

# 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) 1001 G Street, NW  
Suite 800  
 Check if different than previously reported. (ACC) Washington DC 20001

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

C C00519413

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

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on 11 / 08 / 2016 in the State of  

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

Election on   /   /   in the State of  

5. Covering Period 10 / 01 / 2016 through 10 / 19 / 2016

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

Rosen, Hilary, , ,

Type or Print Name of Treasurer

Signature of Treasurer Rosen, Hilary, , , [Electronically Filed] Date 10 / 27 / 2016

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									
-----------------	--	--	--	--	--	--	--	--	--

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

L PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="92680.76"/>	<input type="text" value="92680.76"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="167158.76"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="99517.60"/>	<input type="text" value="1195752.40"/>
(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="266676.36"/>	<input type="text" value="1288433.16"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="85491.53"/>	<input type="text" value="1112248.33"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="181184.83"/>	<input type="text" value="176184.83"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

L PAC

Report Covering the Period: From: 10 / 01 / 2016 To: 10 / 19 / 2016

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).....	3500.00	81614.56
(ii) Unitemized .....	591.67	6224.01
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4091.67	87838.57
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	72.00	6147.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	4163.67	93985.57
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).....	128.93	594.61
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	95225.00	1101172.22
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)).....▶	99517.60	1195752.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	99517.60	1195752.40

**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 .....	786.98	149968.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	786.98	149968.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4800.00	124274.56
24. Independent Expenditures (use Schedule E) .....	0.00	2022.22
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).....	79904.55	835982.82
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)) ..	85491.53	1112248.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	85491.53	1112248.33

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4163.67	93985.57
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4163.67	93985.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	786.98	149968.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	128.93	594.61
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	658.05	149374.12

**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 28
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

**A. Felicio, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39 Westchester Rd  
 Address Line 2  
 City Jamaica Plain State MA Zip Code 02130-3451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Community Catalyst Occupation (for Individual) Fundraiser  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 12 / 2016  
**Transaction ID : VNW3HETNV61**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. Lord, Chastity, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 163 Washington Ave  
 14C  
 City Brooklyn State NY Zip Code 11205-2974  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Achievement First Occupation (for Individual) Chief External Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 13 / 2016  
**Transaction ID : VNW3HETSF27**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Rosen, Marilyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 Custer St  
 City Jamaica Plain State MA Zip Code 02130-3140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marilyn Rosen Presents LLC Occupation (for Individual) Booking Agent  
 Receipt For: 2016  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 10 / 04 / 2016  
**Transaction ID : VNW3HET74J9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Earmarked for Friends of Patrick Murphy

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 7 OF 28  
(check only one)

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

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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Slaughter, Randolph M., , ,**

Mailing Address 213 Concord Ave

City Cambridge	State MA	Zip Code 02138-1334
-------------------	-------------	------------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) architect
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
MM / DD / YYYY  
10 / 07 / 2016

**Transaction ID : VNW3HETDEV7**

Amount of Each Receipt this Period  
2700.00

Memo Item

Earmarked for DEBORAH ROSS FOR SENATE

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2700.00
<b>TOTAL</b> This Period (last page this line number only).....	3500.00

**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 8 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

**A. ANGIE CRAIG FOR CONGRESS**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 22116

City Eagan	State MN	Zip Code 55122-0116
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00575209

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
72.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		12		2016

**Transaction ID : VNW3HETNTW4**

Amount of Each Receipt this Period  
72.00

Memo Item

Refund

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	72.00
<b>TOTAL</b> This Period (last page this line number only).....▶	72.00



**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 9 OF 28
<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)  
**L PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Belton, Christine, , ,</b>			Date of Receipt MM / DD / YYYY 10 / 08 / 2016
Mailing Address 2710 Poplar St			<b>Transaction ID : VNW3HETDKQ7</b>
City Philadelphia	State PA	Zip Code 19130-1221	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Springfield School District		Occupation (for Individual) Teacher	<input type="checkbox"/> Non contribution account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Belzberg, Leslie, , ,</b>			Date of Receipt MM / DD / YYYY 10 / 14 / 2016
Mailing Address 5670 Wilshire Blvd Ste 1360			<b>Transaction ID : VNW3HETTDX3</b>
City Los Angeles	State CA	Zip Code 90036-5649	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Miramax Films		Occupation (for Individual) SVP TV & Film Production	<input type="checkbox"/> Non contribution account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bindler, Lori, , ,</b>			Date of Receipt MM / DD / YYYY 10 / 19 / 2016
Mailing Address 390 Mounts Corner Dr			<b>Transaction ID : VNW3HEV6483</b>
City Freehold	State NJ	Zip Code 07728-2562	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self		Occupation (for Individual) Hometown inc.	<input type="checkbox"/> Non contribution account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 28
<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)  
**L PAC**

**A. Bobby, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2A Colby Ct  
 City Lincoln Park State NJ Zip Code 07035-2036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self employed Occupation (for Individual) Tennis Professional  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 02 / 2016  
**Transaction ID : VNW3HESZR47**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Non contribution account

**B. Glott, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 Birch Hill Rd  
 City Newton State MA Zip Code 02465-2552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Museum of Fine Arts, Boston Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 15 / 2016  
**Transaction ID : VNW3HETTIVZ9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non contribution account

**C. Gluck, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 428 River View Plz  
 City Trenton State NJ Zip Code 08611-3420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gluckwalrath, llp Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 07 / 2016  
**Transaction ID : VNW3HETC8N0**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non contribution account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 28
<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)  
**L PAC**

**A. Grainger, Katherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 56 Court St  
 2E  
 City Brooklyn State NY Zip Code 11201-4912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Civitas Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 16 / 2016  
**Transaction ID : VNW3HETV597**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Non contribution account

**B. Levine, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4135 S.W. 43d Avenue  
 City Portland State OR Zip Code 97221  
 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 ▼ 250.00

Date of Receipt 10 / 14 / 2016  
**Transaction ID : VNW3HETTFA8**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non contribution account

**C. Merola, Marianne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 707 N Taylor Ave  
 City Oak Park State IL Zip Code 60302-1749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) McDonald's Occupation (for Individual) Education Programs Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 08 / 2016  
**Transaction ID : VNW3HETDV36**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 Non contribution account

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 28
<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)  
**L PAC**

**A. Miccio-McClean, Gerry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 175 Vogel Ave  
 City Staten Island State NY Zip Code 10309-3030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) self  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 14 / 2016  
**Transaction ID : VNW3HETT618**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 Non contribution account

**B. Miccio-McClean, Gerry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 175 Vogel Ave  
 City Staten Island State NY Zip Code 10309-3030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) self  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 17 / 2016  
**Transaction ID : VNW3HETY1E1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Non contribution account

**C. Muir, Bonnie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Coral PI  
 City Long Branch State NJ Zip Code 07740-6360  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Doc Sec Adm RETIRED Occupation (for Individual) Administrator  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 304.00

Date of Receipt 10 / 06 / 2016  
**Transaction ID : VNW3HETBTW5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Non contribution account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 28
<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)  
**L PAC**

**A. Newstat, Joyce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 California St # 27  
 City San Francisco State CA Zip Code 94109-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rocket Science Associates Occupation (for Individual) Policy Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 26400.00

Date of Receipt 10 / 04 / 2016  
**Transaction ID : VNW3HET85T0**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non contribution account

**B. Ploskonka, Andrea, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 73 Sunningdale Cir  
 City Manalapan State NJ Zip Code 07726-9358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Concept Engineering Consultants Occupation (for Individual) ADMIN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 13 / 2016  
**Transaction ID : VNW3HETQH41**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Non contribution account

**C. Ricketts, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 430 Sheridan Rd  
 City Wilmette State IL Zip Code 60091-2821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 397000.00

Date of Receipt 10 / 19 / 2016  
**Transaction ID : VNW3HEXMHC7**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item  
 Non contribution account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 51300.00  
**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 28
<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)  
**L PAC**

**A. Ricketts, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 430 Sheridan Rd  
 City Wilmette State IL Zip Code 60091-2821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 397000.00

Date of Receipt 10 / 19 / 2016  
**Transaction ID : VNW3HEXMNS6**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
 Non contribution account

**B. Ritchie, Alix, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 30220  
 City Fort Lauderdale State FL Zip Code 33303-0220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Media Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 80000.00

Date of Receipt 10 / 12 / 2016  
**Transaction ID : VNW3HETNTK3**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**C. Stallone, Kristine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 376 Read Ave  
 City Tuckahoe State NY Zip Code 10707-1622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ajws Occupation (for Individual) cpa  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1004.00

Date of Receipt 10 / 06 / 2016  
**Transaction ID : VNW3HETC0H1**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Non contribution account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35500.00
<b>TOTAL</b> This Period (last page this line number only).....	89800.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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. First Data - Merchant Services**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1 Western Maryland Pkwy

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2016

City Hagerstown State MD Zip Code 21740-5146

FEC Identification Number

Purpose of Disbursement  
Credit card processing fee

**C** [ ]

Candidate Name

Category/  
Type

**Transaction ID : VNV499TV7J**  
Amount of Each Disbursement this Period

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

[ ] 786.98

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

**C** [ ]

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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

[ ]

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

**C** [ ]

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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

[ ]

Memo Item

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

[ ] 786.98

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

[ ] 786.98

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

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

FOR LINE NUMBER:  
(check only one)

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

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. DEBORAH ROSS FOR SENATE**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: 10 / 13 / 2016

Mailing Address PO Box 28258

City Raleigh State NC Zip Code 27611-8258

Purpose of Disbursement: Conduit Contribution  
FEC Identification Number: C00589820  
Transaction ID: VNW3HETDE  
Amount of Each Disbursement this Period: 2700.00

Candidate Name: ROSS, DEBORAH K, , ,  
Category/Type: [ ]

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  Other (specify) ▼

State: NC District: 00  
Memo Item:  Earmarked by Randolph M. Slaughter

**B. Friends of Patrick Murphy**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: 10 / 13 / 2016

Mailing Address 4521 Pga Blvd # 412

City Palm Beach Gardens State FL Zip Code 33418-3997

Purpose of Disbursement: Conduit Contribution  
FEC Identification Number: C [ ]  
Transaction ID: VNW3HET74J  
Amount of Each Disbursement this Period: 100.00

Candidate Name: [ ]  
Category/Type: [ ]

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  Other (specify) ▼

State: [ ] District: [ ]  
Memo Item:  Earmarked by Marilyn Rosen

**C. JOSH GOTTHEIMER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: 10 / 17 / 2016

Mailing Address PO Box 584

City Ridgewood State NJ Zip Code 07451-0584

Purpose of Disbursement: Candidate Contribution  
FEC Identification Number: C00573949  
Transaction ID: VNV499TV7S  
Amount of Each Disbursement this Period: 2000.00

Candidate Name: GOTTHEIMER, JOSH, , ,  
Category/Type: [ ]

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  Other (specify) ▼

State: NJ District: 05  
Memo Item:

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4800.00



**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

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. 76 Words**

Full Name (Last, First, Middle Initial)

Mailing Address 1121 5th St NW

City Washington State DC Zip Code 20001-3605

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VNV499TV70

Amount of Each Disbursement this Period: 3285.25

Memo Item

**B. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Train travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 13 / 2016

FEC Identification Number: C

Transaction ID : VNV499TV71!

Amount of Each Disbursement this Period: 600.00

Memo Item

**C. Angel Foods**

Full Name (Last, First, Middle Initial)

Mailing Address 467 Commercial St

City Provincetown State MA Zip Code 02657-2413

Purpose of Disbursement Catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VNV499TV72

Amount of Each Disbursement this Period: 1257.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5142.25

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Authorize.net</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016
Mailing Address PO Box 8999		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV73!</b> Amount of Each Disbursement this Period 40.70
City San Francisco	State CA	Zip Code 94128-8999
Purpose of Disbursement Credit card processing fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address 700 13th St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV74!</b> Amount of Each Disbursement this Period 15.00
City Washington	State DC	Zip Code 20005-3950
Purpose of Disbursement Bank fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Beth for Florida</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 2016 Foxboro Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV78</b> Amount of Each Disbursement this Period 1000.00
City Orlando	State FL	Zip Code 32812-8658
Purpose of Disbursement Candidate Contribution		Category/ Type
Candidate Name <b>Beth for Florida</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

1055.70

**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

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

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

Full Name (Last, First, Middle Initial) <b>A. Carefirst Bluecross/Blueshield</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 840 1st St NE		FEC Identification Number C [ ] <b>Transaction ID : VNV499TV7A</b> Amount of Each Disbursement this Period [ ] 694.26
City Washington	State DC	Zip Code 20065-0003
Purpose of Disbursement Health Insurance		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Carr Workplace</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1101 Connecticut Ave NW Ste 450		FEC Identification Number C [ ] <b>Transaction ID : VNV499TV7B</b> Amount of Each Disbursement this Period [ ] 2752.69
City Washington	State DC	Zip Code 20036-4359
Purpose of Disbursement Rent		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>C. Christine Kilduff for State Rep</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address PO Box 65431		FEC Identification Number C [ ] <b>Transaction ID : VNV499TV7M</b> Amount of Each Disbursement this Period [ ] 500.00
City Tacoma	State WA	Zip Code 98464-1431
Purpose of Disbursement Candidate Contribution		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3946.95
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)  
**A. Collective Conscience, LLC**

Mailing Address 2112 8th St NW  
Apt 524

City Washington State DC Zip Code 20001-8208

Purpose of Disbursement Digital Communications

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VNV499TV7D

Amount of Each Disbursement this Period: 6000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Collective Conscience, LLC**

Mailing Address 2112 8th St NW  
Apt 524

City Washington State DC Zip Code 20001-8208

Purpose of Disbursement Digital Communications

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VNV499TV7E:

Amount of Each Disbursement this Period: 627.80

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Ellas Wood Fired Pizza**

Mailing Address 610 9th St NW

City Washington State DC Zip Code 20001-5301

Purpose of Disbursement Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 07 / 2016

FEC Identification Number: C

Transaction ID : VNV499TV7C

Amount of Each Disbursement this Period: 43.03

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6670.83

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial) <b>A. EMILY's List NF</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address 1800 M St NW Ste 375N		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV7H</b> Amount of Each Disbursement this Period 36000.00
City Washington	State DC	Zip Code 20036-5862
Purpose of Disbursement Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. First Data - Merchant Services</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1 Western Maryland Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV7K</b> Amount of Each Disbursement this Period 1280.07
City Hagerstown	State MD	Zip Code 21740-5146
Purpose of Disbursement Credit card processing fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Fulton for Freeholder</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 1340 State Route 36 Ste 28		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV7N</b> Amount of Each Disbursement this Period 500.00
City Hazlet	State NJ	Zip Code 07730-1735
Purpose of Disbursement Candidate Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

37780.07

**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

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

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

Full Name (Last, First, Middle Initial) <b>A. Google</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV7P</b> Amount of Each Disbursement this Period [REDACTED] 35.00
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Internet		Category/ Type [REDACTED]
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>B. Kaiser HPS</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1615 L St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV7T</b> Amount of Each Disbursement this Period [REDACTED] 209.66
City Washington	State DC	Zip Code 20036-5610
Purpose of Disbursement Health Insurance		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>C. Kight, Kate, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address 1629 L St NE Unit 303		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV7V</b> Amount of Each Disbursement this Period [REDACTED] 1278.14
City Washington	State DC	Zip Code 20002-3055
Purpose of Disbursement Payroll		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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1522.80
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Kight, Kate, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 1629 L St NE Unit 303		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV7M</b> Amount of Each Disbursement this Period [REDACTED] 130.92
City Washington	State DC	Zip Code 20002-3055
Purpose of Disbursement Travel expenses		<input type="checkbox"/> 001 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lea Krauss for Judge Campaign</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 3101 N Federal Hwy Ste 401		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV7Y!</b> Amount of Each Disbursement this Period [REDACTED] 1000.00
City Fort Lauderdale	State FL	Zip Code 33306-1073
Purpose of Disbursement Candidate Contribution		<input type="checkbox"/> [REDACTED] Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mida, Jason, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 526 12th St NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV7C</b> Amount of Each Disbursement this Period [REDACTED] 5000.00
City Washington	State DC	Zip Code 20002-6310
Purpose of Disbursement Fundraising consultant		<input type="checkbox"/> [REDACTED] Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

[REDACTED] 6130.92
[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

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

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

Full Name (Last, First, Middle Initial) <b>A. Mission Control Inc</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 624 Hebron Ave Bldg 200		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV83</b> Amount of Each Disbursement this Period 1024.00
City Glastonbury	State CT	Zip Code 06033-2470
Purpose of Disbursement Printing		Category/ Type 001
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>B. New York Times</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address 620 8th Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV84</b> Amount of Each Disbursement this Period 37.01
City New York	State NY	Zip Code 10018-1618
Purpose of Disbursement Subscription		Category/ Type
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>C. Olive Street Design</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VNV499TV86</b> Amount of Each Disbursement this Period 25.00
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website services		Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1086.01
<b>TOTAL</b> This Period (last page this line number only).....▶	





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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement Payroll taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VNV499TV8F

Amount of Each Disbursement this Period: 2369.32

Memo Item

**B. PCMS, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1050 17th St NW Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement Accounting services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VNV499TV8G

Amount of Each Disbursement this Period: 2719.51

Memo Item

**C. Practice Makes Progress**

Full Name (Last, First, Middle Initial)

Mailing Address 1875 Connecticut Ave NW FI 10

City Washington State DC Zip Code 20009-5728

Purpose of Disbursement Digital strategy consultant

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VNV499TV7F

Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 10088.83

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Shipp, Elizabeth, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address 15955 Frederick Rd Apt 1308		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499TV79:</b> Amount of Each Disbursement this Period 3374.48
City Rockville	State MD	
Purpose of Disbursement Payroll	Zip Code 20855-2295	Memo Item <input type="checkbox"/>
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>B. Simple Texting</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address 18851 NE 29th Ave Ste 700		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499TV8J:</b> Amount of Each Disbursement this Period 45.00
City Miami	State FL	
Purpose of Disbursement Phones	Zip Code 33180-2845	Memo Item <input type="checkbox"/>
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>C. SkipJack</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 8500 Governors Hill Dr		FEC Identification Number <b>C</b> <b>Transaction ID : VNV499TV8N:</b> Amount of Each Disbursement this Period 1185.62
City Symmes Twp	State OH	
Purpose of Disbursement Insurance	Zip Code 45249-1384	Memo Item <input type="checkbox"/>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4605.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial) <b>A. VSP</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016	
Mailing Address 3333 Quality Dr		FEC Identification Number C [ ]	
City Rancho Cordova	State CA	Zip Code 95670-7985	Transaction ID : VNV499TV8R
Purpose of Disbursement Insurance		Category/ Type [ ]	Amount of Each Disbursement this Period [ ] 28.88
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period [ ]
Purpose of Disbursement		Category/ Type [ ]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period [ ]
Purpose of Disbursement		Category/ Type [ ]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 28.88
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 79651.10