

# 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**  
**MASSACHUSETTS VICTORY COMMITTEE**

ADDRESS (number and street) **310 FIRST STREET, SE**  
Check if different than previously reported. (ACC) **WASHINGTON DC 20003**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00549782** 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  **11** /  **06** /  **2018** in the State of  **MA**

5. Covering Period  **10** /  **18** /  **2018** through  **11** /  **26** /  **2018**

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

Signature of Treasurer CRATE, BRADLEY, T., , [Electronically Filed] Date  **11** /  **29** /  **2018**

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**MASSACHUSETTS VICTORY COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		337573.12
(b) Cash on Hand at Beginning of Reporting Period.....	304926.39	
(c) Total Receipts (from Line 19) .....	227979.99	3525518.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	532906.38	3863091.42
7. Total Disbursements (from Line 31).....	448435.44	3778620.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	84470.94	84470.94
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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

**MASSACHUSETTS VICTORY COMMITTEE**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	226950.00	3476000.00
(ii) Unitemized .....	0.00	400.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	226950.00	3476400.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	47500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	227950.00	3523900.00
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).....	29.99	1618.30
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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)).....▶	227979.99	3525518.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	227979.99	3525518.30

**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 .....	86610.00	680104.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	86610.00	680104.30
22. Transfers to Affiliated/Other Party Committees.....	361575.44	3074266.18
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 .....	250.00	24250.00
(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)).....	250.00	24250.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	448435.44	3778620.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	448435.44	3778620.48

**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) .....	227950.00	3523900.00
34. Total Contribution Refunds (from Line 28(d)) .....	250.00	24250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	227700.00	3499650.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	86610.00	680104.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	29.99	1618.30
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	86580.01	678486.00

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

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

FOR LINE NUMBER: PAGE 6 OF 53  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. BEALS, CHRIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 HURDS ROAD  
 City CLINTONDALE    State NY    Zip Code 12515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GHOST MANAGEMENT GROUP LLC    Occupation (for Individual) PRESIDENT AND GENERAL COUNSEL  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 24 / 2018  
**Transaction ID : SA11AI.14872**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**B. BERARDI, CHRIS, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 158  
 City WABAN    State MA    Zip Code 02468  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JDC DEMOLITION COMPANY    Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 18 / 2018  
**Transaction ID : SA11AI.14864**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. COX, HOWARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 SEAPORT BLVD  
 S7A  
 City BOSTON    State MA    Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED    Occupation (for Individual) VENTURE CAPITAL  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 24 / 2018  
**Transaction ID : SA11AI.14874**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**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 7 OF 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. DENNISTON, BRACKETT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 207 KING CASAR RD  
 BOX 2270  
 City DUXBURY State MA Zip Code 02331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GOODWIN PROCTER Occupation (for Individual) LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 22 / 2018  
**Transaction ID : SA11AI.14870**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. FELDMAN, JERALD, R, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 187 NEWTON STREET  
 City WESTON State MA Zip Code 02193  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REAL ESTATE BROKER Occupation (for Individual) FELDMAN REALTY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 18 / 2018  
**Transaction ID : SA11AI.14860**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. HAYNES, MICHAEL, C, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 57 CANTON ST  
 City S. EASTON State MA Zip Code 02356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HAYNES GROUP, INC, Occupation (for Individual) OWNER/CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 19 / 2018  
**Transaction ID : SA11AI.14868**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 8500.00  
**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 8 OF 53  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. KARAM, ROBERT, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 456 ROCK ST  
 PO BOX 549  
 City FALL RIVER State MA Zip Code 02720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KARAM FINANCIAL GROUP Occupation (for Individual) PRINCIPAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 30 / 2018  
**Transaction ID : SA11AI.14879**  
 Amount of Each Receipt this Period 4000.00  
 Memo Item

**B. KELLEHER, NANCY, S, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 47 CROOKED LANE  
 City DUXBURY State MA Zip Code 02332  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 43900.00

Date of Receipt 11 / 01 / 2018  
**Transaction ID : SA11AI.14955**  
 Amount of Each Receipt this Period 43900.00  
 Memo Item

**C. MARTIN, GERARD, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 CHURCH RD  
 City RYE BEACH State NH Zip Code 03871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 43900.00

Date of Receipt 10 / 25 / 2018  
**Transaction ID : SA11AI.14876**  
 Amount of Each Receipt this Period 43900.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 91800.00  
**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 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. MUSS, STEPHEN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1173 N HOOSAC RD  
 City WILLIAMSTOWN State MA Zip Code 02167  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 43900.00

Date of Receipt 10 / 25 / 2018  
**Transaction ID : SA11AI.14878**  
 Amount of Each Receipt this Period 43900.00  
 Memo Item

**B. PELLEGRINI, LORA, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 WARREN ST UNIT 107  
 City CHARLESTOWN State MA Zip Code 02129-3621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MA ASSOC. OF HEALTH PLANS Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 18 / 2018  
**Transaction ID : SA11AI.14862**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. PERKINS, RANDAL, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 565 E HILLSBORO BLVD  
 City DEERFIELD BEACH State FL Zip Code 33441-3543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ASHBRIIT, INC. Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 24 / 2018  
**Transaction ID : SA11AI.14873**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	59150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 10 OF 53  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. TOCCO, JESSICA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 EDGEMERE STREET  
 City MELROSE State MA Zip Code 02176  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) RASKY PARTNERS Occupation (for Individual) SENIOR VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 18 / 2018  
**Transaction ID : SA11AI.14865**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. WEINER, ROBERTA, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 400 ATLANTIC AVE  
 City BOSTON State MA Zip Code 02110  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 40000.00

Date of Receipt 10 / 18 / 2018  
**Transaction ID : SA11AI.14867**  
 Amount of Each Receipt this Period 40000.00  
 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  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45000.00
<b>TOTAL</b> This Period (last page this line number only).....	226950.00

**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 11 OF 53
<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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**CALPINE CORPORATION PAC**

Mailing Address 717 TEXAS STREET, SUITE 1000

City HOUSTON	State TX	Zip Code 77002
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00362640

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		26		2018

**Transaction ID : SA11C.14959**

Amount of Each Receipt this Period  
1000.00

Memo Item

**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
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Amount of Each Receipt this Period

Memo Item

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ALCOCK, CAROLINE, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018	
Mailing Address 1 EMERSON PLACE 17F		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14891</b> Amount of Each Disbursement this Period 10000.00	
City BOSTON	State MA	Zip Code 02114	Category/ Type [ ]
Purpose of Disbursement FUNDRAISING CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ALCOCK, CAROLINE, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018	
Mailing Address 1 EMERSON PLACE 17F		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14892</b> Amount of Each Disbursement this Period 7500.00	
City BOSTON	State MA	Zip Code 02114	Category/ Type [ ]
Purpose of Disbursement FUNDRAISING CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. AMAZON.COM</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2018	
Mailing Address 410 TERRY AVE N		FEC Identification Number C [ ] <b>Transaction ID : SB21B.1488t</b> Amount of Each Disbursement this Period 29.25	
City SEATTLE	State WA	Zip Code 98109	Category/ Type [ ]
Purpose of Disbursement OFFICE SUPPLIES		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	17529.25
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. AMAZON.COM**

Full Name (Last, First, Middle Initial)

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 29 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14881

Amount of Each Disbursement this Period: 113.19

Memo Item

**B. AMAZON.COM**

Full Name (Last, First, Middle Initial)

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14960

Amount of Each Disbursement this Period: 19.99

Memo Item

**C. AMAZON.COM**

Full Name (Last, First, Middle Initial)

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 13 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14961

Amount of Each Disbursement this Period: 19.99

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 153.17

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. APEX

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2018

Mailing Address 138 CONANT STREET  
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
MERCHANT FEES

FEC Identification Number

C [ ]

Transaction ID : SB21B.14882  
Amount of Each Disbursement this Period

[ ] 400.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

### B. APEX

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2018

Mailing Address 138 CONANT STREET  
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
MERCHANT FEES

FEC Identification Number

C [ ]

Transaction ID : SB21B.14883  
Amount of Each Disbursement this Period

[ ] 200.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

### C. APEX

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2018

Mailing Address 138 CONANT STREET  
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
MERCHANT FEES

FEC Identification Number

C [ ]

Transaction ID : SB21B.14884  
Amount of Each Disbursement this Period

[ ] 400.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

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

[ ] 1000.00

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ARAMARK**

Mailing Address 1101 MARKET STREET

City PHILADELPHIA State PA Zip Code 19107

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 24 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14885  
Amount of Each Disbursement this Period  
280.55

Memo Item

Full Name (Last, First, Middle Initial)

**B. ARAMARK**

Mailing Address 1101 MARKET STREET

City PHILADELPHIA State PA Zip Code 19107

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 19 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14962  
Amount of Each Disbursement this Period  
95.87

Memo Item

Full Name (Last, First, Middle Initial)

**C. BACK BAY GARAGE**

Mailing Address 222 BERKELEY ST

City BOSTON State MA Zip Code 02116

Purpose of Disbursement  
PARKING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14886  
Amount of Each Disbursement this Period  
42.00

Memo Item

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

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

418.42

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. BJ'S WHOLESALE</b>		Date of Disbursement MM / DD / YYYY 10 / 22 / 2018
Mailing Address 66 SEYON ST		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.14887</b> Amount of Each Disbursement this Period [REDACTED] 463.66
City WALTHAM	State MA	Zip Code 02453
Purpose of Disbursement OFFICE SUPPLIES		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. BJ'S WHOLESALE</b>		Date of Disbursement MM / DD / YYYY 11 / 05 / 2018
Mailing Address 66 SEYON ST		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.14964</b> Amount of Each Disbursement this Period [REDACTED] 139.78
City WALTHAM	State MA	Zip Code 02453
Purpose of Disbursement OFFICE SUPPLIES		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>C. BOSTON TAXI</b>		Date of Disbursement MM / DD / YYYY 10 / 22 / 2018
Mailing Address 37-03 21ST STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.14888</b> Amount of Each Disbursement this Period [REDACTED] 53.15
City LONG ISLAND CITY	State NY	Zip Code 11101
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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	

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

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

[REDACTED] 656.59
[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BOSTON TAXI**

Mailing Address 37-03 21ST STREET

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14890  
Amount of Each Disbursement this Period  
19.90

Memo Item

Full Name (Last, First, Middle Initial)

**B. BOSTON TAXI**

Mailing Address 37-03 21ST STREET

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14965  
Amount of Each Disbursement this Period  
19.51

Memo Item

Full Name (Last, First, Middle Initial)

**C. BOSTON TAXI**

Mailing Address 37-03 21ST STREET

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 08 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14966  
Amount of Each Disbursement this Period  
9.80

Memo Item

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

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

49.21

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BOSTON TAXI**

Mailing Address 37-03 21ST STREET

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14967  
Amount of Each Disbursement this Period  
6.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. BOSTON TAXI**

Mailing Address 37-03 21ST STREET

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 20 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14968  
Amount of Each Disbursement this Period  
25.30

Memo Item

Full Name (Last, First, Middle Initial)

**C. CHICK-FIL-A**

Mailing Address 140 PROVIDENCE HWY

City DEDHAM State MA Zip Code 02026

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14971  
Amount of Each Disbursement this Period  
336.52

Memo Item

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

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

368.02

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DBP CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018	
Mailing Address 500 LINCOLN ST		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14895</b> Amount of Each Disbursement this Period [ ] 16000.00	
City ALLSTON	State MA	Zip Code 02134	Category/ Type [ ]
Purpose of Disbursement FUNDRAISING CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: [ ] District: [ ]			

Full Name (Last, First, Middle Initial) <b>B. DBP CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2018	
Mailing Address 500 LINCOLN ST		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14972</b> Amount of Each Disbursement this Period [ ] 20000.00	
City ALLSTON	State MA	Zip Code 02134	Category/ Type [ ]
Purpose of Disbursement FUNDRAISING CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: [ ] District: [ ]			

Full Name (Last, First, Middle Initial) <b>C. DUNKIN DONUTS</b>		Date of Disbursement MM / DD / YYYY 10 / 22 / 2018	
Mailing Address 49 MT AUBURN ST		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14896</b> Amount of Each Disbursement this Period [ ] 101.59	
City WATERTOWN	State MA	Zip Code 02472	Category/ Type [ ]
Purpose of Disbursement MEETING EXPENSE: MEALS		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) ▼		Memo Item <input type="checkbox"/>
State: [ ] District: [ ]			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 36101.59
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DUNKIN DONUTS**

Mailing Address 49 MT AUBURN ST

City WATERTOWN State MA Zip Code 02472

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14897  
Amount of Each Disbursement this Period  
105.39

Memo Item

Full Name (Last, First, Middle Initial)

**B. DUNKIN DONUTS**

Mailing Address 49 MT AUBURN ST

City WATERTOWN State MA Zip Code 02472

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14973  
Amount of Each Disbursement this Period  
82.37

Memo Item

Full Name (Last, First, Middle Initial)

**C. EXXONMOBIL**

Mailing Address 5959 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039

Purpose of Disbursement  
TRAVEL: FUEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14898  
Amount of Each Disbursement this Period  
59.97

Memo Item

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

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

247.73

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EXXONMOBIL**

Mailing Address 5959 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039

Purpose of Disbursement  
TRAVEL: FUEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14975  
Amount of Each Disbursement this Period  
68.31

Memo Item

Full Name (Last, First, Middle Initial)

**B. FOUR SEASONS**

Mailing Address 200 BOYLSTON STREET

City BOSTON State MA Zip Code 02116

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14976  
Amount of Each Disbursement this Period  
94.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. FOUR SEASONS**

Mailing Address 200 BOYLSTON STREET

City BOSTON State MA Zip Code 02116

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14977  
Amount of Each Disbursement this Period  
150.19

Memo Item

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

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

313.40

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. FOUR SEASONS**

Full Name (Last, First, Middle Initial)

Mailing Address 200 BOYLSTON STREET

City BOSTON State MA Zip Code 02116

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 23 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14978

Amount of Each Disbursement this Period: 93.83

Memo Item

**B. GARAGE AT 100 CLARENDON**

Full Name (Last, First, Middle Initial)

Mailing Address 100 CLARENDON STREET

City BOSTON State MA Zip Code 02116

Purpose of Disbursement PARKING SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14979

Amount of Each Disbursement this Period: 36.00

Memo Item

**C. GARAGE AT 100 CLARENDON**

Full Name (Last, First, Middle Initial)

Mailing Address 100 CLARENDON STREET

City BOSTON State MA Zip Code 02116

Purpose of Disbursement PARKING SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2018

FEC Identification Number: C

Transaction ID : SB21B.1498t

Amount of Each Disbursement this Period: 36.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 165.83

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. GRIFFIN, JUSTIN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 13 DARMOUTH ST.

City BOSTON State MA Zip Code 02116

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14907

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. HENRIETTA'S TABLE**

Full Name (Last, First, Middle Initial)

Mailing Address 1 BENNETT ST

City CAMBRIDGE State MA Zip Code 02138

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14901

Amount of Each Disbursement this Period: 307.08

Memo Item

**C. HENRIETTA'S TABLE**

Full Name (Last, First, Middle Initial)

Mailing Address 1 BENNETT ST

City CAMBRIDGE State MA Zip Code 02138

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 09 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14981

Amount of Each Disbursement this Period: 438.93

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5746.01

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HOTEL TONIGHT**

Mailing Address 144 2ND STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 22 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14902  
Amount of Each Disbursement this Period  
303.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOTEL TONIGHT**

Mailing Address 144 2ND STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 19 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14982  
Amount of Each Disbursement this Period  
312.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. INSIDE PHILANTHROPY**

Mailing Address 846 12TH ST. #2

City SANTA MONICA State CA Zip Code 90403

Purpose of Disbursement  
ONLINE SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14983  
Amount of Each Disbursement this Period  
47.00

Memo Item

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

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

662.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. INSTACART**

Mailing Address 50 BEALE STREET  
SUITE 600

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.14904  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. INSTACART**

Mailing Address 50 BEALE STREET  
SUITE 600

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.14905  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. MASSACHUSETTS PORT AUTHORITY**

Mailing Address LOGAN AIRPORT  
TERMINAL A

City EAST BOSTON State MA Zip Code 02128

Purpose of Disbursement  
PARKING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.14984  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MOOO**

Mailing Address 15 BEACON ST

City BOSTON State MA Zip Code 02180

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 29 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14910  
Amount of Each Disbursement this Period  
669.95

Memo Item

Full Name (Last, First, Middle Initial)

**B. MOOO**

Mailing Address 15 BEACON ST

City BOSTON State MA Zip Code 02180

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 20 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14986  
Amount of Each Disbursement this Period  
125.93

Memo Item

Full Name (Last, First, Middle Initial)

**C. POST 390**

Mailing Address 406 STUART STREET

City BOSTON State MA Zip Code 02116

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 31 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14912  
Amount of Each Disbursement this Period  
64.04

Memo Item

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

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

859.92

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. RED CURVE SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2018
Mailing Address 138 CONANT STREET 2ND FLOOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14987</b> Amount of Each Disbursement this Period 8000.00
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		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. RED CURVE SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 11 / 05 / 2018
Mailing Address 138 CONANT STREET 2ND FLOOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14988</b> Amount of Each Disbursement this Period 43.70
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		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. STAPLES</b>		Date of Disbursement MM / DD / YYYY 11 / 05 / 2018
Mailing Address 1660 SOLDIERS FIELD RD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14993</b> Amount of Each Disbursement this Period 778.94
City BRIGHTON	State MA	Zip Code 02135
Purpose of Disbursement OFFICE SUPPLIES		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).....▶	8822.64
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. THE CAPITAL GRILLE**

Full Name (Last, First, Middle Initial)

Mailing Address JOHN B. HYNES VETERANS MEMORIAL CO  
900 BOYLSTON ST

City BOSTON State MA Zip Code 02115

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 08 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14995

Amount of Each Disbursement this Period: 170.84

Memo Item

**B. THE FAIRMONT COPLEY PLAZA**

Full Name (Last, First, Middle Initial)

Mailing Address 138 JAMES ST  
ATTN: LYNSAY PICCIANO

City BOSTON State MA Zip Code 02116

Purpose of Disbursement TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 18 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14922

Amount of Each Disbursement this Period: 53.87

Memo Item

**C. THE FAIRMONT COPLEY PLAZA**

Full Name (Last, First, Middle Initial)

Mailing Address 138 JAMES ST  
ATTN: LYNSAY PICCIANO

City BOSTON State MA Zip Code 02116

Purpose of Disbursement TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 18 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14923

Amount of Each Disbursement this Period: 71.92

Memo Item

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

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

296.63

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. THE FAIRMONT COPLEY PLAZA**

Mailing Address 138 JAMES ST  
ATTN: LYNSAY PICCIANO

City BOSTON State MA Zip Code 02116

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 24 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14924  
Amount of Each Disbursement this Period  
72.99

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE FAIRMONT COPLEY PLAZA**

Mailing Address 138 JAMES ST  
ATTN: LYNSAY PICCIANO

City BOSTON State MA Zip Code 02116

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 29 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14925  
Amount of Each Disbursement this Period  
125.93

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE FAIRMONT COPLEY PLAZA**

Mailing Address 138 JAMES ST  
ATTN: LYNSAY PICCIANO

City BOSTON State MA Zip Code 02116

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 05 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14996  
Amount of Each Disbursement this Period  
172.31

Memo Item

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

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

371.23

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. THE FAIRMONT COPLEY PLAZA**

Mailing Address 138 JAMES ST  
ATTN: LYNSAY PICCIANO

City BOSTON State MA Zip Code 02116

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 07 / 2018

FEC Identification Number

C

Transaction ID : SB21B.14997  
Amount of Each Disbursement this Period

46.01

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE FAIRMONT COPLEY PLAZA**

Mailing Address 138 JAMES ST  
ATTN: LYNSAY PICCIANO

City BOSTON State MA Zip Code 02116

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

FEC Identification Number

C

Transaction ID : SB21B.14998  
Amount of Each Disbursement this Period

103.09

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE FAIRMONT COPLEY PLAZA**

Mailing Address 138 JAMES ST  
ATTN: LYNSAY PICCIANO

City BOSTON State MA Zip Code 02116

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 23 / 2018

FEC Identification Number

C

Transaction ID : SB21B.14999  
Amount of Each Disbursement this Period

90.97

Memo Item

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

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

240.07

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. THE LENOX**

Mailing Address 61 EXETER STREET

City BOSTON State MA Zip Code 02116

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.15000  
Amount of Each Disbursement this Period  
314.74

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE LENOX**

Mailing Address 61 EXETER STREET

City BOSTON State MA Zip Code 02116

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.15001  
Amount of Each Disbursement this Period  
328.26

Memo Item

Full Name (Last, First, Middle Initial)

**C. TORO BOSTON**

Mailing Address 1704 WASHINGTON ST

City BOSTON State MA Zip Code 02118

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.14927  
Amount of Each Disbursement this Period  
358.88

Memo Item

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

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

1001.88

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. TSIMORTOS, NICK, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018	
Mailing Address 23 MARSHALL ST.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14911</b> Amount of Each Disbursement this Period [ ] 3500.00	
City SOMERVILLE	State MA	Zip Code 02145	Category/ Type [ ]
Purpose of Disbursement FINANCIAL CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14928</b> Amount of Each Disbursement this Period [ ] 6.58	
City BOSTON	State MA	Zip Code 02114	Category/ Type [ ]
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14925</b> Amount of Each Disbursement this Period [ ] 18.91	
City BOSTON	State MA	Zip Code 02114	Category/ Type [ ]
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3525.49
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14930</b> Amount of Each Disbursement this Period [ ] 21.24
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14931</b> Amount of Each Disbursement this Period [ ] 3.00
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14932</b> Amount of Each Disbursement this Period [ ] 17.68
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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)..... ▶

41.92

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.14933</b> Amount of Each Disbursement this Period [REDACTED] 19.13
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.14934</b> Amount of Each Disbursement this Period [REDACTED] 24.54
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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>C. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.14935</b> Amount of Each Disbursement this Period [REDACTED] 27.49
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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	

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

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

[REDACTED] 71.16
[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 22 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.14936</b> Amount of Each Disbursement this Period [REDACTED] 43.73	
City BOSTON	State MA	Zip Code 02114	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 23 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.14937</b> Amount of Each Disbursement this Period [REDACTED] 11.21	
City BOSTON	State MA	Zip Code 02114	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 23 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.14938</b> Amount of Each Disbursement this Period [REDACTED] 12.40	
City BOSTON	State MA	Zip Code 02114	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 67.34
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. UBER TECHNOLOGIES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 239 CAUSEWAY STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14939

Amount of Each Disbursement this Period: 7.08

Memo Item

**B. UBER TECHNOLOGIES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 239 CAUSEWAY STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14940

Amount of Each Disbursement this Period: 9.31

Memo Item

**C. UBER TECHNOLOGIES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 239 CAUSEWAY STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.14941

Amount of Each Disbursement this Period: 10.69

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 27.08

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 24 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14942</b> Amount of Each Disbursement this Period [ ] 26.35
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14943</b> Amount of Each Disbursement this Period [ ] 13.13
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14944</b> Amount of Each Disbursement this Period [ ] 27.89
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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).....▶	[ ] 67.37
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 26 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14945</b> Amount of Each Disbursement this Period [ ] 7.11
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 26 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14946</b> Amount of Each Disbursement this Period [ ] 7.64
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 26 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14947</b> Amount of Each Disbursement this Period [ ] 23.45
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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).....▶	[ ] 38.20
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 26 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14948</b> Amount of Each Disbursement this Period [ ] 35.58
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14949</b> Amount of Each Disbursement this Period [ ] 7.11
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.14950</b> Amount of Each Disbursement this Period [ ] 21.89
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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).....▶	[ ] 64.58
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [REDACTED]	
City BOSTON	State MA	Zip Code 02114	Transaction ID : <b>SB21B.14951</b>
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/Type	Amount of Each Disbursement this Period 49.56
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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [REDACTED]	
City BOSTON	State MA	Zip Code 02114	Transaction ID : <b>SB21B.15005</b>
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/Type	Amount of Each Disbursement this Period 5.00
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [REDACTED]	
City BOSTON	State MA	Zip Code 02114	Transaction ID : <b>SB21B.15006</b>
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/Type	Amount of Each Disbursement this Period 8.24
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	62.80
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 05 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15007</b> Amount of Each Disbursement this Period [ ] 7.11
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 05 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15008</b> Amount of Each Disbursement this Period [ ] 9.88
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 05 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15009</b> Amount of Each Disbursement this Period [ ] 21.88
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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).....▶	[ ] 38.87
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 05 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15010</b> Amount of Each Disbursement this Period [ ] 29.52
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15011</b> Amount of Each Disbursement this Period [ ] 14.58
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15012</b> Amount of Each Disbursement this Period [ ] 14.96
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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).....▶	[ ] 59.06
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15013</b> Amount of Each Disbursement this Period [ ] 15.31
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15014</b> Amount of Each Disbursement this Period [ ] 19.37
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 08 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15015</b> Amount of Each Disbursement this Period [ ] 10.00
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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).....▶	[ ] 44.68
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. UBER TECHNOLOGIES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 239 CAUSEWAY STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2018

FEC Identification Number: C

Transaction ID : SB21B.15016

Amount of Each Disbursement this Period: 22.10

Memo Item

**B. UBER TECHNOLOGIES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 239 CAUSEWAY STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2018

FEC Identification Number: C

Transaction ID : SB21B.15017

Amount of Each Disbursement this Period: 51.55

Memo Item

**C. UBER TECHNOLOGIES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 239 CAUSEWAY STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2018

FEC Identification Number: C

Transaction ID : SB21B.15018

Amount of Each Disbursement this Period: 7.11

Memo Item

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

80.76

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 13 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15019</b> Amount of Each Disbursement this Period [ ] 22.67
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 14 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15020</b> Amount of Each Disbursement this Period [ ] 16.76
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 14 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15021</b> Amount of Each Disbursement this Period [ ] 23.10
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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)..... ▶

62.53

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15022</b> Amount of Each Disbursement this Period [ ] 18.77
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15023</b> Amount of Each Disbursement this Period [ ] 19.10
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15024</b> Amount of Each Disbursement this Period [ ] 22.50
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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).....▶	[ ] 60.37
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.15025</b> Amount of Each Disbursement this Period [REDACTED] 23.45
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.15026</b> Amount of Each Disbursement this Period [REDACTED] 27.37
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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>C. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2018
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.15027</b> Amount of Each Disbursement this Period [REDACTED] 29.14
City BOSTON	State MA	Zip Code 02114
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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	

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

79.96

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15028</b> Amount of Each Disbursement this Period [ ] 33.34	
City BOSTON	State MA	Zip Code 02114	Category/ Type [ ]
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 20 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.15029</b> Amount of Each Disbursement this Period [ ] 5.00	
City BOSTON	State MA	Zip Code 02114	Category/ Type [ ]
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. UBER TECHNOLOGIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 20 / 2018	
Mailing Address 239 CAUSEWAY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.1503t</b> Amount of Each Disbursement this Period [ ] 11.29	
City BOSTON	State MA	Zip Code 02114	Category/ Type [ ]
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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)..... ▶

49.63

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. UBER TECHNOLOGIES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 239 CAUSEWAY STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 20 / 2018

FEC Identification Number: C

Transaction ID : SB21B.15031

Amount of Each Disbursement this Period: 16.04

Memo Item

**B. UBER TECHNOLOGIES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 239 CAUSEWAY STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 23 / 2018

FEC Identification Number: C

Transaction ID : SB21B.15032

Amount of Each Disbursement this Period: 6.98

Memo Item

**C. VERIZON WIRELESS**

Full Name (Last, First, Middle Initial)

Mailing Address 15505 SAND CANYON AVENUE

City IRVINE State CA Zip Code 92618

Purpose of Disbursement MOBILE PHONE EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2018

FEC Identification Number: C

Transaction ID : SB21B.15033

Amount of Each Disbursement this Period: 465.93

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 488.95

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VICTORY ADVISORS**

Mailing Address 50 BIRCHILL ROAD

City CENTERVILLE State MA Zip Code 02632

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 18 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.14953**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C  
Amount of Each Disbursement this Period

Memo Item

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

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

5000.00  
85427.53

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 310 FIRST STREET, SE

M M M	/	D D D	/	Y Y Y Y Y
10		19		2018

City WASHINGTON State DC Zip Code 20003

FEC Identification Number

Purpose of Disbursement TRANSFER

C
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Candidate Name

Transaction ID : SB22.14913

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

27529.95
----------

State: District:

Memo Item

**B. REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 310 FIRST STREET, SE

M M M	/	D D D	/	Y Y Y Y Y
10		19		2018

City WASHINGTON State DC Zip Code 20003

FEC Identification Number

Purpose of Disbursement TRANSFER

C
---

Candidate Name

Transaction ID : SB22.14914

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

247769.55
-----------

State: District:

Memo Item

**C. REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 310 FIRST STREET, SE

M M M	/	D D D	/	Y Y Y Y Y
11		02		2018

City WASHINGTON State DC Zip Code 20003

FEC Identification Number

Purpose of Disbursement TRANSFER

C
---

Candidate Name

Transaction ID : SB22.14989

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

6902.08
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State: District:

Memo Item

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

282201.58
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A. REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 310 FIRST STREET, SE

M M	/	D D	/	Y Y Y Y Y
11		02		2018

City  
WASHINGTON

State  
DC

Zip Code  
20003

FEC Identification Number

Purpose of Disbursement  
TRANSFER

C
---

Candidate Name

Category/  
Type

**Transaction ID : SB22.14990**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

79373.86
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State: District:

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M	/	D D	/	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	/	D D	/	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) ▼

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State: District:

Memo Item

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

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

79373.86
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361575.44
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MASSACHUSETTS VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**PELLEGRINI, LORA, M., ,**

Mailing Address 1 WARREN ST UNIT 107

City CHARLESTOWN State MA Zip Code 02129-3621

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y  
10 / 23 / 2018

FEC Identification Number: C

Transaction ID : SB28A.14908

Amount of Each Disbursement this Period: 250.00

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	250.00