

**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

Blue America PAC

ADDRESS (number and street)

1025 Vermont Ave., NW

Suite 300

Washington

DC

20005

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00427617

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2017

through

M M M / D D D / Y Y Y Y Y Y  
12 31 2017

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

Klein, Howard, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Klein, Howard, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 04 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.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Blue America PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07		01		2017

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y 2017</div>		<div>11733.04</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>16995.63</div>	
(c) Total Receipts (from Line 19) .....	<div>12940.16</div>	<div>27058.75</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>29935.79</div>	<div>38791.79</div>
7. Total Disbursements (from Line 31).....	<div>8379.04</div>	<div>17235.04</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div>21556.75</div>	<div>21556.75</div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	



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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Blue America PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	01	/	2017

To:

M M	/	D D	/	Y Y Y Y Y Y
12	/	31	/	2017

**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).....

2592.22

4180.79

(ii) Unitemized .....

10347.05

22876.57

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

12939.27

27057.36

(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) .....

12939.27

27057.36

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.89

1.39

## 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)) .....

12940.16

27058.75

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

12940.16

27058.75

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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 .....	8379.04	17235.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	8379.04	17235.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8379.04	17235.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8379.04	17235.04

**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) .....	12939.27	27057.36
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12939.27	27057.36
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	8379.04	17235.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8379.04	17235.04

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Blue America PAC**

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

**A. Appleford, Alan, , ,**

Mailing Address 6284 Clive Ave

City  
Oakland

State  
CA

Zip Code  
94611

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 15 / 2017

**Transaction ID : SA11Al.34197**

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**B. Appleford, Alan, , ,**

Mailing Address 6284 Clive Ave

City  
Oakland

State  
CA

Zip Code  
94611

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2017

**Transaction ID : SA11Al.34198**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Caswell, Peter, , ,**

Mailing Address 31 Off Harrington Ave

City  
Concord

State  
MA

Zip Code  
01742

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BTI Systems

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 22 / 2017

**Transaction ID : SA11Al.34097**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

325.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Blue America PAC**

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

**A. Caswell, Peter, , ,**

Mailing Address 31 Off Harrington Ave

City  
Concord

State  
MA

Zip Code  
01742

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BTI Systems

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 22 / 2017

**Transaction ID : SA11Al.34098**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Caswell, Peter, , ,**

Mailing Address 31 Off Harrington Ave

City  
Concord

State  
MA

Zip Code  
01742

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BTI Systems

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 22 / 2017

**Transaction ID : SA11Al.34099**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Caswell, Peter, , ,**

Mailing Address 31 Off Harrington Ave

City  
Concord

State  
MA

Zip Code  
01742

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BTI Systems

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2017

**Transaction ID : SA11Al.34100**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

75.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Blue America PAC**

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

**A. Chantavy, Boonthai, , ,**

Mailing Address 9212812 Huneikai St

City  
Kapolei

State  
HI

Zip Code  
96707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2017

**Transaction ID : SA11AI.34202**

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**B. Edwards, Diane, , ,**

Mailing Address 23 Brewster Ave 31

City

Ridgefield Pk

State

NJ

Zip Code

07660

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Walfodorf Astoria

Occupation (for Individual)

Waitress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2017

**Transaction ID : SA11AI.34205**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Edwards, Diane, , ,**

Mailing Address 23 Brewster Ave 31

City

Ridgefield Pk

State

NJ

Zip Code

07660

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Walfodorf Astoria

Occupation (for Individual)

Waitress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2017

**Transaction ID : SA11AI.34206**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

250.00



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Blue America PAC**

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

**A. Edwards, Diane, , ,**

Mailing Address 23 Brewster Ave 31

City

Ridgefield Pk

State

NJ

Zip Code

07660

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Walfodorf Astoria

Occupation (for Individual)

Waitress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2017

**Transaction ID : SA11AI.34207**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Hitchcock, Elaine, , ,**

Mailing Address 200 Yale Ave

City

Kensington

State

CA

Zip Code

94708

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 08 / 2017

**Transaction ID : SA11AI.34209**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Hough, Morgan, , ,**

Mailing Address 41 Grattan Street

City

San Francisco

State

CA

Zip Code

94117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

self

Occupation (for Individual)

self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 07 / 2017

**Transaction ID : SA11AI.34210**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

95.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Blue America PAC**

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

**A. Hough, Morgan, , ,**

Mailing Address 41 Grattan Street

City

San Francisco

State

CA

Zip Code

94117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self

Occupation (for Individual)  
self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 11 / 2017

Transaction ID : SA11AI.34211

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Hough, Morgan, , ,**

Mailing Address 41 Grattan Street

City

San Francisco

State

CA

Zip Code

94117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self

Occupation (for Individual)  
self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2017

Transaction ID : SA11AI.34212

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Kay, Adam, , ,**

Mailing Address 2516 Palmer Ave.

City

New Orleans

State

LA

Zip Code

70118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Outland Technology

Occupation (for Individual)  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 11 / 2017

Transaction ID : SA11AI.34120

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

**Blue America PAC**

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

**A. Kay, Adam, , ,**

Mailing Address 2516 Palmer Ave.

City  
New OrleansState  
LAZip Code  
70118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Outland TechnologyOccupation (for Individual)  
Engineer

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		11		2017

Transaction ID : SA11AI.34121

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Kay, Adam, , ,**

Mailing Address 2516 Palmer Ave.

City  
New OrleansState  
LAZip Code  
70118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Outland TechnologyOccupation (for Individual)  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		11		2017

Transaction ID : SA11AI.34122

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Kay, Adam, , ,**

Mailing Address 2516 Palmer Ave.

City  
New OrleansState  
LAZip Code  
70118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Outland TechnologyOccupation (for Individual)  
Engineer

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
12		11		2017

Transaction ID : SA11AI.34123

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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

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

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

FOR LINE NUMBER: PAGE 12 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Blue America PAC**

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

**A. Nash, Thomas, , ,**

Mailing Address 54 Maynard St

City  
Newton

State  
MA

Zip Code  
02465

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY  
09 / 22 / 2017

Transaction ID : SA11AI.34217

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**B. Pawley, Bina, , ,**

Mailing Address 196 North St Apt 3d

City  
Buffalo

State  
NY

Zip Code  
14201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

MM / DD / YYYY  
07 / 21 / 2017

Transaction ID : SA11AI.34218

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**C. Pawley, Bina, , ,**

Mailing Address 196 North St Apt 3d

City  
Buffalo

State  
NY

Zip Code  
14201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
08 / 18 / 2017

Transaction ID : SA11AI.34219

Amount of Each Receipt this Period

35.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

270.00

# **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 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue America PAC

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

A. Pawley, Bina, , ,

Mailing Address 196 North St Apt 3d

City  
BuffaloState  
NYZip Code  
14201FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2017

Transaction ID : SA11AI.34220

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. Plante, Douglas, , ,

Mailing Address 331 Laurel Drive

City  
FeltonState  
CAZip Code  
95018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CVS

Occupation (for Individual)

clerk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 25 / 2017

Transaction ID : SA11AI.34146

Amount of Each Receipt this Period

22.22

☐ Memo Item

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

C. Reese, Beth, , ,

Mailing Address 830 Park Avenue

City  
New YorkState  
NYZip Code  
10021FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 15 / 2017

Transaction ID : SA11AI.34221

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

307.22

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 24

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Blue America PAC**

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

**A. Roberts, Carolyn, , ,**

Mailing Address 3692 State Hwy 14

City  
Santa Fe

State  
NM

Zip Code  
87508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
New Mexico Nurses Association

Occupation (for Individual)  
Registered Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 17 / 2017

**Transaction ID : SA11AI.34223**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**B. Stamos, Alexander, , ,**

Mailing Address 213 Wellington Drive

City  
San Carlos

State  
CA

Zip Code  
94070

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Facebook

Occupation (for Individual)  
Chief Security Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 01 / 2017

**Transaction ID : SA11AI.34173**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**C. Thakadiyil, Philip, , ,**

Mailing Address 11844 Winding Trails Drive

City  
Willow Springs

State  
IL

Zip Code  
60480

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SWE

Occupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2017

**Transaction ID : SA11AI.34182**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

770.00

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

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

FOR LINE NUMBER: PAGE 15 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Blue America PAC**

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

**A. Verick, William, , ,**

Mailing Address 844 3rd Avenue

City  
Westhaven

State  
CA

Zip Code  
95570

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

Transaction ID : SA11AI.34224

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Verick, William, , ,**

Mailing Address 844 3rd Avenue

City  
Westhaven

State  
CA

Zip Code  
95570

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 18 / 2017

Transaction ID : SA11AI.34227

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Verick, William, , ,**

Mailing Address 844 3rd Avenue

City  
Westhaven

State  
CA

Zip Code  
95570

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 15 / 2017

Transaction ID : SA11AI.34228

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

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

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

FOR LINE NUMBER: PAGE 16 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Blue America PAC**

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

**A. Verick, William, , ,**

Mailing Address 844 3rd Avenue

City  
Westhaven

State  
CA

Zip Code  
95570

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2017

**Transaction ID : SA11AI.34229**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Verick, William, , ,**

Mailing Address 844 3rd Avenue

City  
Westhaven

State  
CA

Zip Code  
95570

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 17 / 2017

**Transaction ID : SA11AI.34230**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Verick, William, , ,**

Mailing Address 844 3rd Avenue

City  
Westhaven

State  
CA

Zip Code  
95570

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 15 / 2017

**Transaction ID : SA11AI.34231**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

2592.22



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 24

<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)

Blue America PAC

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 14 Arrow Street

City  
CambridgeState  
MAZip Code  
02138Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2017

FEC Identification Number

C 

Transaction ID : SB21B.34058

Amount of Each Disbursement this Period

 395.95☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hudson Bay Company**

Mailing Address P.O. Box 427

City  
AnokaState  
MNZip Code  
55303Purpose of Disbursement  
Fundraising Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2017

FEC Identification Number

C 

Transaction ID : SB21B.34066

Amount of Each Disbursement this Period

 200.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hudson Bay Company**

Mailing Address P.O. Box 427

City  
AnokaState  
MNZip Code  
55303Purpose of Disbursement  
Fundraising Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2017

FEC Identification Number

C 

Transaction ID : SB21B.34067

Amount of Each Disbursement this Period

 200.00☐ Memo Item

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

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

 795.95

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

PAGE 18 OF 24

<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)

Blue America PAC

Full Name (Last, First, Middle Initial)

**A. Hudson Bay Company**

Mailing Address P.O. Box 427

City  
AnokaState  
MNZip Code  
55303Purpose of Disbursement  
Fundraising Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.34068

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hudson Bay Company**

Mailing Address P.O. Box 427

City  
AnokaState  
MNZip Code  
55303Purpose of Disbursement  
Fundraising Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.34069

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hudson Bay Company**

Mailing Address P.O. Box 427

City  
AnokaState  
MNZip Code  
55303Purpose of Disbursement  
Fundraising Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	6			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.34070

Amount of Each Disbursement this Period

400.00

☐ Memo Item

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

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

1200.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

Blue America PAC

Full Name (Last, First, Middle Initial)

**A. Hudson Bay Company**

Mailing Address P.O. Box 427

City  
AnokaState  
MNZip Code  
55303Purpose of Disbursement  
Fundraising Services

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

C 

Transaction ID : SB21B.34071

Amount of Each Disbursement this Period

 200.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hudson Bay Company**

Mailing Address P.O. Box 427

City  
AnokaState  
MNZip Code  
55303Purpose of Disbursement  
Fundraising Services

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	8			2	0	1	7		

FEC Identification Number

C 

Transaction ID : SB21B.34072

Amount of Each Disbursement this Period

 300.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hudson Bay Company**

Mailing Address P.O. Box 427

City  
AnokaState  
MNZip Code  
55303Purpose of Disbursement  
Fundraising Services

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			2	6			2	0	1	7		

FEC Identification Number

C 

Transaction ID : SB21B.34073

Amount of Each Disbursement this Period

 200.00☐ Memo Item

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

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

 700.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<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)

Blue America PAC

Full Name (Last, First, Middle Initial)

A. Propps, Jacqueline, , ,

Mailing Address 33857 8th Street

City  
Union CityState  
CAZip Code  
94587Purpose of Disbursement  
Video Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2017

FEC Identification Number

C

Transaction ID : SB21B.34052

Amount of Each Disbursement this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Propps, Jacqueline, , ,

Mailing Address 33857 8th Street

City  
Union CityState  
CAZip Code  
94587Purpose of Disbursement  
Video Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2017

FEC Identification Number

C

Transaction ID : SB21B.34053

Amount of Each Disbursement this Period

700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Propps, Jacqueline, , ,

Mailing Address 33857 8th Street

City  
Union CityState  
CAZip Code  
94587Purpose of Disbursement  
Video Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

FEC Identification Number

C

Transaction ID : SB21B.34054

Amount of Each Disbursement this Period

700.00

☐ Memo Item

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

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

2000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

PAGE 21 OF 24

<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)

Blue America PAC

Full Name (Last, First, Middle Initial)

**A. Propps, Jacqueline, , ,**

Mailing Address 33857 8th Street

City  
Union CityState  
CAZip Code  
94587Purpose of Disbursement  
Video Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				03				2017					

FEC Identification Number

**C** 

Transaction ID : SB21B.34055

Amount of Each Disbursement this Period

 700.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Salsa**

Mailing Address 1700 Connecticut Ave, NW

City  
WashingtonState  
DCZip Code  
20009Purpose of Disbursement  
Mailing List Management

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				12				2017					

FEC Identification Number

**C** 

Transaction ID : SB21B.34049

Amount of Each Disbursement this Period

 800.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Salsa**

Mailing Address 1700 Connecticut Ave, NW

City  
WashingtonState  
DCZip Code  
20009Purpose of Disbursement  
Mailing List Management

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2017					

FEC Identification Number

**C** 

Transaction ID : SB21B.34051

Amount of Each Disbursement this Period

 800.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 2300.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 24

<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)

Blue America PAC

Full Name (Last, First, Middle Initial)

**A. Salsa**

Mailing Address 1700 Connecticut Ave, NW

City  
WashingtonState  
DCZip Code  
20009Purpose of Disbursement  
Mailing List Management

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			13			2017					

FEC Identification Number

C

Transaction ID : SB21B.34051

Amount of Each Disbursement this Period

800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Venture Bank**

Mailing Address 4470 W. 78th Street Circle

City  
BloomingtonState  
MNZip Code  
55435Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
07			03			2017					

FEC Identification Number

C

Transaction ID : SB21B.34059

Amount of Each Disbursement this Period

95.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Venture Bank**

Mailing Address 4470 W. 78th Street Circle

City  
BloomingtonState  
MNZip Code  
55435Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
08			02			2017					

FEC Identification Number

C

Transaction ID : SB21B.34060

Amount of Each Disbursement this Period

95.12

☐ Memo Item

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

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

991.09

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 24

<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)

Blue America PAC

Full Name (Last, First, Middle Initial)

**A. Venture Bank**

Mailing Address 4470 W. 78th Street Circle

City  
BloomingtonState  
MNZip Code  
55435Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2017

FEC Identification Number

C

Transaction ID : SB21B.34061

Amount of Each Disbursement this Period

96.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Venture Bank**

Mailing Address 4470 W. 78th Street Circle

City  
BloomingtonState  
MNZip Code  
55435Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

FEC Identification Number

C

Transaction ID : SB21B.34062

Amount of Each Disbursement this Period

98.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Venture Bank**

Mailing Address 4470 W. 78th Street Circle

City  
BloomingtonState  
MNZip Code  
55435Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2017

FEC Identification Number

C

Transaction ID : SB21B.34063

Amount of Each Disbursement this Period

93.50

☐ Memo Item

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

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

287.69

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 24

<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)

Blue America PAC

Full Name (Last, First, Middle Initial)

**A. Venture Bank**

Mailing Address 4470 W. 78th Street Circle

City  
BloomingtonState  
MNZip Code  
55435Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2017

FEC Identification Number

C

Transaction ID : SB21B.34065

Amount of Each Disbursement this Period

96.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Venture Bank**

Mailing Address 4470 W. 78th Street Circle

City  
BloomingtonState  
MNZip Code  
55435Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2017

FEC Identification Number

C

Transaction ID : SB21B.34064

Amount of Each Disbursement this Period

7.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

104.31

8379.04