

# 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

Purpose PAC

ADDRESS (number and street) 918 Pennsylvania Ave SE

Check if different than previously reported. (ACC) Washington DC 20003

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

C C00497131

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on M M / D D / Y Y Y Y Y Y in the State of  

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

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 11 / 29 / 2016 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2016

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

Zamore, Judith, , ,

Type or Print Name of Treasurer

Signature of Treasurer Zamore, Judith, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 31 / 2017

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Purpose PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		81471.18
(b) Cash on Hand at Beginning of Reporting Period.....	53788.86	
(c) Total Receipts (from Line 19) .....	57100.00	420790.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	110888.86	502261.18
7. Total Disbursements (from Line 31).....	10888.18	402260.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	100000.68	100000.68
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

**Purpose PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	35000.00	157000.00
(ii) Unitemized .....	0.00	190.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	35000.00	157190.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	228000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	40000.00	385190.00
12. Transfers From Affiliated/Other Party Committees.....	17100.00	35600.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	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)).....▶	57100.00	420790.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	57100.00	420790.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	10888.18	155360.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10888.18	155360.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	220000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	26900.00
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)) ..	10888.18	402260.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10888.18	402260.50

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	40000.00	385190.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40000.00	385190.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	10888.18	155360.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10888.18	155360.50

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 22
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

**A. Cooper, Peter, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 726 Weygadt Dr  
City Easton State PA Zip Code 18042-1627  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Lexus of Lehigh Valley Occupation (for Individual) Owner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 16 / 2016  
**Transaction ID : C10240981**  
Amount of Each Receipt this Period 2500.00  
 Memo Item

**B. Goldberg, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 75 Eisenhower Pkwy Ste 180  
City Roseland State NJ Zip Code 07068-1642  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Canoe Brook Investments Occupation (for Individual) Real Estate  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 21 / 2016  
**Transaction ID : C10241156**  
Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Cooper, Karen, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 726 Weygadt Dr  
City Easton State PA Zip Code 18042  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : C10241533A**  
Amount of Each Receipt this Period 2500.00  
 Memo Item  
\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....▶ 10000.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. ACTBLUE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
27500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 18 / 2016  
**Transaction ID : C10241533AB**

Amount of Each Receipt this Period  
2500.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Greenspan, David, G., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 25 Cohawney Rd

City Scarsdale	State NY	Zip Code 10583-2226
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
Slate Path Capital President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 13 / 2016  
**Transaction ID : C10241534A**

Amount of Each Receipt this Period  
5000.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
27500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 18 / 2016  
**Transaction ID : C10241534AB**

Amount of Each Receipt this Period  
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	





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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 22
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. ACTBLUE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
27500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 25 / 2016  
**Transaction ID : C10241685AB**

Amount of Each Receipt this Period  
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Curry, Ravenel, Boykin, , IV**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 106 Central Park S  
Apt 27A

City New York	State NY	Zip Code 10019-1578
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
Eagle Capital Management Investment Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2016  
**Transaction ID : C10241686A**

Amount of Each Receipt this Period  
5000.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
27500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 25 / 2016  
**Transaction ID : C10241686AB**

Amount of Each Receipt this Period  
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<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 22  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**Purpose PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Tisch, Andrew, H., ,

Mailing Address 667 Madison Ave  
FI 7

City New York State NY Zip Code 10065-8029

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

Name of Employer (for Individual) Loews Corporation Occupation (for Individual) Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2016

**Transaction ID : C10241687A**

Amount of Each Receipt this Period  
5000.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
27500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 25 / 2016

**Transaction ID : C10241687AB**

Amount of Each Receipt this Period  
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	35000.00

**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 22
<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)  
**Purpose PAC**

**A. Comcast Corporation & NBCUniversal Political Action Committee - Federal**

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

Mailing Address 1701 John F Kennedy Blvd  
FI 49

City Philadelphia State PA Zip Code 19103-2855

FEC ID number of contributing federal political committee. **C** C00248716

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2016

**Transaction ID : C10241061**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. Merck & Co., Inc., Employees Political Action Committee (Merck PAC)**

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

Mailing Address 601 Pennsylvania Ave NW  
North Building

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00097485

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2016

**Transaction ID : C10241017**

Amount of Each Receipt this Period  
2500.00

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

**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 12 OF 22
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Purpose PAC**

**A. Booker Senate Victory**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 15293  
 City Washington State DC Zip Code 20003-0293  
 FEC ID number of contributing federal political committee. **C** C00548586  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 35600.00

Date of Receipt 12 / 30 / 2016  
**Transaction ID : C10241660**  
 Amount of Each Receipt this Period 17100.00  
 Memo Item

**B. Reichle, Jeffrey, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4045 Bayshore Rd  
 City Cape May State NJ Zip Code 08204-4109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Lund's Fisheries, Inc. President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 12 / 30 / 2016  
**Transaction ID : C10241661**  
 Amount of Each Receipt this Period 4800.00  
 Memo Item

**C. Daniels, Jeanne, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1022 Townplace St  
 City Houston State TX Zip Code 77057-1942  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Westenfield Development Company Real Estate  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 12 / 30 / 2016  
**Transaction ID : C10241662**  
 Amount of Each Receipt this Period 800.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	17100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Marijuana Policy Project PAC**

Mailing Address PO Box 77492  
Capitol Hill

City Washington State DC Zip Code 20013-8492

FEC ID number of contributing federal political committee. **C** C00389882

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 M / D D D / Y Y Y Y Y Y  
12 / 30 / 2016

Transaction ID : **C10241664**

Amount of Each Receipt this Period  
1000.00

Memo Item

\*

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Sanofi US Services Inc. Employees' PAC**

Mailing Address 55 Corporate Dr

City Bridgewater State NJ Zip Code 08807-1265

FEC ID number of contributing federal political committee. **C** C00144345

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2016

Transaction ID : **C10241665**

Amount of Each Receipt this Period  
1000.00

Memo Item

\*

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

Mailing Address 10651 Chalon Rd

City Los Angeles State CA Zip Code 90077-3312

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

Name of Employer (for Individual) Occupation (for Individual)  
Self-Employed Interior Designer

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2016

Transaction ID : **C10241666**

Amount of Each Receipt this Period  
5000.00

Memo Item

\*

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Sanofi US Services Inc. Employees' PAC**

Mailing Address 55 Corporate Dr

City Bridgewater	State NJ	Zip Code 08807-1265
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FEC ID number of contributing federal political committee. **C** C00144345

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

**Transaction ID : C10241667**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 53 Maple Ave

City Morristown	State NJ	Zip Code 07960-5219
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

**Transaction ID : C10241668**

Amount of Each Receipt this Period  
5000.00

Memo Item

LLC - Members below if itemized. Permissible funds.

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

Mailing Address 53 Maple Ave

City Morristown	State NJ	Zip Code 07960-5219
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Normandy FW, LLC	Occupation (for Individual) Investor
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

**Transaction ID : C10241669**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	17100.00

**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)  
**Purpose PAC**

Full Name (Last, First, Middle Initial) <b>A. LED Strategy Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address 1409 15th St NW Apt 19		FEC Identification Number C [ ] <b>Transaction ID : D532361</b> Amount of Each Disbursement this Period 4000.00
City Washington	State DC	Zip Code 20005-1928
Purpose of Disbursement Fundraising Consulting Services for PAC (No Fed Candidates)		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. Capitol Compliance Associates, Inc.</b>		Date of Disbursement MM / DD / YYYY 12 / 09 / 2016
Mailing Address 918 Pennsylvania Ave SE		FEC Identification Number C [ ] <b>Transaction ID : D533141</b> Amount of Each Disbursement this Period 1500.00
City Washington	State DC	Zip Code 20003-2140
Purpose of Disbursement Compliance Services		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. Amalgamated Bank</b>		Date of Disbursement MM / DD / YYYY 12 / 20 / 2016
Mailing Address 275 7th Ave		FEC Identification Number C [ ] <b>Transaction ID : D533291</b> Amount of Each Disbursement this Period 79.08
City New York	State NY	Zip Code 10001-6708
Purpose of Disbursement Bank Fee		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <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)..... ▶

5579.08

**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)  
**Purpose PAC**

Full Name (Last, First, Middle Initial) <b>A. Maltzman, Samantha, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address 10706 Brewer House Rd		FEC Identification Number C [ ] <b>Transaction ID : D532562</b> Amount of Each Disbursement this Period 1000.00
City Rockville	State MD	Zip Code 20852-3420
Purpose of Disbursement Fundraising Consulting Services for PAC (No Fed Candidates)		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. Amalgamated Bank</b>		Date of Disbursement MM / DD / YYYY 12 / 20 / 2016
Mailing Address 275 7th Ave		FEC Identification Number C [ ] <b>Transaction ID : D533292</b> Amount of Each Disbursement this Period 55.27
City New York	State NY	Zip Code 10001-6708
Purpose of Disbursement Bank Fee		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <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. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 12 / 25 / 2016
Mailing Address 366 Summer St		FEC Identification Number C [ ] <b>Transaction ID : D533413</b> Amount of Each Disbursement this Period 790.00
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Merchant Fees		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).....▶	1845.27
<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)  
**Purpose PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 18 / 2016

FEC Identification Number

C [REDACTED]

**Transaction ID : D533308**

Amount of Each Disbursement this Period

[REDACTED] 296.25

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Payment - Below if Itemized

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 05 / 2016

FEC Identification Number

C [REDACTED]

**Transaction ID : D532795**

Amount of Each Disbursement this Period

[REDACTED] 3167.58

Memo Item

Full Name (Last, First, Middle Initial)

**C. Carey International, Inc.**

Mailing Address 4530 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4627

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 05 / 2016

FEC Identification Number

C [REDACTED]

**Transaction ID : D532802**

Amount of Each Disbursement this Period

[REDACTED] 150.73

Memo Item

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

[REDACTED] 3463.83

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Purpose PAC**

**A. Carey International, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 4530 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4627

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : D532803

Amount of Each Disbursement this Period: 107.97

Memo Item

**B. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : D532805

Amount of Each Disbursement this Period: 200.00

Memo Item

**C. Hilton Cleveland Downtown**

Full Name (Last, First, Middle Initial)

Mailing Address 100 Lakeside Ave E

City Cleveland State OH Zip Code 44114-1020

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : D532825

Amount of Each Disbursement this Period: 26.59

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**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)  
**Purpose PAC**

**A. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : D532796

Amount of Each Disbursement this Period: 247.10

Memo Item

**B. Hilton Cleveland Downtown**

Full Name (Last, First, Middle Initial)

Mailing Address 100 Lakeside Ave E

City Cleveland State OH Zip Code 44114-1020

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : D532816

Amount of Each Disbursement this Period: 13.99

Memo Item

**C. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : D532797

Amount of Each Disbursement this Period: 317.10

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**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)  
**Purpose PAC**

Full Name (Last, First, Middle Initial) <b>A. Expedia Travel</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2016	
Mailing Address 333 108th Ave NE		FEC Identification Number C [ ] <b>Transaction ID : D532817</b> Amount of Each Disbursement this Period [ ] 415.10	
City Bellevue	State WA	Zip Code 98004-5703	Category/ Type [ ]
Purpose of Disbursement Travel			
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 checked="" type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. Expedia Travel</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2016	
Mailing Address 333 108th Ave NE		FEC Identification Number C [ ] <b>Transaction ID : D532827</b> Amount of Each Disbursement this Period [ ] 341.10	
City Bellevue	State WA	Zip Code 98004-5703	Category/ Type [ ]
Purpose of Disbursement Travel			
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 checked="" type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. United Airlines</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2016	
Mailing Address PO Box 66100		FEC Identification Number C [ ] <b>Transaction ID : D532798</b> Amount of Each Disbursement this Period [ ] 133.00	
City Chicago	State IL	Zip Code 60666-0100	Category/ Type [ ]
Purpose of Disbursement Travel			
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 checked="" type="checkbox"/> Memo Item			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 0.00
<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)  
**Purpose PAC**

**A. Expedia Travel**

Full Name (Last, First, Middle Initial)

Mailing Address 333 108th Ave NE

City Bellevue State WA Zip Code 98004-5703

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : D532818

Amount of Each Disbursement this Period: 93.10

Memo Item

**B. Hilton Palmer House**

Full Name (Last, First, Middle Initial)

Mailing Address 17 East Monroe St

City Chicago State IL Zip Code 60603

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : D532808

Amount of Each Disbursement this Period: 286.08

Memo Item

**C. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : D532799

Amount of Each Disbursement this Period: 341.10

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**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)  
**Purpose PAC**

**A. Hilton Cleveland Downtown**

Full Name (Last, First, Middle Initial)

Mailing Address 100 Lakeside Ave E

City Cleveland State OH Zip Code 44114-1020

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C

Transaction ID : D532819

Amount of Each Disbursement this Period: 409.87

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10888.18