

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**
DLGA PAC

ADDRESS (number and street) **1090 Vermont Avenue, NW**
Suite 750
 Check if different than previously reported. (ACC) **Washington** **DC** **20005**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C **C00685719** 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / 2019 through / / 2019

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

Signature of Treasurer Patel, Roshan, , , [Electronically Filed] Date / / 2020

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

DLGA 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="2019"/>		26347.60
(b) Cash on Hand at Beginning of Reporting Period.....	177340.86	
(c) Total Receipts (from Line 19)	182500.00	347500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	359840.86	373847.60
7. Total Disbursements (from Line 31).....	100446.46	114453.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	259394.40	259394.40
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1036.60	

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

DLGA PAC

Report Covering the Period: From: 04 / 01 / 2019 To: 06 / 30 / 2019

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	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.).....	182500.00	347500.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	182500.00	347500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	182500.00	347500.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
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).....	100446.46	114453.20
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)) ..	100446.46	114453.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	100446.46	114453.20

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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

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

Form/Schedule: F3XA
Transaction ID :

This amended report is filed in response to RFAI letter dated March 4, 2020 in reference to the original report filed for the period 4/1/2019 to 06/30/2019.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 21
<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

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)
DLGA PAC

A. Adroit Health Group LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1496
 City McKinney State TX Zip Code 75070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **05 / 16 / 2019**
Transaction ID : SA17.4317
 Amount of Each Receipt this Period 10000.00
 Memo Item
 Non-contribution account

B. Alliant Energy Corp Services
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1031 Iowa Street Suite 5007
 City Dubuque State IA Zip Code 52001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **04 / 03 / 2019**
Transaction ID : SA17.4297
 Amount of Each Receipt this Period 25000.00
 Memo Item
 Non-contribution account

C. America's Insurance Plans
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 Pennsylvania Avenue, NW
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **06 / 13 / 2019**
Transaction ID : SA17.4319
 Amount of Each Receipt this Period 10000.00
 Memo Item
 Non-contribution account

SUBTOTAL of Receipts This Page (optional).....	45000.00
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 8 OF 21
<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)
DLGA PAC

A. American Fuel & Petroleum Manufacturers

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

Mailing Address 1800 M Street, NW
suite 900

City Washington State DC Zip Code 20036

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
04 / 03 / 2019

Transaction ID : SA17.4302

Amount of Each Receipt this Period
10000.00

Memo Item
Non-contribution account

B. AstraZeneca Pharmaceuticals

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

Mailing Address 1800 Concord Pike

City Wilmington State DE Zip Code 19850

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
MM / DD / YYYY
04 / 29 / 2019

Transaction ID : SA17.4312

Amount of Each Receipt this Period
25000.00

Memo Item
Non-contribution account

C. Comprehensive Health Management Inc.

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

Mailing Address PO Box 31390

City Tampa State FL Zip Code 33631

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
04 / 29 / 2019

Transaction ID : SA17.4315

Amount of Each Receipt this Period
10000.00

Memo Item
Non-contribution account

SUBTOTAL of Receipts This Page (optional).....	45000.00
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 9 OF 21
<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)
DLGA PAC

A. GlaxoSmithKline
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Moore Drive
 City Durham State NC Zip Code 23309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **04 / 03 / 2019**
Transaction ID : SA17.4305
 Amount of Each Receipt this Period 10000.00
 Memo Item
 Non-contribution account

B. Great Lakes Dredge & Dock Company LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2122 York Road
 City Oak Brook State IL Zip Code 60523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **04 / 29 / 2019**
Transaction ID : SA17.4314
 Amount of Each Receipt this Period 10000.00
 Memo Item
 Non-contribution account

C. NARAL Pro Choice America
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1725 Eye Street, NW Suite 900
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **04 / 29 / 2019**
Transaction ID : SA17.4310
 Amount of Each Receipt this Period 2500.00
 Memo Item
 Non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ▶ 22500.00
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 10 OF 21
<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)
DLGA PAC

A. National Association of Home Builders
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 15th Street, NW

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2019

Transaction ID : SA17.4307

Amount of Each Receipt this Period
10000.00

Memo Item
Non-contribution account

B. Nuclear Energy Institute
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 F Street, NW

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2019

Transaction ID : SA17.4338

Amount of Each Receipt this Period
5000.00

Memo Item
Non-contribution account

C. Planned Parenthood Action Fund
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1110 Vermont Avenue, NW

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2019

Transaction ID : SA17.4323

Amount of Each Receipt this Period
25000.00

Memo Item
Non-contribution account

SUBTOTAL of Receipts This Page (optional).....	40000.00
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 21
<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)
DLGA PAC

A. Tonio Burgos & Associates
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 Broadway
 Suite 1504
 City New York State NY Zip Code 10006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2019
Transaction ID : SA17.4321
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 Non-contribution account

B. United Services Automobile Association
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 Fredericksburg Road
 City San Antonio State TX Zip Code 78288
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 25000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 03 / 2019
Transaction ID : SA17.4303
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 Non-contribution account

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	30000.00
TOTAL This Period (last page this line number only).....	182500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DLGA PAC

A. Arc Reaction

Full Name (Last, First, Middle Initial)

Mailing Address 3511 T Street, NW

City Washington State DC Zip Code 20007

Purpose of Disbursement Digital Services - IE Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2019

FEC Identification Number: C

Transaction ID : SB29.4325

Amount of Each Disbursement this Period: 3500.00

Memo Item

B. Arc Reaction

Full Name (Last, First, Middle Initial)

Mailing Address 3511 T Street, NW

City Washington State DC Zip Code 20007

Purpose of Disbursement Digital Services - IE Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 29 / 2019

FEC Identification Number: C

Transaction ID : SB29.4345

Amount of Each Disbursement this Period: 10000.00

Memo Item

C. Arizonans for Secure Elections

Full Name (Last, First, Middle Initial)

Mailing Address 530 East McDowell #107-48

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement Non-Federal Contribution - IE Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 10 / 2019

FEC Identification Number: C

Transaction ID : SB29.4350

Amount of Each Disbursement this Period: 10000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 23500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DLGA PAC

Full Name (Last, First, Middle Initial) A. Blueprint Interactive		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019
Mailing Address 1730 Rhode Island Ave, NW Suite 1014		FEC Identification Number C [REDACTED] Transaction ID : SB29.4330 Amount of Each Disbursement this Period [REDACTED] 250.00
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Web Hosting Services - IE Account		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Blueprint Interactive		Date of Disbursement MM / DD / YYYY 05 / 01 / 2019
Mailing Address 1730 Rhode Island Ave, NW Suite 1014		FEC Identification Number C [REDACTED] Transaction ID : SB29.4343 Amount of Each Disbursement this Period [REDACTED] 250.00
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Web Hosting Services - IE Account		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Blueprint Interactive		Date of Disbursement MM / DD / YYYY 05 / 29 / 2019
Mailing Address 1730 Rhode Island Ave, NW Suite 1014		FEC Identification Number C [REDACTED] Transaction ID : SB29.4346 Amount of Each Disbursement this Period [REDACTED] 250.00
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Web Hosting Services - IE Account		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

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

[REDACTED] 750.00
[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DLGA PAC

Full Name (Last, First, Middle Initial) A. Forest Strategies LLC		Date of Disbursement MM / DD / YYYY 05 / 29 / 2019
Mailing Address 114 Quay Street		FEC Identification Number C Transaction ID : SB29.4348 Amount of Each Disbursement this Period 6000.00
City Alexandria	State VA	
Zip Code 22314		Memo Item <input type="checkbox"/>
Purpose of Disbursement Finance & Program Management Services - IE Account		
Candidate Name		Category/Type 001
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. Forest Strategies LLC		Date of Disbursement MM / DD / YYYY 06 / 28 / 2019
Mailing Address 114 Quay Street		FEC Identification Number C Transaction ID : SB29.4357 Amount of Each Disbursement this Period 6000.00
City Alexandria	State VA	
Zip Code 22314		Memo Item <input type="checkbox"/>
Purpose of Disbursement Finance & Program Management Services - IE Account		
Candidate Name		Category/Type 001
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. Pfeiffer Finance Strategies		Date of Disbursement MM / DD / YYYY 04 / 10 / 2019
Mailing Address 405 10th Street, NE		FEC Identification Number C Transaction ID : SB29.4333 Amount of Each Disbursement this Period 4000.00
City Washington	State DC	
Zip Code 20002		Memo Item <input type="checkbox"/>
Purpose of Disbursement Fundraising Services - IE Account		
Candidate Name		Category/Type 001
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).....▶	16000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DLGA PAC

Full Name (Last, First, Middle Initial) A. Pfeiffer Finance Strategies		Date of Disbursement MM / DD / YYYY 05 / 01 / 2019
Mailing Address 405 10th Street, NE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4342 Amount of Each Disbursement this Period 5000.00
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Fundraising Services - IE Account		Category/ Type 003
Candidate Name		Memo Item <input type="checkbox"/>
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. Pfeiffer Finance Strategies		Date of Disbursement MM / DD / YYYY 05 / 29 / 2019
Mailing Address 405 10th Street, NE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4349 Amount of Each Disbursement this Period 5000.00
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Fundraising Services - IE Account		Category/ Type 003
Candidate Name		Memo Item <input type="checkbox"/>
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. Pfeiffer Finance Strategies		Date of Disbursement MM / DD / YYYY 06 / 28 / 2019
Mailing Address 405 10th Street, NE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4356 Amount of Each Disbursement this Period 5000.00
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Fundraising Services - IE Account		Category/ Type 003
Candidate Name		Memo Item <input type="checkbox"/>
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).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DLGA PAC

A. Polly Pfeiffer

Full Name (Last, First, Middle Initial)

Mailing Address 405 10th Street, NW #401

City Washington State DC Zip Code 20002

Purpose of Disbursement Reimbursement: Travel Expenses - IE Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2019

FEC Identification Number: C

Transaction ID : **SB29.4334**

Amount of Each Disbursement this Period: 444.14

Memo Item

B. Corner Bakery

Full Name (Last, First, Middle Initial)

Mailing Address 529 14th Street, NW

City Washington State DC Zip Code 20045

Purpose of Disbursement Reimbursement memo: Event Catering

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2019

FEC Identification Number: C

Transaction ID : **SB29.4334.0**

Amount of Each Disbursement this Period: 368.89

Memo Item

C. Polly Pfeiffer

Full Name (Last, First, Middle Initial)

Mailing Address 405 10th Street, NW #401

City Washington State DC Zip Code 20002

Purpose of Disbursement Reimbursement: Travel Expenses - IE Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 14 / 2019

FEC Identification Number: C

Transaction ID : **SB29.4352**

Amount of Each Disbursement this Period: 682.34

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1126.48

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DLGA PAC

A. Amtrak

Full Name (Last, First, Middle Initial)

Mailing Address 60 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Reimbursement memo: Rail travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB29.4352.0

Amount of Each Disbursement this Period: 284.00

Memo Item

B. Hotelnight.com

Full Name (Last, First, Middle Initial)

Mailing Address 901 Market Street Suite 310

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Reimbursement memo: Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB29.4352.1

Amount of Each Disbursement this Period: 301.00

Memo Item

C. Rose Campaign Group LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1032 15th Street, NW #305

City Washington State DC Zip Code 20005

Purpose of Disbursement Strategic Services - IE Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2019

FEC Identification Number: C

Transaction ID : SB29.4328

Amount of Each Disbursement this Period: 6000.00

Memo Item

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

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

6000.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DLGA PAC

Full Name (Last, First, Middle Initial) A. Roshan Patel		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019	
Mailing Address 114 Quay Street		FEC Identification Number C [REDACTED] Transaction ID : SB29.4326 Amount of Each Disbursement this Period [REDACTED] 20727.23	
City Alexandria	State VA	Zip Code 22314	Category/ Type 003
Purpose of Disbursement Reimbursement: Event Catering & Facilities - IE Account			
Candidate Name		Memo Item <input type="checkbox"/>	
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. Rare Steakhouse		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019	
Mailing Address 1595 I Street, NW		FEC Identification Number C [REDACTED] Transaction ID : SB29.4326.0 Amount of Each Disbursement this Period [REDACTED] 20295.00	
City Washington	State DC	Zip Code 20005	Category/ Type 001
Purpose of Disbursement Reimbursement memo: Event Catering & Facilities			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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. Affordable Signs		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019	
Mailing Address 1101 30th Street, NW Suite 500		FEC Identification Number C [REDACTED] Transaction ID : SB29.4326.1 Amount of Each Disbursement this Period [REDACTED] 374.40	
City Washington	State DC	Zip Code 20007	Category/ Type 001
Purpose of Disbursement Reimbursement memo: Event signage			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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)..... ▶

[REDACTED] 20727.23

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DLGA PAC

A. Roshan Patel

Full Name (Last, First, Middle Initial)

Mailing Address 114 Quay Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Reimbursements: Event Travel, Catering & Facilities - IE Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 29 / 2019

FEC Identification Number: C

Transaction ID : **SB29.4347**

Amount of Each Disbursement this Period: 4958.40

Memo Item

B. Amtrak

Full Name (Last, First, Middle Initial)

Mailing Address 60 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Reimbursement memo: Rail travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 29 / 2019

FEC Identification Number: C

Transaction ID : **SB29.4347.0**

Amount of Each Disbursement this Period: 656.19

Memo Item

C. Fresco by Scotto

Full Name (Last, First, Middle Initial)

Mailing Address 34 E 52nd Street

City New York State NY Zip Code 10022

Purpose of Disbursement
Reimbursement memo: Event catering & facilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 29 / 2019

FEC Identification Number: C

Transaction ID : **SB29.4347.1**

Amount of Each Disbursement this Period: 4162.88

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	4958.40
TOTAL This Period (last page this line number only).....▶	100312.11

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 21
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
DLGA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Patel, Roshan, , ,			Nature of Debt (Purpose): Reimbursement: Airfare
Mailing Address 1090 Vermont Avenue, NW Suite 750			
City Washington	State DC	Zip Code 20005	

Outstanding Balance Beginning This Period <input type="text" value="1036.60"/>	Transaction ID : SD10.4160	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1036.60"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1036.60"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="1036.60"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="1036.60"/>