

# 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.

O' Say Can You See PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

(c) 12-Day PRE-Election Report for the:

- Primary (12P)     General (12G)     Runoff (12R)
- Convention (12C)     Special (12S)

Election on  /  /  in the State of

(d) 30-Day POST-Election Report for the:

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

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Type or Print Name of Treasurer Martin Cadogan

Signature of Treasurer Martin Cadogan [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**O' Say Can You See 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="2014"/>	<input type="text" value="282264.27"/>	<input type="text" value="282264.27"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="577763.33"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="101775.00"/>	<input type="text" value="550208.23"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="679538.33"/>	<input type="text" value="832472.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="107964.73"/>	<input type="text" value="260898.90"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="571573.60"/>	<input type="text" value="571573.60"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**O' Say Can You See 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).....	83800.00	452753.00
(ii) Unitemized .....	475.00	14695.27
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	84275.00	467448.27
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	17500.00	82759.96
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	101775.00	550208.23
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	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))..... ▶	101775.00	550208.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	101775.00	550208.23

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1965.73	53150.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1965.73	53150.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25370.00	85620.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	1000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5500.00
29. Other Disbursements .....	80629.00	116628.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	107964.73	260898.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	107964.73	260898.90

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	101775.00	550208.23
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	101775.00	544708.23
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1965.73	53150.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1965.73	53150.90

**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 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial) <b>A. Richard Adjmi</b>		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 <b>Transaction ID : C10229519</b>
Mailing Address 1893 E 3rd St		Amount of Each Receipt this Period 3600.00
City Brooklyn	State NY	Zip Code 11223-2831
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3600.00
Name of Employer CEO	Occupation Age Group, Ltd	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00	

Full Name (Last, First, Middle Initial) <b>B. Christine Althoff</b>		Date of Receipt MM / DD / YYYY 08 / 22 / 2014 <b>Transaction ID : C10202991</b>
Mailing Address 5101 Hawthorne Rd		Amount of Each Receipt this Period 5000.00
City Little Rock	State AR	Zip Code 72207-3711
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Self-Employed	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. James Neil Bell</b>		Date of Receipt MM / DD / YYYY 08 / 20 / 2014 <b>Transaction ID : C10191700</b>
Mailing Address 308 PADDINGTON Road		Amount of Each Receipt this Period 500.00
City Baltimore	State MD	Zip Code 21212
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9100.00
<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 7 OF 56
	<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)  
**O' Say Can You See PAC**

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

Mailing Address 108 Pembroke View Ln

City Gaithersburg State MD Zip Code 20877-3783

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

Name of Employer American Public Health Association Occupation Executive Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
08 / 08 / 2014  
Transaction ID : C10202947

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2029 E 2nd St

City Brooklyn State NY Zip Code 11223-2944

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

Name of Employer Baby Boom Consumer Products Inc Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3600.00

Date of Receipt  
09 / 18 / 2014  
Transaction ID : C10208185

Amount of Each Receipt this Period  
3600.00

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

Mailing Address 13102 Jordans Endeavor Drive

City Bowie State MD Zip Code 20720

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

Name of Employer The Podesta Group Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
09 / 30 / 2014  
Transaction ID : C10219056

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 6600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 56
	<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)  
**O' Say Can You See PAC**

**A. H. Boyd Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 26  
 City Winnsboro State SC Zip Code 29180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Mashburn Construction Company Occupation Business Developer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2014  
**Transaction ID : C10191089**  
 Amount of Each Receipt this Period  
**250.00**

**B. Gabriel Buena**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 714 Sunnyhill Dr  
 City Los Angeles State CA Zip Code 90065-4047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Plaza Community Services Occupation Executive Director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2014  
**Transaction ID : C10216288**  
 Amount of Each Receipt this Period  
**1000.00**

**C. Stephen A. Burch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 421 Garrison Forest Rd  
 City Owings Mills State MD Zip Code 21117-4008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer University of Maryland Medical Sys. B Occupation Chairman  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2014  
**Transaction ID : C10202946**  
 Amount of Each Receipt this Period  
**5000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>6250.00</b>
<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 9 OF 56  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)  
**A. Edward Chow Jr.**

Mailing Address 805 Coxswain Way

City State Zip Code  
 Annapolis MD 21401-0911

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

Name of Employer Occupation  
 MD Dept of Veteran Affairs Secretary

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : C10202943**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1550 E. Valley Rd.

City State Zip Code  
 Santa Barbara CA 93108

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

Name of Employer Occupation  
 Self Producer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : C10216213**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 801 Key Hwy  
 Apt 35B

City State Zip Code  
 Baltimore MD 21230

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

Name of Employer Occupation  
 Information Requested Information Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : C10229525**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 56
	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)  
**A. Alvin Cornell Collins**

Mailing Address **PO Box 945**

City **Annapolis** State **MD** Zip Code **21404-0945**

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

Name of Employer **State of Maryland** Occupation **Secretary of DGS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

**Transaction ID : C10202949**

Amount of Each Receipt this Period  

250.00
--------

Full Name (Last, First, Middle Initial)  
**B. Sean D. D'arcy**

Mailing Address **5700 Roosevelt St**

City **Bethesda** State **MD** Zip Code **20817-6742**

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

Name of Employer **Akin, Gump, Strauss, Hauer & Feld** Occupation **Partner**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2014

**Transaction ID : C10229521**

Amount of Each Receipt this Period  

500.00
--------

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

Mailing Address **1221 Brickell Ave**  
**FI 19**

City **Miami** State **FL** Zip Code **33131-3240**

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

Name of Employer **Information Requested** Occupation **Information Requested**

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
09	/	25	/	2014

**Transaction ID : C10229517**

Amount of Each Receipt this Period  

2500.00
---------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>3250.00</b>
<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 11 OF 56  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)  
**A. Robert DiGeronimo**

Mailing Address 5720 E Schaaf Rd

City Independence State OH Zip Code 44131-1308

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

Name of Employer Independence Excavating Occupation Executive Vice President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 08 / 22 / 2014  
**Transaction ID : C10202994**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 8906 Clewerwall Dr

City Bethesda State MD Zip Code 20817-6904

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

Name of Employer CRI Inc. Occupation Chairman

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 08 / 08 / 2014  
**Transaction ID : C10202940**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 362 5th Ave Ste 905

City New York State NY Zip Code 10001-2210

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

Name of Employer Bluestar Realty Occupation Realtor

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3600.00

Date of Receipt  
 09 / 18 / 2014  
**Transaction ID : C10208168**

Amount of Each Receipt this Period  
 3600.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7100.00

**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 12 OF 56
	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)  
**A. Richard H. Edson**

Mailing Address 4520 E West Hwy  
Ste 615

City Bethesda State MD Zip Code 20814-3636

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

Name of Employer Housing Capital Advisors Inc. Occupation Managing Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 22 / 2014  
**Transaction ID : C10211283**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 1201 W 5th St

City Los Angeles State CA Zip Code 90017-2019

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

Name of Employer Maya Cinemas Occupation Founder

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
09 / 30 / 2014  
**Transaction ID : C10217755**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. George S. Everly Jr.**

Mailing Address 702 Severnside Ave

City Severna Park State MD Zip Code 21146-2201

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
09 / 25 / 2014  
**Transaction ID : C10229526**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

**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 13 OF 56
	<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	

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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial) <b>A. Genine Macks Fidler</b>		Date of Receipt MM / DD / YYYY 09 / 29 / 2014 <b>Transaction ID : C10216243</b>
Mailing Address 225 Greenspring Valley Rd.		Amount of Each Receipt this Period 5000.00
City Owings Mills	State MD	Zip Code 21117
FEC ID number of contributing federal political committee.	C	
Name of Employer Retired	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Drew Figdor</b>		Date of Receipt MM / DD / YYYY 09 / 02 / 2014 <b>Transaction ID : C10197121</b>
Mailing Address 520 Madison Ave Floor 26		Amount of Each Receipt this Period 5000.00
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee.	C	
Name of Employer Tiedemann Investment Group	Occupation Portfolio Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Rich Fitzgerald</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : C10202939</b>
Mailing Address 436 Grant St Ste 101		Amount of Each Receipt this Period 1000.00
City Pittsburgh	State PA	Zip Code 15219-2403
FEC ID number of contributing federal political committee.	C	
Name of Employer Allegheny County	Occupation County Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<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 14 OF 56
	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)  
**A. Stuart Ford**

Mailing Address 163 S. Plymouth Blvd.

City	State	Zip Code
Los Angeles	CA	90004

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

Name of Employer	Occupation
Self	Film Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : C10217577**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2010 Hudson Ave

City	State	Zip Code
Kalamazoo	MI	49008-1810

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

Name of Employer	Occupation
Franklin Public Affairs	Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2014  
**Transaction ID : C10202990**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2089 East 3rd St

City	State	Zip Code
Brooklyn	NY	11223

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

Name of Employer	Occupation
Self	Doctor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : C10208197**

Amount of Each Receipt this Period  
 3600.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5600.00
<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 15 OF 56  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)  
**A. Joe Guerra**

Mailing Address 97 S 2nd St  
Ste 300

City San Jose State CA Zip Code 95113-2512

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

Name of Employer Self-Employed Occupation Consultant

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  
 08 / 27 / 2014  
**Transaction ID : C10193857**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO Box 69

City Royal Oak State MD Zip Code 21662-0069

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

Name of Employer N/A Occupation Retired

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  
 08 / 08 / 2014  
**Transaction ID : C10202944**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 2525 SW 3rd Ave  
Apt 1508

City Miami State FL Zip Code 33129-2059

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014  
**Transaction ID : C10229523**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3750.00

**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 16 OF 56
	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial) <b>A. Stephen Hunter Johnson</b>		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 <b>Transaction ID : C10229524</b>
Mailing Address 2525 SW 3rd Ave Apt 1508		Amount of Each Receipt this Period 250.00
City Miami	State FL	Zip Code 33129-2059
FEC ID number of contributing federal political committee.	C	
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	500.00

Full Name (Last, First, Middle Initial) <b>B. Maureen Kindel</b>		Date of Receipt MM / DD / YYYY 09 / 28 / 2014 <b>Transaction ID : C10215843</b>
Mailing Address 550 S Hope St		Amount of Each Receipt this Period 1000.00
City Los Angeles	State CA	Zip Code 90071-2627
FEC ID number of contributing federal political committee.	C	
Name of Employer KindelGagan	Occupation Founder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	1000.00

Full Name (Last, First, Middle Initial) <b>C. Morris Missry</b>		Date of Receipt MM / DD / YYYY 09 / 18 / 2014 <b>Transaction ID : C10208169</b>
Mailing Address 885 2nd Ave 47th Floor		Amount of Each Receipt this Period 3600.00
City New York	State NY	Zip Code 10017
FEC ID number of contributing federal political committee.	C	
Name of Employer Wachtel Missry LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	3600.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4850.00
<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 17 OF 56  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)  
**A. Zoe Pagonis**

Mailing Address 800 6th Ave  
Apt 15A

City New York State NY Zip Code 10001-6348

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

Name of Employer Occupation  
Walton International Group Public Relations Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 18 / 2014  
**Transaction ID : C10188958**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2144 Nichols Canyon Rd.

City Los Angeles State CA Zip Code 90046

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

Name of Employer Occupation  
Sony Pictures Ent. Studio Executive

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  
09 / 28 / 2014  
**Transaction ID : C10216091**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1 Primrose St

City Chevy Chase State MD Zip Code 20815-4228

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

Name of Employer Occupation  
Ruesch family foundation COO

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  
09 / 11 / 2014  
**Transaction ID : C10225124**

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3750.00

**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 18 OF 56
	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)  
**A. Gregory Stephen Shockley**

Mailing Address 10148 Queens Cir

City State Zip Code  
Ocean City MD 21842-9192

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

Name of Employer Occupation  
Shenanigan's Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
08 / 22 / 2014  
**Transaction ID : C10192368**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 215 N Gower Street

City State Zip Code  
Los Angeles CA 90004

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

Name of Employer Occupation  
YPI Exec Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 27 / 2014  
**Transaction ID : C10215770**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 9100 Oriole Way

City State Zip Code  
Los Angeles CA 90069-1125

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

Name of Employer Occupation  
Self-Employed Musical Artist and Writer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
09 / 25 / 2014  
**Transaction ID : C10229528**

Amount of Each Receipt this Period  
1000.00

**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 19 OF 56  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)  
**A. Richard Sullivan**

Mailing Address 900 19th St NW  
Ste 800

City Washington State DC Zip Code 20006-2127

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

Name of Employer Capitol Counsel LLC Occupation Partner

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  
 08 / 29 / 2014  
**Transaction ID : C10195993**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 4710 Glenbrook Pkwy

City Bethesda State MD Zip Code 20814-3704

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : C10205305**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 18846 Los Alimos St

City Porter Ranch State CA Zip Code 91326

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

Name of Employer Self Occupation Consultant

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  
 09 / 30 / 2014  
**Transaction ID : C10217560**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3750.00

**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 20 OF 56  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

**A. Steven Mark Van Fossan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26 Loantaka Ln N  
 City State Zip Code  
 Morristown NJ 07960-7021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Information Requested Information Requested  
 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  
 09 / 25 / 2014  
**Transaction ID : C10229518**  
 Amount of Each Receipt this Period  
 1000.00

**B. Jon Vein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 N Las Palmas Ave  
 City State Zip Code  
 Los Angeles CA 90004-1047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Marketshare Co-Founder and CEO  
 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  
 09 / 30 / 2014  
**Transaction ID : C10217700**  
 Amount of Each Receipt this Period  
 1000.00

**C. Andrew Vetter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 N. Milton Ave.  
 City State Zip Code  
 Baltimore MD 21224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State of Maryland Attorney  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 11 / 2014  
**Transaction ID : C10160258**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	83800.00

**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 21 OF 56
<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)  
**A. Allegheny County Democratic Committee**

Mailing Address 223 4th Ave  
F11

City Pittsburgh State PA Zip Code 15222

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
08 / 08 / 2014  
**Transaction ID : C10202948**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. DOMINION RESOURCES, INC. POLITICAL ACTION COMMITTEE - DOMINION PAC**

Mailing Address ONE JAMES RIVER PLAZA, 20TH FLOOR  
P.O. BOX 26666

City RICHMOND State VA Zip Code 23261

FEC ID number of contributing federal political committee. **C** C00108209

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
08 / 15 / 2014  
**Transaction ID : C10202989**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. Friends of Rob Garagiola**

Mailing Address PO Box 442

City Germantown State MD Zip Code 20875

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
08 / 15 / 2014  
**Transaction ID : C10202988**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<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 22 OF 56
<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)  
**A. International Longshoremen's Association C.O.P.E.**

Mailing Address 5000 WEST SIDE AVENUE

City NORTH BERGEN State NJ Zip Code 07047

FEC ID number of contributing federal political committee. **C** C00158576

Name of Employer Occupation

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  
 09 / 25 / 2014  
**Transaction ID : C10229522**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. MACHINISTS NON PARTISAN POL LEAGUE OF THE INT'L ASSN OF MACH**

Mailing Address 9000 Machinists Pl #

City Upper Marlboro State MD Zip Code 20772-2675

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

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  
 09 / 08 / 2014  
**Transaction ID : C10202995**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 1300 CLINTON SQUARE

City ROCHESTER State NY Zip Code 14604

FEC ID number of contributing federal political committee. **C** C00404178

Name of Employer Occupation

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  
 09 / 25 / 2014  
**Transaction ID : C10229520**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	17500.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 2878

City Omaha State NE Zip Code 68103-2878

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

**Transaction ID : D552138**

Amount of Each Disbursement this Period

72.40

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 2878

City Omaha State NE Zip Code 68103-2878

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

**Transaction ID : D552139**

Amount of Each Disbursement this Period

1.20

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 2878

City Omaha State NE Zip Code 68103-2878

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

**Transaction ID : D552140**

Amount of Each Disbursement this Period

144.65

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

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

218.25

**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"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 2878

City Omaha State NE Zip Code 68103-2878

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2014

Transaction ID : D552141

Amount of Each Disbursement this Period

512.57

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 2878

City Omaha State NE Zip Code 68103-2878

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2014

Transaction ID : D552089

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

**C. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2014

Transaction ID : D552142

Amount of Each Disbursement this Period

7.95

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

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

528.47



**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"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2014

**Transaction ID : D552143**

Amount of Each Disbursement this Period

54.04

Full Name (Last, First, Middle Initial)

**B. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

**Transaction ID : D552144**

Amount of Each Disbursement this Period

0.22

Full Name (Last, First, Middle Initial)

**C. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 24 / 2014

**Transaction ID : D552145**

Amount of Each Disbursement this Period

169.50

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

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

223.76

**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"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

**Transaction ID : D552146**

Amount of Each Disbursement this Period

2.39

Full Name (Last, First, Middle Initial)

**B. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : D552147**

Amount of Each Disbursement this Period

52.80

Full Name (Last, First, Middle Initial)

**C. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2014

**Transaction ID : D552148**

Amount of Each Disbursement this Period

28.90

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

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

84.09

**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"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2014

**Transaction ID : D552149**

Amount of Each Disbursement this Period

59.75
-------

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2014

**Transaction ID : D552150**

Amount of Each Disbursement this Period

2.89
------

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2014

**Transaction ID : D552151**

Amount of Each Disbursement this Period

20.43
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Category/  
Type

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

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

83.07
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 22 / 2014

**Transaction ID : D552152**

Amount of Each Disbursement this Period

20.43

Full Name (Last, First, Middle Initial)

**B. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2014

**Transaction ID : D552154**

Amount of Each Disbursement this Period

7.37

Full Name (Last, First, Middle Initial)

**C. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2014

**Transaction ID : D552155**

Amount of Each Disbursement this Period

2.39

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

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

30.19

**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"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2014

**Transaction ID : D552156**

Amount of Each Disbursement this Period

1.31

Full Name (Last, First, Middle Initial)

**B. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2014

**Transaction ID : D552157**

Amount of Each Disbursement this Period

9.11

Full Name (Last, First, Middle Initial)

**C. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

**Transaction ID : D552088**

Amount of Each Disbursement this Period

125.01

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

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

135.43

**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"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Visa**

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630

Purpose of Disbursement  
Credit Card Payment - Below if Itemized

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
0	9		1	9		2	0	1	4

**Transaction ID : D552090**

Amount of Each Disbursement this Period

5	4	7	.	4	7
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Cicchetti Restaurant**

Mailing Address 671 North St. Clair

City Chicago State IL Zip Code 60611

Purpose of Disbursement  
Catering

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
0	9		0	9		2	0	1	4

**Transaction ID : D552091**

Amount of Each Disbursement this Period

5	4	7	.	4	7
---	---	---	---	---	---

**[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

Amount of Each Disbursement this Period

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

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

5	4	7	.	4	7
---	---	---	---	---	---

1	8	5	0	7	3
---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. CAROL SHEA-PORTER FOR CONGRESS**

Mailing Address PO BOX 453

City ROCHESTER State NH Zip Code 03866

Purpose of Disbursement  
Committee Contributions

Candidate Name  
**CAROL SHEA-PORTER**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NH District: 01

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

**Transaction ID : D551929**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. CHILDERS FOR SENATE INC**

Mailing Address PO BOX 246

City BOONEVILLE State MS Zip Code 38829

Purpose of Disbursement  
Committee Contributions

Candidate Name  
**TRAVIS W CHILDERS**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MS District: 00

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2014

**Transaction ID : D551907**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Emelia Dillon**

Mailing Address 624 Garden Street

City Hoboken State NJ Zip Code 07030

Purpose of Disbursement  
Field Consulting

Candidate Name  
**DAVID WAYNE LOEBSACK**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IA District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : D552096**

Amount of Each Disbursement this Period

1250.00

\* In-Kind

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

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

4750.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Emelia Dillon**

Mailing Address 624 Garden Street

City Hoboken State NJ Zip Code 07030

Purpose of Disbursement  
Field Consulting

Candidate Name  
**DAVID WAYNE LOEBSACK**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: IA District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

**Transaction ID : D552097**

Amount of Each Disbursement this Period

1	2	5	0	0	0
---	---	---	---	---	---

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF BILL TILGHMAN**

Mailing Address PO BOX 747

City CENTREVILLE State MD Zip Code 21617

Purpose of Disbursement  
Committee Contributions

Candidate Name  
**WILLIAM F TILGHMAN**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: MD District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	4

**Transaction ID : D551909**

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF DICK DURBIN**

Mailing Address PO BOX 1949

City SPRINGFIELD State IL Zip Code 62705

Purpose of Disbursement  
Committee Contributions

Candidate Name  
**RICHARD J DURBIN**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: IL District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	1	4

**Transaction ID : D551917**

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

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

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

3	2	5	0	0	0
---	---	---	---	---	---

3	2	5	0	0	0
---	---	---	---	---	---



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF PATRICK MURPHY**

Mailing Address 4521 PGA BLVD. #412

City PALM BEACH GARDENS State FL Zip Code 33418

Purpose of Disbursement  
Committee Contributions

Candidate Name  
**PATRICK MURPHY**

Office Sought:  House  
 Senate  
 President  
State: FL District: 18

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D551923**

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. HAGAN FOR US SENATE INC**

Mailing Address PO BOX 29103

City GREENSBORO State NC Zip Code 27429

Purpose of Disbursement  
Committee Contributions

Candidate Name  
**KAY R HAGAN**

Office Sought:  House  
 Senate  
 President  
State: NC District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D551926**

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Mr Bryan Hamer**

Mailing Address 5411 McGrath Blvd  
Apt 1616

City North Bethesda State MD Zip Code 20852

Purpose of Disbursement  
Field Consulting

Candidate Name  
**DEMOCRATIC PARTY OF SOUTH CAROLINA**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D552446**

Amount of Each Disbursement this Period

Category/  
Type

\* In-Kind

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Mr Bryan Hamer**

Mailing Address 5411 McGrath Blvd  
Apt 1616

City North Bethesda State MD Zip Code 20852

Purpose of Disbursement  
Field Consulting

Candidate Name  
**DEMOCRATIC PARTY OF SOUTH CAROLINA**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : D552447**

Amount of Each Disbursement this Period

435.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. KENTUCKIANS UNITED VICTORY FUND**

Mailing Address PO BOX 9

City LEXINGTON State KY Zip Code 40588

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: KY District:

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

**Transaction ID : D551914**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Ms. Jalynn Lassic**

Mailing Address 5114 Bridle Creek Ct

City Grand Rapids State MI Zip Code 49508

Purpose of Disbursement  
Field Consulting

Candidate Name  
**IOWA DEMOCRATIC PARTY**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : D552116**

Amount of Each Disbursement this Period

1000.00

\* In-Kind

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

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

3935.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Jalynn Lassic**

Mailing Address 5114 Bridle Creek Ct

City State Zip Code  
Grand Rapids MI 49508

Purpose of Disbursement  
Field Consulting

Candidate Name  
**IOWA DEMOCRATIC PARTY**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : D552117**

Amount of Each Disbursement this Period

1000.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. LOEBSACK FOR CONGRESS**

Mailing Address PO BOX 3013

City State Zip Code  
IOWA CITY IA 52244

Purpose of Disbursement  
Void Check from Previous Reporting Period

Candidate Name  
**DAVID WAYNE LOEBSACK**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: IA District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : D552460**

Amount of Each Disbursement this Period

-2500.00

Full Name (Last, First, Middle Initial)

**C. Mississippi Democratic Party**

Mailing Address PO Box 1583

City State Zip Code  
Jackson MS 39215

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2014

**Transaction ID : D551903**

Amount of Each Disbursement this Period

500.00

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

**TOTAL** 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Xholina Nano**

Mailing Address 62 Ardsley Rd

City Waterbury State CT Zip Code 06708-1825

Purpose of Disbursement  
Field Consulting

Candidate Name  
**PATRICK JOSEPH MURPHY**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: IA District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

**Transaction ID : D552137**

Amount of Each Disbursement this Period

1	2	5	0	0	0
---	---	---	---	---	---

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. NATALIE TENNANT FOR SENATE**

Mailing Address PO BOX 1063

City CHARLESTON State WV Zip Code 25324

Purpose of Disbursement  
Committee Contributions

Candidate Name  
**NATALIE TENNANT**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: WV District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	4

**Transaction ID : D551924**

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. NUNN FOR SENATE INC**

Mailing Address PO BOX 78936

City ATLANTA State GA Zip Code 30357

Purpose of Disbursement  
Committee Contributions

Candidate Name  
**MARY MICHELLE NUNN**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: GA District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	4

**Transaction ID : D551927**

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

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

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

3	2	5	0	0	0
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3	2	5	0	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. PATRICK HENRY HAYS FOR CONGRESS**

Mailing Address PO BOX 94886

City NORTH LITTLE ROCK State AR Zip Code 72190

Purpose of Disbursement  
Committee Contributions

Candidate Name  
**PATRICK HENRY HAYS**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: AR District: 02

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2014

**Transaction ID : D551908**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. SCOTT PETERS FOR CONGRESS**

Mailing Address PO BOX 70980

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement  
Committee Contributions

Candidate Name  
**SCOTT PETERS**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: CA District: 52

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : D551931**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. SEAN PATRICK MALONEY FOR CONGRESS**

Mailing Address PO BOX 270

City NEWBURGH State NY Zip Code 12550

Purpose of Disbursement  
Void Check from Previous Reporting Period

Candidate Name  
**SEAN PATRICK MALONEY**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: NY District: 18

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : D552459**

Amount of Each Disbursement this Period

-2500.00

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

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

-500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. SHAHEEN FOR SENATE**

Mailing Address 105 N STATE STREET

City State Zip Code  
CONCORD NH 03301

Purpose of Disbursement  
Committee Contributions

Candidate Name  
**JEANNE SHAHEEN**

Office Sought:  House  
 Senate  
 President  
State: NH District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 23 / 2014

Transaction ID : D551921

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Mr. Daniel Stalder**

Mailing Address 2451 30 RD

City State Zip Code  
Brainard NE 68626

Purpose of Disbursement  
Field Consulting

Candidate Name  
**JIM MOWRER**

Office Sought:  House  
 Senate  
 President  
State: IA District: 04

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 30 / 2014

Transaction ID : D552130

Amount of Each Disbursement this Period

1000.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Mr. Daniel Stalder**

Mailing Address 2451 30 RD

City State Zip Code  
Brainard NE 68626

Purpose of Disbursement  
Field Consulting

Candidate Name  
**JIM MOWRER**

Office Sought:  House  
 Senate  
 President  
State: IA District: 04

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 15 / 2014

Transaction ID : D552131

Amount of Each Disbursement this Period

1000.00

\* In-Kind

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. The Democratic Party of Wisconsin**

Mailing Address 15 N. Pinckney Street Suite 200

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

**Transaction ID : D551916**

Amount of Each Disbursement this Period

5000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Miss. Emily Wiersema**

Mailing Address 935 Thunderbird Lane

City Sun Prairie State WI Zip Code 53590

Purpose of Disbursement  
Field Consulting

Candidate Name

**PATRICK JOSEPH MURPHY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : D552134**

Amount of Each Disbursement this Period

1250.00

Category/  
Type

\* In-Kind

**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

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/  
Type

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

6250.00

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

25370.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

### A. Anderson for Iowa

Mailing Address PO Box 973

City Des Moines State IA Zip Code 50304

Purpose of Disbursement  
Committee Contributions

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
0	8		2	8		2	0	1	4

Transaction ID : D551912

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### B. Gonzalo Brescia

Mailing Address 56 E Lock Lane  
Unit 4

City Richmond State VA Zip Code 23226

Purpose of Disbursement  
Field Consulting - In-kind to WI Democratic Party, State Account

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
0	9		1	5		2	0	1	4

Transaction ID : D552092

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

\* In-Kind

Full Name (Last, First, Middle Initial)

### C. Gonzalo Brescia

Mailing Address 56 E Lock Lane  
Unit 4

City Richmond State VA Zip Code 23226

Purpose of Disbursement  
Field Consulting - In-kind to WI Democratic Party, State Account

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
0	9		3	0		2	0	1	4

Transaction ID : D552093

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

\* In-Kind

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

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

8	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---



**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Zachary Chartash**

Mailing Address 41 Summit Dr

City Basking Ridge State NJ Zip Code 07920

Purpose of Disbursement  
Field Consulting - in-kind to Anderson for Iowa

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : D552094**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Mr. Zachary Chartash**

Mailing Address 41 Summit Dr

City Basking Ridge State NJ Zip Code 07920

Purpose of Disbursement  
Field Consulting - in-kind to Anderson for Iowa

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : D552095**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Miller**

Mailing Address 10120 South Eastern Suite 200

City Henderson State NV Zip Code 89052

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : D551922**

Amount of Each Disbursement this Period

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Zachary Evans**

Mailing Address 2224 Tracey Road

City Sparks Glencoe State MD Zip Code 21152

Purpose of Disbursement  
Field Consulting - In-kind to Rosapepe for Senate

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : D552098**

Amount of Each Disbursement this Period

1250.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Mr. Zachary Evans**

Mailing Address 2224 Tracey Road

City Sparks Glencoe State MD Zip Code 21152

Purpose of Disbursement  
Field Consulting - In-kind to Rosapepe for Senate

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : D552099**

Amount of Each Disbursement this Period

1250.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Friends for Flores**

Mailing Address 420 North Nellis Blvd Suite A3-87

City Las Vegas State NV Zip Code 89110

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2014

**Transaction ID : D551930**

Amount of Each Disbursement this Period

2500.00

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

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

5000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of John Olszewski, Jr**

Mailing Address PO Box 35202

City Dundalk State MD Zip Code 21222

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

**Transaction ID : D551925**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**B. Miss. Michelle Gaeng**

Mailing Address 6 Sedgfield Court

City Lutherville State MD Zip Code 21093

Purpose of Disbursement  
Field Consulting - In-kind to Nevada State Party, State Account

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : D552100**

Amount of Each Disbursement this Period

1250.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Miss. Michelle Gaeng**

Mailing Address 6 Sedgfield Court

City Lutherville State MD Zip Code 21093

Purpose of Disbursement  
Field Consulting - In-kind to Nevada State Party, State Account

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : D552101**

Amount of Each Disbursement this Period

1250.00

\* In-Kind

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

6500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Lionell Gaines**

Mailing Address 1337 Webster St NE

City Washington State DC Zip Code 20017

Purpose of Disbursement  
Field Consulting - in-kind to South Carolina Democratic Party, State

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D552102**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Mr. Lionell Gaines**

Mailing Address 1337 Webster St NE

City Washington State DC Zip Code 20017

Purpose of Disbursement  
Field Consulting - in-kind to South Carolina Democratic Party, State

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D552103**

Amount of Each Disbursement this Period

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Miss. Carlee Griffeth**

Mailing Address 159 Sibbald Drive

City Park Ridge State NJ Zip Code 07656

Purpose of Disbursement  
Field Consulting - in-kind to South Carolina Democratic Party, State

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D552104**

Amount of Each Disbursement this Period

\* In-Kind

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Miss. Carlee Griffeth**

Mailing Address 159 Sibbald Drive

City Park Ridge State NJ Zip Code 07656

Purpose of Disbursement  
Field Consulting - in-kind to South Carolina Democratic Party, State

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
0	9		3	0		2	0	1	4

**Transaction ID : D552105**

Amount of Each Disbursement this Period

1	2	5	0	0	0
---	---	---	---	---	---

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Mr Bryan Hamer**

Mailing Address 5411 McGrath Blvd  
Apt 1616

City North Bethesda State MD Zip Code 20852

Purpose of Disbursement  
Field Consulting - in-kind to South Carolina Democratic Party, State

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
0	9		1	5		2	0	1	4

**Transaction ID : D552106**

Amount of Each Disbursement this Period

1	0	6	5	0	0
---	---	---	---	---	---

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Mr Bryan Hamer**

Mailing Address 5411 McGrath Blvd  
Apt 1616

City North Bethesda State MD Zip Code 20852

Purpose of Disbursement  
Field Consulting - in-kind to South Carolina Democratic Party, State

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
0	9		3	0		2	0	1	4

**Transaction ID : D552107**

Amount of Each Disbursement this Period

1	0	6	5	0	0
---	---	---	---	---	---

\* In-Kind

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

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

3	3	8	0	0	0
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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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Abigail Harrison**

Mailing Address 1410 North Scott  
Apt 1035

City Arlington State VA Zip Code 22209

Purpose of Disbursement  
Field Consulting - in-kind to Iowa Dem Party State Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : **D552108**

Amount of Each Disbursement this Period

1250.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Abigail Harrison**

Mailing Address 1410 North Scott  
Apt 1035

City Arlington State VA Zip Code 22209

Purpose of Disbursement  
Field Consulting - in-kind to Iowa Dem Party State Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : **D552109**

Amount of Each Disbursement this Period

1250.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Ms. Jennifer Hosey**

Mailing Address 4 Monroe Place  
#1206

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Field Consulting - In-kind to NH Democratic Party, State Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : **D552110**

Amount of Each Disbursement this Period

1250.00

\* In-Kind

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

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

3750.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Jennifer Hosey**

Mailing Address 4 Monroe Place  
#1206

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Field Consulting - In-kind to NH Democratic Party, State Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : D552111

Amount of Each Disbursement this Period

1250.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Mr. Stephen Hubbard**

Mailing Address 10019 Vanderbilt Cir. apt. #2

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Field Consulting - in-kind to South Carolina Democratic Party, State

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : D552112

Amount of Each Disbursement this Period

1000.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Mr. Stephen Hubbard**

Mailing Address 10019 Vanderbilt Cir. apt. #2

City Rockville State MD Zip Code 20850

Purpose of Disbursement  
Field Consulting - in-kind to South Carolina Democratic Party, State

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : D552113

Amount of Each Disbursement this Period

1000.00

\* In-Kind

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

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

3250.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Iowa Democratic Party - State**

Mailing Address 5661 Fleur Drive

City Des Moines State IA Zip Code 50321

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 28 / 2014

**Transaction ID : D551910**

Amount of Each Disbursement this Period

10000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. J. Tyler Pearson for State Senate**

Mailing Address 2620 Bruce Street

City Conway State AR Zip Code 72034

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 13 / 2014

**Transaction ID : D551906**

Amount of Each Disbursement this Period

499.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Mr. Stuart Johnson**

Mailing Address 611 K Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Field Consulting - In-kind to Nevada State Party, State Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

**Transaction ID : D552114**

Amount of Each Disbursement this Period

1000.00

Category/  
Type

\* In-Kind

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

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

11499.00



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Stuart Johnson**

Mailing Address 611 K Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Field Consulting - In-kind to Nevada State Party, State Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : D552115**

Amount of Each Disbursement this Period

1000.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Martha Fuller-Clark for Senate**

Mailing Address PO Box 1262

City Portsmouth State NH Zip Code 03802

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

**Transaction ID : D551928**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Mr. Louis McDonald**

Mailing Address PO Box 1464

City Manchester State NH Zip Code 03105-1464

Purpose of Disbursement  
Field Consulting - In-kind to NH Democratic Party, State Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : D552118**

Amount of Each Disbursement this Period

1250.00

\* In-Kind

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

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

3250.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Louis McDonald**

Mailing Address PO Box 1464

City State Zip Code  
Manchester NH 03105-1464

Purpose of Disbursement  
Field Consulting - In-kind to NH Democratic Party, State Account

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
0	9		3	0		2	0	1	4

**Transaction ID : D552119**

Amount of Each Disbursement this Period

1	2	5	0	0	0
---	---	---	---	---	---

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. New Hampshire Senate Democratic Caucus**

Mailing Address 105 North State Street

City State Zip Code  
Concord NH 03301

Purpose of Disbursement  
Committee Contributions

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
0	8		1	3		2	0	1	4

**Transaction ID : D551904**

Amount of Each Disbursement this Period

2	5	0	0	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Mr. Gordon Pera**

Mailing Address 1741 Carr Ave

City State Zip Code  
Memphis TN 38104

Purpose of Disbursement  
Field Consulting - in-kind to Iowa Dem Party State Account

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
0	9		1	5		2	0	1	4

**Transaction ID : D552120**

Amount of Each Disbursement this Period

1	2	5	0	0
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\* In-Kind

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

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

5	0	0	0	0
---	---	---	---	---

5	0	0	0	0
---	---	---	---	---

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Gordon Pera**

Mailing Address 1741 Carr Ave

City Memphis State TN Zip Code 38104

Purpose of Disbursement  
Field Consulting - in-kind to Iowa Dem Party State Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : D552121**

Amount of Each Disbursement this Period

1250.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Portsmouth Democrats**

Mailing Address PO Box 780

City Portsmouth State NH Zip Code 03802

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

**Transaction ID : D551920**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Mr. Faheem Rathore**

Mailing Address 2829 Connecticut Ave NW  
Apt 213

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Field Consulting - in-kind to Anderson for Iowa

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : D552122**

Amount of Each Disbursement this Period

1250.00

\* In-Kind

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

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

5000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

### A. Mr. Faheem Rathore

Mailing Address 2829 Connecticut Ave NW  
Apt 213

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Field Consulting - in-kind to Anderson for Iowa

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2014

Transaction ID : D552123

Amount of Each Disbursement this Period

1250.00
---------

\* In-Kind

Full Name (Last, First, Middle Initial)

### B. Namir Shah

Mailing Address 12 Dunhill Court

City Voorhees State NJ Zip Code 08043

Purpose of Disbursement  
Field Consulting - in-kind to Iowa Dem Party State Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2014

Transaction ID : D552124

Amount of Each Disbursement this Period

1250.00
---------

\* In-Kind

Full Name (Last, First, Middle Initial)

### C. Namir Shah

Mailing Address 12 Dunhill Court

City Voorhees State NJ Zip Code 08043

Purpose of Disbursement  
Field Consulting - in-kind to Iowa Dem Party State Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2014

Transaction ID : D552125

Amount of Each Disbursement this Period

1250.00
---------

\* In-Kind

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

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

3750.00
---------

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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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Ryan Sharpstene**

Mailing Address 4103 Center Street

City Lyons Falls State NY Zip Code 13368

Purpose of Disbursement  
Field Consulting - In-kind to Hatch for Iowa

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : D552126

Amount of Each Disbursement this Period

1000.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Mr. Ryan Sharpstene**

Mailing Address 4103 Center Street

City Lyons Falls State NY Zip Code 13368

Purpose of Disbursement  
Field Consulting - In-kind to Hatch for Iowa

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : D552127

Amount of Each Disbursement this Period

1000.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Miss. Angela Smith**

Mailing Address 2505 Camp Mineola Road

City Mattituck State NY Zip Code 11952

Purpose of Disbursement  
Field Consulting - In-kind to Hatch for Iowa

Candidate Name

**Neighbors For Hatch**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : D552128

Amount of Each Disbursement this Period

1250.00

\* In-Kind

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

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

3250.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Miss. Angela Smith**

Mailing Address 2505 Camp Mineola Road

City Mattituck State NY Zip Code 11952

Purpose of Disbursement  
Field Consulting - In-kind to Hatch for Iowa

Candidate Name  
**Neighbors For Hatch**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : D552129**

Amount of Each Disbursement this Period

1250.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Mr Samuel Sterling**

Mailing Address 2501 Calvert st NW  
apt 209

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Field Consulting - In-kind to Nevada Democratic Party, State Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : D552132**

Amount of Each Disbursement this Period

1000.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**C. Mr Samuel Sterling**

Mailing Address 2501 Calvert st NW  
apt 209

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Field Consulting - In-kind to Nevada Democratic Party, State Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : D552133**

Amount of Each Disbursement this Period

1000.00

\* In-Kind

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

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

3250.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Strafford County Democratic Committee**

Mailing Address PO Box 247

City Dover State NH Zip Code 03860

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2014

**Transaction ID : D551905**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Taking Jacksonville to the Next Level PC**

Mailing Address 3698 St. Johns Ave Apt 3

City Jacksonville State FL Zip Code 32205

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2014

**Transaction ID : D551919**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Taxpayers for Quinn**

Mailing Address 676 N. LaSalle St Suite 340

City Chicago State IL Zip Code 60654

Purpose of Disbursement  
Committee Contributions

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

**Transaction ID : D551915**

Amount of Each Disbursement this Period

2500.00

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

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

4500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**O' Say Can You See PAC**

Full Name (Last, First, Middle Initial)

**A. Peter Williams**

Mailing Address 2520 Stuart Ave  
#2

City Richmond State VA Zip Code 23220

Purpose of Disbursement  
Field Consulting - in-kind to Mark Schauer for Governor

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  
09 / 15 / 2014

Transaction ID : D552135

Amount of Each Disbursement this Period

1500.00

\* In-Kind

Full Name (Last, First, Middle Initial)

**B. Peter Williams**

Mailing Address 2520 Stuart Ave  
#2

City Richmond State VA Zip Code 23220

Purpose of Disbursement  
Field Consulting - in-kind to Mark Schauer for Governor

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  
09 / 30 / 2014

Transaction ID : D552136

Amount of Each Disbursement this Period

1500.00

\* In-Kind

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

Amount of Each Disbursement this Period

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

3000.00

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

80629.00