Vegas	State NV	
Zip Code 89110	Purpose of Disbursement Contribution - IE Only Account	Amount of Each Disbursement this Period 5000.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Shumlin for Governor		Date of Disbursement MM / DD / YYYY 10 / 10 / 2014
Mailing Address PO Box 5353		Transaction ID : SB29.7703
City Burlington	State VT	
Zip Code 05402	Purpose of Disbursement Contribution - IE Only Account	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	43412.24