

# 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.

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

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

Election on  /  /  in the State of

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

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Lowey, Keith, , ,

Type or Print Name of Treasurer

Signature of Treasurer Lowey, Keith, , , [Electronically Filed] Date  /  /

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

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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Off the Sidelines 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="2017"/>		<input type="text" value="957229.69"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="957229.69"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="199174.82"/>	<input type="text" value="199174.82"/>
(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="1156404.51"/>	<input type="text" value="1156404.51"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="357553.31"/>	<input type="text" value="357553.31"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="798851.20"/>	<input type="text" value="798851.20"/>
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. 05/2016)

Page 3

Write or Type Committee Name

**Off the Sidelines PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

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).....	89825.00	89825.00
(ii) Unitemized .....	42230.00	42230.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	132055.00	132055.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	14850.00	14850.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	146905.00	146905.00
12. Transfers From Affiliated/Other Party Committees.....	52126.74	52126.74
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).....	143.08	143.08
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)).....▶	199174.82	199174.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	199174.82	199174.82

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	206263.31	206263.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	206263.31	206263.31
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	132000.00	132000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	790.00	790.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	790.00	790.00
29. Other Disbursements (Including Non-Federal Donations).....	18500.00	18500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	357553.31	357553.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	357553.31	357553.31

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	146905.00	146905.00
34. Total Contribution Refunds (from Line 28(d)) .....	790.00	790.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	146115.00	146115.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	206263.31	206263.31
37. Offsets to Operating Expenditures (from Line 15, page 3).....	143.08	143.08
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	206120.23	206120.23

**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 166
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Antos, Susan, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 High St  
 City Chatham State NY Zip Code 12037-1109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Empire Justice Center Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 28 / 2017  
**Transaction ID : VTE5HDQBYA3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt 02 / 28 / 2017  
**Transaction ID : VTE5HDQBYA3E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Bartley, Elaine, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Strathmore Dr  
 City Loudonville State NY Zip Code 12211-2023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NY State Office Of Parks & Recreation Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 03 / 2017  
**Transaction ID : VTE5HFA0AE1**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<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 166
	<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)  
**Off the Sidelines PAC**

**A. Bishop, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 250 Mercer St  
 B1308  
 City New York State NY Zip Code 10012-1145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New York University Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2017  
**Transaction ID : VTE5HHE13G5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt 05 / 08 / 2017  
**Transaction ID : VTE5HHE13G5E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Braun, Janet, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2040 Edgewood Dr  
 City South Pasadena State CA Zip Code 91030-3920  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 05 / 31 / 2017  
**Transaction ID : VTE5HJAZ7G9**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<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 8 OF 166
	<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)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

**Transaction ID : VTE5HJAZ7G9E**

Amount of Each Receipt this Period  
2000.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Celli, Andrea, , ,**

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

Mailing Address 2 Sage Hill Ln

City Albany	State NY	Zip Code 12204-1305
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Bankruptcy Trustee
--	---

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
02		18		2017

**Transaction ID : VTE5HDDHWS0**

Amount of Each Receipt this Period  
500.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2017

**Transaction ID : VTE5HDDHWS0E**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 166
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Chasin, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Appleton St  
 City Cambridge State MA Zip Code 02138-3302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Harvard University Occupation (for Individual) Associate Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 15 / 2017  
**Transaction ID : VTE5HFJPXV4**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt 03 / 20 / 2017  
**Transaction ID : VTE5HFJPXV4E**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Connolly, Ann, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 Louise St  
 City Delmar State NY Zip Code 12054-4008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 12 / 2017  
**Transaction ID : VTE5HF9ZMS1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2017

**Transaction ID : VTE5HF9ZMS1E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Connolly, Ann, F., ,**

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

Mailing Address 12 Louise St

City Delmar	State NY	Zip Code 12054-4008
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2017

**Transaction ID : VTE5HK9S5M4**

Amount of Each Receipt this Period  
100.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2017

**Transaction ID : VTE5HK9S5M4E**

Amount of Each Receipt this Period  
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 166
	<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)  
**Off the Sidelines PAC**

**A. Davis, Doreen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 590  
 City Palenville State NY Zip Code 12463-0590  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **02 / 27 / 2017**  
**Transaction ID : VTE5HDQBYC9**  
 Amount of Each Receipt this Period 450.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt **02 / 28 / 2017**  
**Transaction ID : VTE5HDQBYC9E**  
 Amount of Each Receipt this Period 450.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. DeGolia, Rick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 84 Clay Dr  
 City Atherton State CA Zip Code 94027-5420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Green Wireless Systems Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **01 / 16 / 2017**  
**Transaction ID : VTE5HBP3BK1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2017

**Transaction ID : VTE5HBP3BK1E**

Amount of Each Receipt this Period  
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. DeGolia, Rick, , ,**

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

Mailing Address 84 Clay Dr

City Atherton	State CA	Zip Code 94027-5420
------------------	-------------	------------------------

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

Name of Employer (for Individual) Green Wireless Systems	Occupation (for Individual) CEO
---	------------------------------------

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
02	/	16	/	2017

**Transaction ID : VTE5HDDHWY9**

Amount of Each Receipt this Period  
50.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2017

**Transaction ID : VTE5HDDHWY9E**

Amount of Each Receipt this Period  
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 166
	<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)  
**Off the Sidelines PAC**

**A. DeGolia, Rick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 84 Clay Dr  
 City Atherton State CA Zip Code 94027-5420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Green Wireless Systems Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 16 / 2017  
**Transaction ID : VTE5HFJPY45**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt 03 / 20 / 2017  
**Transaction ID : VTE5HFJPY45E**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. DeGolia, Rick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 84 Clay Dr  
 City Atherton State CA Zip Code 94027-5420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Green Wireless Systems Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 16 / 2017  
**Transaction ID : VTE5HG9HKR8**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<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 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 118650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2017

**Transaction ID : VTE5HG9HKR8E**

Amount of Each Receipt this Period  
 50.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. DeGolia, Rick, , ,**

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

Mailing Address 84 Clay Dr

City Atherton	State CA	Zip Code 94027-5420
------------------	-------------	------------------------

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

Name of Employer (for Individual) Green Wireless Systems	Occupation (for Individual) CEO
---	------------------------------------

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  
 05 / 16 / 2017

**Transaction ID : VTE5HHTQPX6**

Amount of Each Receipt this Period  
 50.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
 118650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2017

**Transaction ID : VTE5HHTQPX6E**

Amount of Each Receipt this Period  
 50.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<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 15 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. DeGolia, Rick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 84 Clay Dr  
 City Atherton State CA Zip Code 94027-5420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Green Wireless Systems Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2017  
**Transaction ID : VTE5HK9S5K6**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt 06 / 19 / 2017  
**Transaction ID : VTE5HK9S5K6E**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Donahoe, Eileen, Chamberlain, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Palmer Ln  
 City Portola Valley State CA Zip Code 94028-7918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Center For International Security Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 01 / 2017  
**Transaction ID : VTE5HJAZ9X5**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5050.00
<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 16 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2017

**Transaction ID : VTE5HJAZ9X5E**

Amount of Each Receipt this Period  
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Duffy, Michael, , ,**

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

Mailing Address 560 Collins St

City Hillsdale	State NY	Zip Code 12529-5909
-------------------	-------------	------------------------

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

Name of Employer (for Individual)    Occupation (for Individual)  
MJD Painting & Design    Painting Contractor

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
02	/	26	/	2017

**Transaction ID : VTE5HDJEZM6**

Amount of Each Receipt this Period  
300.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2017

**Transaction ID : VTE5HDJEZM6E**

Amount of Each Receipt this Period  
300.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<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 17 OF 166
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Feder, Phyllis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Central Park W  
 City New York State NY Zip Code 10023-4250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2017  
**Transaction ID : VTE5HHE13E9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt 05 / 08 / 2017  
**Transaction ID : VTE5HHE13E9E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Ferdman, Stephanie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 211 Central Park W Apt 17E  
 City New York State NY Zip Code 10024-6020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 29 / 2017  
**Transaction ID : VTE5HBW2N64**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<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 18 OF 166
	<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)  
**Off the Sidelines PAC**

**A. Ferrero, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1047  
 City Corning State NY Zip Code 14830-0847  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Corning Inc Occupation (for Individual) Chief Administrative Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **06 / 14 / 2017**  
**Transaction ID : VTE5HK9S5Q8**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt **06 / 19 / 2017**  
**Transaction ID : VTE5HK9S5Q8E**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Gansky, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1436 2Nd St Unit 330  
 City Napa State CA Zip Code 94559-5053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Author  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 05 / 2017**  
**Transaction ID : VTE5HHE13J1**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3200.00
<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 19 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

**Transaction ID : VTE5HHE13J1E**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Gilbert, Elizabeth, , ,**

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

Mailing Address 501 Harrison St

City Frenchtown	State NJ	Zip Code 08825-1116
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
Self Employed Writer

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
05		05		2017

**Transaction ID : VTE5HHE13H3**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

**Transaction ID : VTE5HHE13H3E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<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 20 OF 166
	<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)  
**Off the Sidelines PAC**

**A. Grasseschi, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1083 Vine St  
 Mailbox 249  
 City Healdsburg State CA Zip Code 95448-4830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Puma Springs Vineyards Occupation (for Individual) Farmer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 08 / 2017**  
**Transaction ID : VTE5HJE2TG9**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt **06 / 12 / 2017**  
**Transaction ID : VTE5HJE2TG9E**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Hanley, Andrea, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28 Barrington Ct  
 City Schenectady State NY Zip Code 12309-2040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Commercial Driver's License School Occupation (for Individual) Business Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 17 / 2017**  
**Transaction ID : VTE5HDDHWQ6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<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 21 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2017

**Transaction ID : VTE5HDDHWQ6E**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Harkness, Timothy, P, ,**

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

Mailing Address 7 Sherwood Farm Ln

City Greenwich	State CT	Zip Code 06831-4410
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Freshfields Bruckhaus Deringer US LLP	Occupation (for Individual) 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
05	/	06	/	2017

**Transaction ID : VTE5HHE13D1**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2017

**Transaction ID : VTE5HHE13D1E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<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 166
	<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)  
**Off the Sidelines PAC**

**A. Hogan, Carla, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43 Pinewood Ave  
 City Albany State NY Zip Code 12208-2711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hogan & Horowitz Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 02 / 2017**  
**Transaction ID : VTE5HDT5MR1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt **03 / 06 / 2017**  
**Transaction ID : VTE5HDT5MR1E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Janovic, Florence, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 Central Park W  
 City New York State NY Zip Code 10023-4198  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 05 / 2017**  
**Transaction ID : VTE5HHE13F7**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<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 23 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2017

**Transaction ID : VTE5HHE13F7E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Klein, Melissa, , ,**

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

Mailing Address 661 Moreno Ave

City Los Angeles	State CA	Zip Code 90049-4830
---------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Homemaker
--	--

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
01	/	24	/	2017

**Transaction ID : VTE5HBQA4N1**

Amount of Each Receipt this Period  
5000.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

**Transaction ID : VTE5HBQA4N1E**

Amount of Each Receipt this Period  
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Klein, Scott, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 661 Moreno Ave  
 City Los Angeles State CA Zip Code 90049-4830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Beach Point Capital Occupation (for Individual) Managing Partner  
 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  
 01 / 24 / 2017  
**Transaction ID : VTE5HBQA4P9**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 30 / 2017  
**Transaction ID : VTE5HBQA4P9E**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Krause, Gwen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Whitman Ct  
 City Troy State NY Zip Code 12180-4733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vantage Partners Occupation (for Individual) Negotiation Specialist  
 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  
 02 / 27 / 2017  
**Transaction ID : VTE5HDQB YB1**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5250.00
<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 25 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2017

**Transaction ID : VTE5HDQBYB1E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Lafer, Jill, , ,**

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

Mailing Address 1060 5Th Ave Apt 7B

City New York	State NY	Zip Code 10128-0104
------------------	-------------	------------------------

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

Name of Employer (for Individual) Planned Parenthood Federation Board Of	Occupation (for Individual) Chair
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	09	/	2017

**Transaction ID : VTE5HBMFYF0**

Amount of Each Receipt this Period  
2500.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	16	/	2017

**Transaction ID : VTE5HBMFYF0E**

Amount of Each Receipt this Period  
2500.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<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 26 OF 166
	<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)  
**Off the Sidelines PAC**

**A. Lafer, Jill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1060 5Th Ave  
 Apt 7B  
 City New York State NY Zip Code 10128-0104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Planned Parenthood Federation Board Of Occupation (for Individual) Chair  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **3500.00**

Date of Receipt **02 / 08 / 2017**  
**Transaction ID : VTE5HDGT5Q4**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item

**B. Lo, Anita, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13 Barrow St  
 City New York State NY Zip Code 10014-3823  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Annisa Restaurant Occupation (for Individual) Chef  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **700.00**

Date of Receipt **03 / 09 / 2017**  
**Transaction ID : VTE5HF9ZMT9**  
 Amount of Each Receipt this Period **700.00**  
 Memo Item  
 \* Earmarked Contribution: See Below

**C. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C C00401224**  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **118650.00**

Date of Receipt **03 / 13 / 2017**  
**Transaction ID : VTE5HF9ZMT9E**  
 Amount of Each Receipt this Period **700.00**  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1700.00</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: (check only one)	PAGE 27 OF 166
	<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)  
**Off the Sidelines PAC**

**A. Manley, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 108 S Monroe St  
 City Tallahassee State FL Zip Code 32301-1584  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Prime Strategies LLC Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 23 / 2017  
**Transaction ID : VTE5HKNTJE1**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt 06 / 26 / 2017  
**Transaction ID : VTE5HKNTJE1E**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Miller, George, Keith, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 222 Saint Nicholas Ave Apt 8A  
 City New York State NY Zip Code 10027-6142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mayer Brown LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 09 / 2017  
**Transaction ID : VTE5HBMFYE2**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<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 28 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	16	/	2017

**Transaction ID : VTE5HBMFYE2E**

Amount of Each Receipt this Period  
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Naegle, Suzanne, , ,**

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

Mailing Address 12100 Wilshire Blvd

City Los Angeles	State CA	Zip Code 90025-7120
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Annapurna Pictures	Occupation (for Individual) President Of Television
---	--

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
06	/	27	/	2017

**Transaction ID : VTE5HKXZE31**

Amount of Each Receipt this Period  
5000.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2017

**Transaction ID : VTE5HKXZE31E**

Amount of Each Receipt this Period  
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

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

FOR LINE NUMBER: PAGE 29 OF 166  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Oppens, Ursula, , ,**

Mailing Address 600 W 115Th St  
Apt 114

City New York State NY Zip Code 10025-7720

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

Name of Employer (for Individual) Northwestern University Occupation (for Individual) Musician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 06 / 2017

**Transaction ID : VTE5HHE13C3**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  
05 / 08 / 2017

**Transaction ID : VTE5HHE13C3E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 4400 Alpha Rd

City Dallas State TX Zip Code 75244-4505

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

Name of Employer (for Individual) Peirson Patterson, LLP Occupation (for Individual) Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 08 / 2017

**Transaction ID : VTE5HJE2TH7**

Amount of Each Receipt this Period  
5000.00

Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5250.00

**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 30 OF 166
	<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)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2017

**Transaction ID : VTE5HJE2TH7E**

Amount of Each Receipt this Period  
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Peirson, William, H., , Jr.**

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

Mailing Address 4400 Alpha Rd

City Dallas	State TX	Zip Code 75244-4505
----------------	-------------	------------------------

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

Name of Employer (for Individual) Peirson Patterson, LLP	Occupation (for Individual) Attorney
---	---

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
06		09		2017

**Transaction ID : VTE5HJE2TV6**

Amount of Each Receipt this Period  
5000.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2017

**Transaction ID : VTE5HJE2TV6E**

Amount of Each Receipt this Period  
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 166
	<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)  
**Off the Sidelines PAC**

**A. Pietrzak, Alfred, Robert, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 W 57Th St  
 Apt 31A  
 City New York State NY Zip Code 10019-3178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sidley Austin Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 09 / 2017  
**Transaction ID : VTE5HBMFXQ0**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt 01 / 16 / 2017  
**Transaction ID : VTE5HBMFXQ0E**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Sevcik, Beatrice, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Broadmoor Rd  
 City Scarsdale State NY Zip Code 10583-7604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 05 / 2017  
**Transaction ID : VTE5HHE13K9**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7700.00
<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 32 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2017

**Transaction ID : VTE5HHE13K9E**

Amount of Each Receipt this Period  
2700.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Sevcik, Beatrice, , ,**

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

Mailing Address 6 Broadmoor Rd

City Scarsdale	State NY	Zip Code 10583-7604
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
N/A Retired

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
06	/	17	/	2017

**Transaction ID : VTE5HK9S5N2**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2017

**Transaction ID : VTE5HK9S5N2E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<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 33 OF 166
	<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	<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)  
**Off the Sidelines PAC**

**A. Sevcik, Beatrice, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Broadmoor Rd  
 City Scarsdale State NY Zip Code 10583-7604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 17 / 2017  
**Transaction ID : VTE5HK9S5P0**  
 Amount of Each Receipt this Period 2050.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt 06 / 19 / 2017  
**Transaction ID : VTE5HK9S5P0E**  
 Amount of Each Receipt this Period 2050.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Sevcik, Beatrice, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Broadmoor Rd  
 City Scarsdale State NY Zip Code 10583-7604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 17 / 2017  
**Transaction ID : VTE5HK9SE39**  
 Amount of Each Receipt this Period 650.00  
 Memo Item  
 \* Earmarked Contribution: See Below Refund Issued this Period

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2700.00  
**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 34 OF 166
	<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)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2017

**Transaction ID : VTE5HK9SE39E**

Amount of Each Receipt this Period  
650.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Shahinfar, Darius, , ,**

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

Mailing Address 151 S Lake Ave

City Albany	State NY	Zip Code 12208-3202
----------------	-------------	------------------------

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

Name of Employer (for Individual) City Of Albany	Occupation (for Individual) Treasurer
---	--

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
03	/	03	/	2017

**Transaction ID : VTE5HFA0RA0**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. Sheehan, Katherine, , ,**

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

Mailing Address 71 Marsdale St

City Albany	State NY	Zip Code 12208-1640
----------------	-------------	------------------------

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

Name of Employer (for Individual) City Of Albany	Occupation (for Individual) Mayor
---	--------------------------------------

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
02	/	16	/	2017

**Transaction ID : VTE5HDDHWR2**

Amount of Each Receipt this Period  
500.00

Memo Item

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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 35 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2017

**Transaction ID : VTE5HDDHWR2E**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Shenker, Russo & Clark, LLP**

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

Mailing Address 121 State St  
Ste 4

City Albany	State NY	Zip Code 12207-1633
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2017

**Transaction ID : VTE5HFA09P1**

Amount of Each Receipt this Period  
250.00

Memo Item

PARTNERSHIP--partners below if itemized

**C. Shenker, Cynthia, , ,**

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

Mailing Address 6 Colonial Grn

City Albany	State NY	Zip Code 12211-1704
----------------	-------------	------------------------

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

Name of Employer (for Individual) Shenker Russo & Clark	Occupation (for Individual) 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
03	/	03	/	2017

**Transaction ID : VTE5HKVAFRO**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<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 36 OF 166
	<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)  
**Off the Sidelines PAC**

**A. Sherman, Jonathan, Henry, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5001 Millwood Ln NW  
 City Washington State DC Zip Code 20016-2619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Boies Schiller & Flexner Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 30 / 2016  
**Transaction ID : VTE5HBHQQJ6**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt 01 / 02 / 2017  
**Transaction ID : VTE5HBHQQJ6E**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Silberman, Claire, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 360 Furman St Apt 1216  
 City Brooklyn State NY Zip Code 11201-4579  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 14 / 2017  
**Transaction ID : VTE5HFJPXR1**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<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 37 OF 166
	<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)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2017

**Transaction ID : VTE5HFJPR1E**

Amount of Each Receipt this Period  
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Singer, Toby, G., ,**

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

Mailing Address 5519 Center St

City Chevy Chase	State MD	Zip Code 20815-3438
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Jones Day	Occupation (for Individual) Attorney
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2016

**Transaction ID : VTE5HBHQF2**

Amount of Each Receipt this Period  
100.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	02	/	2017

**Transaction ID : VTE5HBHQF2E**

Amount of Each Receipt this Period  
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<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 38 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Singer, Toby, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5519 Center St  
 City Chevy Chase State MD Zip Code 20815-3438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Jones Day Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **02 / 03 / 2017**  
**Transaction ID : VTE5HBTSGH8**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt **02 / 06 / 2017**  
**Transaction ID : VTE5HBTSGH8E**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Snyder, Brian, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 555 Madison Ave Ste 1302  
 City New York State NY Zip Code 10022-3406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HBJ Investments Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 15 / 2017**  
**Transaction ID : VTE5HDNGY82**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<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 39 OF 166
	<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)  
**Off the Sidelines PAC**

**A. Stewart, Rochelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 516 W 47Th St  
 Apt S1B  
 City New York State NY Zip Code 10036-2973  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Conde Nast Occupation (for Individual) Media  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 02 / 03 / 2017  
**Transaction ID : VTE5HBTSGG0**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 118650.00

Date of Receipt 02 / 06 / 2017  
**Transaction ID : VTE5HBTSGG0E**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Stewart, Rochelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 516 W 47Th St  
 Apt S1B  
 City New York State NY Zip Code 10036-2973  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Conde Nast Occupation (for Individual) Media  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 02 / 03 / 2017  
**Transaction ID : VTE5HBTSHS4**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 525.00  
**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 40 OF 166
	<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)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2017

**Transaction ID : VTE5HBTSHS4E**

Amount of Each Receipt this Period  
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Stone, Eileen, , ,**

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

Mailing Address 724 Charlton Rd

City Charlton	State NY	Zip Code 12019-2802
------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

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
02		28		2017

**Transaction ID : VTE5HDQBZ70**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2017

**Transaction ID : VTE5HDQBZ70E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<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 41 OF 166
	<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)  
**Off the Sidelines PAC**

**A. Sulek, David, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 108 Harrison St NE

City Leesburg	State VA	Zip Code 20176-2308
------------------	-------------	------------------------

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

Name of Employer (for Individual) Booz Allen Hamilton	Occupation (for Individual) Consultant
--	---

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
01	/	23	/	2017

**Transaction ID : VTE5HBQA4Q7**

Amount of Each Receipt this Period  
500.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2017

**Transaction ID : VTE5HBQA4Q7E**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 115 Huntersfield Rd

City Delmar	State NY	Zip Code 12054-3827
----------------	-------------	------------------------

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

Name of Employer (for Individual) Tucker Strategies Inc.	Occupation (for Individual) President
---	--

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
02	/	24	/	2017

**Transaction ID : VTE5HDJEZJ0**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 166
	<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)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02		27		2017

**Transaction ID : VTE5HDJEZJ0E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Walden, James, , ,**

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

Mailing Address 200 Hicks St

City Brooklyn	State NY	Zip Code 11201-4108
------------------	-------------	------------------------

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

Name of Employer (for Individual) Walden Macht & Haran LLP	Occupation (for Individual) Attorney
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		12		2017

**Transaction ID : VTE5HFN3CS9**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. Weseley, Phoebe, , ,**

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

Mailing Address 455 Bunn Rd

City Bedminster	State NJ	Zip Code 07921-2967
--------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Homemaker
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		08		2017

**Transaction ID : VTE5HG08SR3**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<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 43 OF 166
	<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)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2017

**Transaction ID : VTE5HG08SR3E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Witko, Robert, F., ,**

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

Mailing Address 114 Euclid Ave

City Albany	State NY	Zip Code 12203-1825
----------------	-------------	------------------------

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

Name of Employer (for Individual) Fort Orange Press	Occupation (for Individual) Owner
--	--------------------------------------

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
02	/	24	/	2017

**Transaction ID : VTE5HFA09G4**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Zamer, Deborah, , ,**

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

Mailing Address 206 Lenox Ave

City Albany	State NY	Zip Code 12208-1406
----------------	-------------	------------------------

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

Name of Employer (for Individual) Judy Rosen Real Estate	Occupation (for Individual) Realtor
---	--

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
02	/	24	/	2017

**Transaction ID : VTE5HDJEZK8**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<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 44 OF 166
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ACTBLUE**

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

Mailing Address PO Box 441146

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
118650.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	27	/	2017

**Transaction ID : VTE5HDJEZK8E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

**C.**

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	89825.00

**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 45 OF 166
<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)  
**Off the Sidelines PAC**

**A. Citizens For Yepsen**

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

Mailing Address 91 5Th Ave

City Saratoga Springs	State NY	Zip Code 12866-3611
--------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2017

**Transaction ID : VTE5HFA0907**

Amount of Each Receipt this Period  
250.00

Memo Item

Funds Permissible Under the Act

**B. Friends Of Judge Trexler**

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

Mailing Address PO Box 162

City Albany	State NY	Zip Code 12201-0162
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2017

**Transaction ID : VTE5HFA0NX2**

Amount of Each Receipt this Period  
100.00

Memo Item

Funds Permissible Under the Act

**C. Friends Of Patricia Fahy**

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

Mailing Address PO Box 8282

City Albany	State NY	Zip Code 12208-0282
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2017

**Transaction ID : VTE5HFA0A42**

Amount of Each Receipt this Period  
200.00

Memo Item

Funds Permissible Under the Act

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 166
<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)  
**Off the Sidelines PAC**

**A. Friends Of Patricia Fahy**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 8282

City Albany State NY Zip Code 12208-0282

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 03 / 2017  
**Transaction ID : VTE5HFA0SX1**

Amount of Each Receipt this Period 100.00

Memo Item

Funds Permissible Under the Act

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

Mailing Address 19 Louise Dr

City Latham State NY Zip Code 12110-5617

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 03 / 03 / 2017  
**Transaction ID : VTE5HFA0NA2**

Amount of Each Receipt this Period 100.00

Memo Item

Funds Permissible Under the Act

**C. International Brotherhood Of Electrical Workers PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 7Th St NW

City Washington State DC Zip Code 20001-4089

FEC ID number of contributing federal political committee. **C** C00027342

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

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 01 / 2017  
**Transaction ID : VTE5HGJSVP1**

Amount of Each Receipt this Period 5000.00

Memo Item

Funds Permissible Under the Act

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5200.00

**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 47 OF 166
<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)  
**Off the Sidelines PAC**

**A. Marsh & McLennan Companies Inc PAC**

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

Mailing Address 1166 Avenue Of The Americas

City New York	State NY	Zip Code 10036-2708
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00457234

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

**Transaction ID : VTE5HKWYGK1**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. Peckham Industries, Inc. PAC**

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

Mailing Address 20 Haarlem Ave

City White Plains	State NY	Zip Code 10603-2223
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FEC ID number of contributing federal political committee. **C** C00343681

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2017

**Transaction ID : VTE5HBW2N72**

Amount of Each Receipt this Period  
4000.00

Memo Item

**C. The Committee To Elect Sherri Brooks 2017**

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

Mailing Address 435 Whitehall Rd

City Albany	State NY	Zip Code 12208-1628
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2017

**Transaction ID : VTE5HFA0SP6**

Amount of Each Receipt this Period  
100.00

Memo Item

Funds Permissible Under the Act

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9100.00
<b>TOTAL</b> This Period (last page this line number only).....	14850.00

**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 48 OF 166
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Gillibrand Victory Fund**

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

Mailing Address 124 Washington St  
Ste 101

City Foxboro State MA Zip Code 02035-1368

FEC ID number of contributing federal political committee. **C** C00629964

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
52126.74

Date of Receipt  
03 / 31 / 2017

**Transaction ID : VTE5HM0TJ94**

Amount of Each Receipt this Period  
22126.74

Memo Item

Joint Fundraiser

**B. Boehning, H. Christopher, , ,**

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

Mailing Address 344 W 72Nd St  
Apt 608

City New York State NY Zip Code 10023-2625

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

Name of Employer (for Individual) Occupation (for Individual)  
Paul Weiss Rifkind Wharton & Garrison Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
01 / 16 / 2017

**Transaction ID : VTE5HM0TJH7**

Amount of Each Receipt this Period  
5000.00

Memo Item

\* Joint Fundraiser

**C. Burnham, Ciara, , ,**

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

Mailing Address 815 Park Ave

City New York State NY Zip Code 10021-3295

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

Name of Employer (for Individual) Occupation (for Individual)  
Evercore Trust Company President And CEO

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
01 / 16 / 2017

**Transaction ID : VTE5HM0TJG9**

Amount of Each Receipt this Period  
5000.00

Memo Item

\* Joint Fundraiser

<b>SUBTOTAL</b> of Receipts This Page (optional).....	22126.74
<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 49 OF 166
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Terrio, David, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 219 W 106Th St  
 Apt 4E  
 City New York State NY Zip Code 10025-3663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BTQ Financial Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **01 / 16 / 2017**  
**Transaction ID : VTE5HM0TJD6**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 \* Joint Fundraiser

**B. Weber, Jeffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1060 5Th Ave  
 Apt 2A  
 City New York State NY Zip Code 10128-0104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) York Capital Occupation (for Individual) Investments  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 01 / 2017**  
**Transaction ID : VTE5HM0TJK3**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 \* Joint Fundraiser

**C. Weber, Stacey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1060 5Th Ave  
 City New York State NY Zip Code 10128-0104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 01 / 2017**  
**Transaction ID : VTE5HM0TJJ5**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 \* Joint Fundraiser

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 50 OF 166
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Gillibrand Victory Fund**

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

Mailing Address 124 Washington St  
Ste 101

City Foxboro State MA Zip Code 02035-1368

FEC ID number of contributing federal political committee. **C** C00629964

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
52126.74

Date of Receipt  
06 / 29 / 2017

**Transaction ID : VTE5HM0TJA2**

Amount of Each Receipt this Period  
30000.00

Memo Item

Joint Fundraiser

**B. Barnett, Ayala, , ,**

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

Mailing Address 11519 Mayfair Rd

City Richmond Hill State NY Zip Code 11418-3481

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

Name of Employer (for Individual) Occupation (for Individual)  
Bais Yaakov Academy Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 07 / 2017

**Transaction ID : VTE5HM0TJR3**

Amount of Each Receipt this Period  
5000.00

Memo Item

\* Joint Fundraiser

**C. Barnett, Gary, , ,**

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

Mailing Address 11519 Mayfair Rd

City Richmond Hill State NY Zip Code 11418-3481

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

Name of Employer (for Individual) Occupation (for Individual)  
Extell Real Estate

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 07 / 2017

**Transaction ID : VTE5HM0TJQ5**

Amount of Each Receipt this Period  
5000.00

Memo Item

\* Joint Fundraiser

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30000.00
<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 51 OF 166
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Cerf, Sigrid, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1435 Woodhurst Blvd  
 City McLean State VA Zip Code 22102-2234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : VTE5HM0TJV6**  
 Amount of Each Receipt this Period 4600.00  
 Memo Item  
 \* Joint Fundraiser

**B. Cerf, Vinton, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1435 Woodhurst Blvd  
 City McLean State VA Zip Code 22102-2234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Google Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 22 / 2017  
**Transaction ID : VTE5HM0TJT8**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 \* Joint Fundraiser

**C. Flexner, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29 E 64Th St  
 City New York State NY Zip Code 10065-7003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Boies Schiller & Flexner Occupation (for Individual) Managing Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 04 / 03 / 2017  
**Transaction ID : VTE5HM0TJN9**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item  
 \* Joint Fundraiser

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 166
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Flexner, Lynne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29 E 64Th St  
 Ph  
 City New York State NY Zip Code 10065-7003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2017  
**Transaction ID : VTE5HM0TJM1**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item  
 \* Joint Fundraiser

**B. Jones, Floyd, U., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16268 38Th Ave NE  
 City Lake Forest Park State WA Zip Code 98155-5417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 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  
 05 / 30 / 2017  
**Transaction ID : VTE5HM0TJS0**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 \* Joint Fundraiser

**C. Raymond, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 545 Sabal Palm Rd  
 City Miami State FL Zip Code 33137-3375  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Broad And Cassel Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 09 / 2017  
**Transaction ID : VTE5HM0TJP7**  
 Amount of Each Receipt this Period  
 600.00  
 Memo Item  
 \* Joint Fundraiser

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	52126.74

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Actblue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City West Somerville State MA Zip Code 02144-3132

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 02 / 2017

FEC Identification Number: C

Transaction ID : VTD699PMJ9

Amount of Each Disbursement this Period: 84.56

Memo Item

**B. Actblue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City West Somerville State MA Zip Code 02144-3132

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 09 / 2017

FEC Identification Number: C

Transaction ID : VTD699PY1Z:

Amount of Each Disbursement this Period: 100.36

Memo Item

**C. Actblue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City West Somerville State MA Zip Code 02144-3132

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 16 / 2017

FEC Identification Number: C

Transaction ID : VTD699Q8Cf

Amount of Each Disbursement this Period: 602.37

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 787.29

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 01 / 23 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699QD4C</b> Amount of Each Disbursement this Period [REDACTED] 11.35
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699QEDN</b> Amount of Each Disbursement this Period [REDACTED] 427.29
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699QRCI</b> Amount of Each Disbursement this Period [REDACTED] 7.90
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 446.54
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699QQW</b> Amount of Each Disbursement this Period [REDACTED] 120.80
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699SWF9</b> Amount of Each Disbursement this Period [REDACTED] 11.40
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699V0CF</b> Amount of Each Disbursement this Period [REDACTED] 99.78
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

[REDACTED] 231.98

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Actblue Technical Services**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2017

Mailing Address 366 Summer St

FEC Identification Number

C [REDACTED]

City West Somerville State MA Zip Code 02144-3132

**Transaction ID : VTD699VH0S**  
Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Processing Fees

001  
Category/  
Type

[REDACTED] 258.63

Candidate Name

Memo Item

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

Full Name (Last, First, Middle Initial)

**B. Actblue Technical Services**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2017

Mailing Address 366 Summer St

FEC Identification Number

C [REDACTED]

City West Somerville State MA Zip Code 02144-3132

**Transaction ID : VTD699VN7X**  
Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Processing Fees

001  
Category/  
Type

[REDACTED] 158.67

Candidate Name

Memo Item

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

Full Name (Last, First, Middle Initial)

**C. Actblue Technical Services**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2017

Mailing Address 366 Summer St

FEC Identification Number

C [REDACTED]

City West Somerville State MA Zip Code 02144-3132

**Transaction ID : VTD699W29I**  
Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Processing Fees

001  
Category/  
Type

[REDACTED] 96.38

Candidate Name

Memo Item

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

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

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

[REDACTED] 513.68

[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2017	
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED]	
City West Somerville	State MA	Zip Code 02144-3132	<b>Transaction ID : VTD69A1GN</b>
Purpose of Disbursement Credit Card Processing Fees		Category/ Type 001	Amount of Each Disbursement this Period 141.21
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2017	
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED]	
City West Somerville	State MA	Zip Code 02144-3132	<b>Transaction ID : VTD699XB34!</b>
Purpose of Disbursement Credit Card Processing Fees		Category/ Type 001	Amount of Each Disbursement this Period 242.77
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2017	
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED]	
City West Somerville	State MA	Zip Code 02144-3132	<b>Transaction ID : VTD699XDD/</b>
Purpose of Disbursement Credit Card Processing Fees		Category/ Type 001	Amount of Each Disbursement this Period 2.60
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

386.58

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Actblue Technical Services**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2017

Mailing Address 366 Summer St

FEC Identification Number

C [REDACTED]

City West Somerville State MA Zip Code 02144-3132

**Transaction ID : VTD699XG1K**  
Amount of Each Disbursement this Period

Purpose of Disbursement Credit Card Processing Fees  
Candidate Name  
Category/Type **001**

[REDACTED] 3.37

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. Actblue Technical Services**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2017

Mailing Address 366 Summer St

FEC Identification Number

C [REDACTED]

City West Somerville State MA Zip Code 02144-3132

**Transaction ID : VTD699XG1M**  
Amount of Each Disbursement this Period

Purpose of Disbursement Credit Card Processing Fees  
Candidate Name  
Category/Type **001**

[REDACTED] 2.44

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. Actblue Technical Services**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2017

Mailing Address 366 Summer St

FEC Identification Number

C [REDACTED]

City West Somerville State MA Zip Code 02144-3132

**Transaction ID : VTD699XKB!**  
Amount of Each Disbursement this Period

Purpose of Disbursement Credit Card Processing Fees  
Candidate Name  
Category/Type **001**

[REDACTED] 31.69

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

Memo Item

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

[REDACTED] 37.50

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 04 / 17 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699XSP6</b>
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period [REDACTED] 27.11
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699YY80f</b>
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period [REDACTED] 10.19
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699Z6Wf</b>
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period [REDACTED] 3.68
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

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

40.98

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 08 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699ZJXA</b> Amount of Each Disbursement this Period [REDACTED] 481.51
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699ZXAS</b> Amount of Each Disbursement this Period [REDACTED] 28.30
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 22 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0254</b> Amount of Each Disbursement this Period [REDACTED] 8.71
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 518.52
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A05Wt</b>
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period 2.29
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0A5V</b>
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period 80.39
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0A5V</b>
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period 207.19
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	289.87
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A1GNE</b> Amount of Each Disbursement this Period [REDACTED] 604.00
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0M4X</b> Amount of Each Disbursement this Period [REDACTED] 241.82
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2017
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0Q2f</b> Amount of Each Disbursement this Period [REDACTED] 49.12
City West Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

[REDACTED] 894.94

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Actblue Technical Services**

Mailing Address 366 Summer St

City  
West Somerville

State  
MA

Zip Code  
02144-3132

Purpose of Disbursement  
Credit Card Processing Fees

001

Category/  
Type

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	6		3	0		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : VTD69A16YT  
Amount of Each Disbursement this Period

[REDACTED] 389.22

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 99 Jefferson Road

City  
Port Reading

State  
NJ

Zip Code  
07064

Purpose of Disbursement  
Payroll Fee

001

Category/  
Type

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	1		0	6		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : VTD69A0SK7  
Amount of Each Disbursement this Period

[REDACTED] 100.47

Memo Item

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 99 Jefferson Road

City  
Port Reading

State  
NJ

Zip Code  
07064

Purpose of Disbursement  
Payroll Taxes/Withholdings

001

Category/  
Type

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	1		1	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : VTD69A0SK2  
Amount of Each Disbursement this Period

[REDACTED] 6357.20

Memo Item

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

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

[REDACTED] 6846.89

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement  
Payroll Fee

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
01 / 20 / 2017

FEC Identification Number  
  
**Transaction ID : VTD69A0SK8**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement  
Payroll Fee

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
01 / 25 / 2017

FEC Identification Number  
  
**Transaction ID : VTD69A0SK9**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement  
Payroll Taxes/Withholdings

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
01 / 31 / 2017

FEC Identification Number  
  
**Transaction ID : VTD69A0SM**  
Amount of Each Disbursement this Period

Memo Item

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SKC

Amount of Each Disbursement this Period: 100.47

Memo Item

**B. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement Payroll Taxes/Withholdings

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 16 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SM3

Amount of Each Disbursement this Period: 405.47

Memo Item

**C. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement Payroll Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SKI

Amount of Each Disbursement this Period: 100.47

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 606.41

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017
Mailing Address 99 Jefferson Road		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SM</b> Amount of Each Disbursement this Period 419.42
City Port Reading	State NJ	Zip Code 07064
Purpose of Disbursement Payroll Taxes/Withholdings		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ADP</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2017
Mailing Address 99 Jefferson Road		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SKE</b> Amount of Each Disbursement this Period 21.00
City Port Reading	State NJ	Zip Code 07064
Purpose of Disbursement Payroll Fee		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2017
Mailing Address 99 Jefferson Road		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SKI</b> Amount of Each Disbursement this Period 102.93
City Port Reading	State NJ	Zip Code 07064
Purpose of Disbursement Payroll Fee		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	543.35
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement Payroll Taxes/Withholdings

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
03 / 16 / 2017

FEC Identification Number  
  
**Transaction ID : VTD69A0SM/**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement Payroll Fee

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
03 / 24 / 2017

FEC Identification Number  
  
**Transaction ID : VTD69A0SKG**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement Payroll Taxes/Withholdings

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
03 / 31 / 2017

FEC Identification Number  
  
**Transaction ID : VTD69A0SMI**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>			Date of Disbursement M M / D D / Y Y Y Y Y 04 / 07 / 2017		
Mailing Address 99 Jefferson Road			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SK</b> Amount of Each Disbursement this Period [REDACTED] 107.86		
City Port Reading	State NJ	Zip Code 07064	Category/Type 001		
Purpose of Disbursement Payroll Fee		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) <b>B. ADP</b>			Date of Disbursement M M / D D / Y Y Y Y Y 04 / 14 / 2017		
Mailing Address 99 Jefferson Road			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0AE2</b> Amount of Each Disbursement this Period [REDACTED] 2010.01		
City Port Reading	State NJ	Zip Code 07064	Category/Type 001		
Purpose of Disbursement Payroll Taxes/Withholdings		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) <b>C. ADP</b>			Date of Disbursement M M / D D / Y Y Y Y Y 04 / 21 / 2017		
Mailing Address 99 Jefferson Road			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SK</b> Amount of Each Disbursement this Period [REDACTED] 131.44		
City Port Reading	State NJ	Zip Code 07064	Category/Type 001		
Purpose of Disbursement Payroll Fee		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[REDACTED] 2249.31		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			[REDACTED]		

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 28 / 2017		
Mailing Address 99 Jefferson Road			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SMC</b> Amount of Each Disbursement this Period [REDACTED] 1890.28		
City Port Reading	State NJ	Zip Code 07064	Category/Type 001		
Purpose of Disbursement Payroll Taxes/Withholdings		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) <b>B. ADP</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 05 / 08 / 2017		
Mailing Address 99 Jefferson Road			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SKK</b> Amount of Each Disbursement this Period [REDACTED] 110.44		
City Port Reading	State NJ	Zip Code 07064	Category/Type 001		
Purpose of Disbursement Payroll Fee		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) <b>C. ADP</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 05 / 16 / 2017		
Mailing Address 99 Jefferson Road			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SW</b> Amount of Each Disbursement this Period [REDACTED] 1861.96		
City Port Reading	State NJ	Zip Code 07064	Category/Type 001		
Purpose of Disbursement Payroll Taxes/Withholdings		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[REDACTED] 3862.68		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			[REDACTED]		

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement  
Payroll Fee

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
05 / 19 / 2017

FEC Identification Number  
  
**Transaction ID : VTD69A0SKN**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement  
Payroll Fee

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
05 / 26 / 2017

FEC Identification Number  
  
**Transaction ID : VTD69A0SKP**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement  
Payroll Taxes/Withholdings

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
05 / 31 / 2017

FEC Identification Number  
  
**Transaction ID : VTD69A0SW**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement MM / DD / YYYY 06 / 09 / 2017
Mailing Address 99 Jefferson Road		FEC Identification Number C [REDACTED]
City Port Reading	State NJ	Zip Code 07064
Purpose of Disbursement Payroll Fee		Category/Type 001
Candidate Name		Transaction ID : VTD69A0SKC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 110.44
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. ADP</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2017
Mailing Address 99 Jefferson Road		FEC Identification Number C [REDACTED]
City Port Reading	State NJ	Zip Code 07064
Purpose of Disbursement Payroll Taxes/Withholdings		Category/Type 001
Candidate Name		Transaction ID : VTD69A0SWI
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 1964.91
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2017
Mailing Address 99 Jefferson Road		FEC Identification Number C [REDACTED]
City Port Reading	State NJ	Zip Code 07064
Purpose of Disbursement Payroll Fee		Category/Type 001
Candidate Name		Transaction ID : VTD69A0SKI
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 110.44
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2185.79
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement  
Payroll Taxes/Withholdings

001

Category/  
Type

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	6		3	0		2	0	1	7

FEC Identification Number

C [REDACTED]  
**Transaction ID : VTD69A0SW**  
Amount of Each Disbursement this Period  
[REDACTED] 1956.48

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 99 Jefferson Road

City Port Reading State NJ Zip Code 07064

Purpose of Disbursement  
Payroll Fee

001

Category/  
Type

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	6		3	0		2	0	1	7

FEC Identification Number

C [REDACTED]  
**Transaction ID : VTD69A1GNE**  
Amount of Each Disbursement this Period  
[REDACTED] 21.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. AIM Mutual Insurance**

Mailing Address 290 Donald Lynch Blvd

City Marlborough State MA Zip Code 01752-4705

Purpose of Disbursement  
Insurance

001

Category/  
Type

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	5		1	1		2	0	1	7

FEC Identification Number

C [REDACTED]  
**Transaction ID : VTD69A0SKt**  
Amount of Each Disbursement this Period  
[REDACTED] 294.00

Memo Item

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

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

2	2	7	1	.	4	8
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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"/> 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)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)  
**A. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement Credit Card - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type: **001**

Date of Disbursement: 01 / 03 / 2017

FEC Identification Number: **C**

Transaction ID : **VTD699NQG1**

Amount of Each Disbursement this Period: 3699.63

Memo Item

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

Mailing Address 141 E 48Th St

City New York State NY Zip Code 10017-1223

Purpose of Disbursement Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type: **001**

Date of Disbursement: 01 / 03 / 2017

FEC Identification Number: **C**

Transaction ID : **VTD699NQG3**

Amount of Each Disbursement this Period: 315.06

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Distad's BP**

Mailing Address 823 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-2155

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type: **002**

Date of Disbursement: 01 / 03 / 2017

FEC Identification Number: **C**

Transaction ID : **VTD699NQE1**

Amount of Each Disbursement this Period: 38.80

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3699.63

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

### A. Distad's BP

Mailing Address 823 Pennsylvania Ave SE

City  
Washington

State  
DC

Zip Code  
20003-2155

Purpose of Disbursement  
Travel

002
Category/ Type

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
01		03		2017

FEC Identification Number

C
Transaction ID : VTD699NQE1
Amount of Each Disbursement this Period
44.91

Memo Item

Full Name (Last, First, Middle Initial)

### B. Distad's BP

Mailing Address 823 Pennsylvania Ave SE

City  
Washington

State  
DC

Zip Code  
20003-2155

Purpose of Disbursement  
Travel

002
Category/ Type

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
01		03		2017

FEC Identification Number

C
Transaction ID : VTD699NQF2
Amount of Each Disbursement this Period
39.28

Memo Item

Full Name (Last, First, Middle Initial)

### C. Distad's BP

Mailing Address 823 Pennsylvania Ave SE

City  
Washington

State  
DC

Zip Code  
20003-2155

Purpose of Disbursement  
Travel

002
Category/ Type

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
01		03		2017

FEC Identification Number

C
Transaction ID : VTD699NQF1
Amount of Each Disbursement this Period
44.45

Memo Item

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Distad's BP</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2017
Mailing Address 823 Pennsylvania Ave SE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699NQG</b> Amount of Each Disbursement this Period [REDACTED] 40.60
City Washington	State DC	Zip Code 20003-2155
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. JW Marriott Essex House</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2017
Mailing Address 160 Central Park S		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699NQG</b> Amount of Each Disbursement this Period [REDACTED] 541.67
City New York	State NY	Zip Code 10019-1502
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. JW Marriott Essex House</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2017
Mailing Address 160 Central Park S		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699NQG</b> Amount of Each Disbursement this Period [REDACTED] 677.09
City New York	State NY	Zip Code 10019-1502
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. JW Marriott Essex House</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2017	
Mailing Address 160 Central Park S		FEC Identification Number C [REDACTED]	
City New York	State NY	Zip Code 10019-1502	Transaction ID : <b>VTD699NQG</b>
Purpose of Disbursement Travel		Category/Type 002	Amount of Each Disbursement this Period 679.09
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. JW Marriott Essex House</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2017	
Mailing Address 160 Central Park S		FEC Identification Number C [REDACTED]	
City New York	State NY	Zip Code 10019-1502	Transaction ID : <b>VTD699NQG</b>
Purpose of Disbursement Travel		Category/Type 002	Amount of Each Disbursement this Period 87.12
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. JW Marriott Essex House</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2017	
Mailing Address 160 Central Park S		FEC Identification Number C [REDACTED]	
City New York	State NY	Zip Code 10019-1502	Transaction ID : <b>VTD699NQG</b>
Purpose of Disbursement Travel		Category/Type 002	Amount of Each Disbursement this Period 253.40
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. JW Marriott Essex House</b>			Date of Disbursement MM / DD / YYYY 01 / 03 / 2017	
Mailing Address 160 Central Park S				
City New York		State NY	Zip Code 10019-1502	
Purpose of Disbursement Travel			<input type="text" value="002"/> Category/ Type	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		FEC Identification Number <input type="text" value="C"/> <b>Transaction ID : VTD699NQG1</b> Amount of Each Disbursement this Period <input type="text" value="361.29"/> * <input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. UPS</b>			Date of Disbursement MM / DD / YYYY 01 / 03 / 2017	
Mailing Address 55 Glenlake Pkwy				
City Atlanta		State GA	Zip Code 30328-3474	
Purpose of Disbursement Postage			<input type="text" value="001"/> Category/ Type	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		FEC Identification Number <input type="text" value="C"/> <b>Transaction ID : VTD699NQES</b> Amount of Each Disbursement this Period <input type="text" value="15.95"/> * <input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. UPS</b>			Date of Disbursement MM / DD / YYYY 01 / 03 / 2017	
Mailing Address 55 Glenlake Pkwy				
City Atlanta		State GA	Zip Code 30328-3474	
Purpose of Disbursement Postage			<input type="text" value="001"/> Category/ Type	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		FEC Identification Number <input type="text" value="C"/> <b>Transaction ID : VTD699NQE;</b> Amount of Each Disbursement this Period <input type="text" value="35.62"/> * <input checked="" type="checkbox"/> Memo Item		

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2017
Mailing Address 55 Glenlake Pkwy		FEC Identification Number C [REDACTED]
City Atlanta	State GA	Zip Code 30328-3474
Purpose of Disbursement Postage		001
Candidate Name		Transaction ID : VTD699NQF5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Amount of Each Disbursement this Period 135.04
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		* <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2017
Mailing Address 55 Glenlake Pkwy		FEC Identification Number C [REDACTED]
City Atlanta	State GA	Zip Code 30328-3474
Purpose of Disbursement Postage		001
Candidate Name		Transaction ID : VTD699NQG4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Amount of Each Disbursement this Period 15.95
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		* <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address PO Box 1270		FEC Identification Number C [REDACTED]
City Newark	State NJ	Zip Code 07101-1270
Purpose of Disbursement Credit Card - See Below if Itemized		001
Candidate Name		Transaction ID : VTD699PXV)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Amount of Each Disbursement this Period 10246.75
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:		

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

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

10246.75
[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)  
**A. Alta Restaurant**

Mailing Address 64 W 10Th St

City New York State NY Zip Code 10011-8702

Purpose of Disbursement Reception - Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 10 / 2017

FEC Identification Number: C

Transaction ID : VTD699PXW/

Amount of Each Disbursement this Period: 3608.50

Memo Item

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

Mailing Address 2500 Victory Ave

City Dallas State TX Zip Code 75219-7601

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 10 / 2017

FEC Identification Number: C

Transaction ID : VTD699PXW/

Amount of Each Disbursement this Period: 275.58

Memo Item

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

Mailing Address 2500 Victory Ave

City Dallas State TX Zip Code 75219-7601

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 10 / 2017

FEC Identification Number: C

Transaction ID : VTD699PXX4

Amount of Each Disbursement this Period: 225.00

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699PXW5</b> Amount of Each Disbursement this Period 154.00
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699PXW5</b> Amount of Each Disbursement this Period 410.00
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699PXW5</b> Amount of Each Disbursement this Period 192.00
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699PXWf</b> Amount of Each Disbursement this Period [REDACTED] 9.25
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Travel	Category/ Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699PXWf</b> Amount of Each Disbursement this Period [REDACTED] 381.60
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Travel	Category/ Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699PXWf</b> Amount of Each Disbursement this Period [REDACTED] 28.00
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Travel	Category/ Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Bistro Bis**

Mailing Address 15 E St NW

City  
Washington

State  
DC

Zip Code  
20001-1501

Purpose of Disbursement  
Meals

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD699PXVY**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bistro Bis**

Mailing Address 15 E St NW

City  
Washington

State  
DC

Zip Code  
20001-1501

Purpose of Disbursement  
Meals

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD699PXW4**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Casa Lever**

Mailing Address 390 Park Ave

City  
New York

State  
NY

Zip Code  
10022-4608

Purpose of Disbursement  
Meals

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD699PXW**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Casa Lever**

Full Name (Last, First, Middle Initial)

Mailing Address 390 Park Ave

City New York State NY Zip Code 10022-4608

Purpose of Disbursement Meals

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 10 / 2017

FEC Identification Number: C

Transaction ID : VTD699PXW

Amount of Each Disbursement this Period: 276.42

Memo Item

**B. Driftwood Kitchen**

Full Name (Last, First, Middle Initial)

Mailing Address 400 H St NE

City Washington State DC Zip Code 20002-4336

Purpose of Disbursement Reception - Catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 10 / 2017

FEC Identification Number: C

Transaction ID : VTD699PXXD

Amount of Each Disbursement this Period: 2700.00

Memo Item

**C. Minuteman Press**

Full Name (Last, First, Middle Initial)

Mailing Address 555 New Jersey Ave NW

City Washington State DC Zip Code 20001-2280

Purpose of Disbursement Printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 10 / 2017

FEC Identification Number: C

Transaction ID : VTD699PXW

Amount of Each Disbursement this Period: 19.51

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. The Beacon Hotel**

Mailing Address 1615 Rhode Island Ave NW

City  
Washington

State  
DC

Zip Code  
20036-3205

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD699PXW**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Zeze Flowers**

Mailing Address 938 1St Ave

City  
New York

State  
NY

Zip Code  
10022-6470

Purpose of Disbursement  
Flowers

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD699PXW**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 1270

City  
Newark

State  
NJ

Zip Code  
07101-1270

Purpose of Disbursement  
Credit Card - See Below if Itemized

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD699QEC**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)  
**A. The Capital Grille**

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

Purpose of Disbursement Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 26 / 2017

FEC Identification Number: C

Transaction ID : VTD699QED4

Amount of Each Disbursement this Period: 13.20

Memo Item

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

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement Credit Card - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 08 / 2017

FEC Identification Number: C

Transaction ID : VTD699SW8Y

Amount of Each Disbursement this Period: 3671.56

Memo Item

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

Mailing Address 60 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4285

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 08 / 2017

FEC Identification Number: C

Transaction ID : VTD699SWD

Amount of Each Disbursement this Period: 169.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3671.56

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2017
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699SWDI</b> Amount of Each Disbursement this Period [REDACTED] - 169.00
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Travel Credit	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2017
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699SWDI</b> Amount of Each Disbursement this Period [REDACTED] 352.00
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2017
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699SWDI</b> Amount of Each Disbursement this Period [REDACTED] 560.00
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 60 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4285

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 08 / 2017

FEC Identification Number: C

Transaction ID : VTD699SWD

Amount of Each Disbursement this Period: 15.50

Memo Item

**B. Bistro Bis**

Full Name (Last, First, Middle Initial)

Mailing Address 15 E St NW

City Washington State DC Zip Code 20001-1501

Purpose of Disbursement Meals

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 08 / 2017

FEC Identification Number: C

Transaction ID : VTD699SWD

Amount of Each Disbursement this Period: 119.17

Memo Item

**C. Carroll Travel**

Full Name (Last, First, Middle Initial)

Mailing Address 201 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4957

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 08 / 2017

FEC Identification Number: C

Transaction ID : VTD699SWD

Amount of Each Disbursement this Period: 40.00

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Carroll Travel**

Mailing Address 201 Massachusetts Ave NE

City  
Washington

State  
DC

Zip Code  
20002-4957

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD699SWD:**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hilton Hotel**

Mailing Address 40 Lodge Street

City  
Albany

State  
NY

Zip Code  
12207-2119

Purpose of Disbursement  
Reception - Catering

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD699SWEF**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Minuteman Press**

Mailing Address 555 New Jersey Ave NW

City  
Washington

State  
DC

Zip Code  
20001-2280

Purpose of Disbursement  
Printing

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD699SWE**  
Amount of Each Disbursement this Period

Memo Item

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2017	
Mailing Address 1101 15Th St NW Ste 500		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699SWE.</b> Amount of Each Disbursement this Period 10.00	
City Washington	State DC	Zip Code 20005-5006	Category/ Type 001
Purpose of Disbursement Software		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Staples, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2017	
Mailing Address 500 Staples Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699SWFC</b> Amount of Each Disbursement this Period 7.73	
City Framingham	State MA	Zip Code 01702-4474	Category/ Type 001
Purpose of Disbursement Office Supplies		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Staples, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2017	
Mailing Address 500 Staples Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699SWFI</b> Amount of Each Disbursement this Period 14.04	
City Framingham	State MA	Zip Code 01702-4474	Category/ Type 001
Purpose of Disbursement Office Supplies		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)  
**A. Staples, Inc.**

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 08 / 2017

FEC Identification Number: C

Transaction ID : VTD699SWFF

Amount of Each Disbursement this Period: 8.46

Memo Item

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

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 08 / 2017

FEC Identification Number: C

Transaction ID : VTD699SWFF

Amount of Each Disbursement this Period: 17.58

Memo Item

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

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement Credit Card - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2017

FEC Identification Number: C

Transaction ID : VTD699VHTM

Amount of Each Disbursement this Period: 80.02

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 80.02

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address PO Box 1270		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699VHTN</b> Amount of Each Disbursement this Period 4.50
City Newark	State NJ Zip Code 07101-1270	
Purpose of Disbursement Credit Card Fee		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input checked="" type="checkbox"/>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address PO Box 1270		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699VHTP</b> Amount of Each Disbursement this Period 4.50
City Newark	State NJ Zip Code 07101-1270	
Purpose of Disbursement Credit Card Fee		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input checked="" type="checkbox"/>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address PO Box 1270		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699VHTC</b> Amount of Each Disbursement this Period 4.50
City Newark	State NJ Zip Code 07101-1270	
Purpose of Disbursement Credit Card Fee		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input checked="" type="checkbox"/>
State: District:		

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>			Date of Disbursement MM / DD / YYYY 02 / 27 / 2017	
Mailing Address PO Box 1270			FEC Identification Number C [REDACTED]	
City Newark	State NJ	Zip Code 07101-1270	Transaction ID : VTD699VHTR	
Purpose of Disbursement Credit Card Fee		Category/Type 001	Amount of Each Disbursement this Period 4.50	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. American Express</b>			Date of Disbursement MM / DD / YYYY 03 / 03 / 2017	
Mailing Address PO Box 1270			FEC Identification Number C [REDACTED]	
City Newark	State NJ	Zip Code 07101-1270	Transaction ID : VTD699VNAA	
Purpose of Disbursement Credit Card - See Below if Itemized		Category/Type 001	Amount of Each Disbursement this Period 1347.60	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Carroll Travel</b>			Date of Disbursement MM / DD / YYYY 03 / 03 / 2017	
Mailing Address 201 Massachusetts Ave NE			FEC Identification Number C [REDACTED]	
City Washington	State DC	Zip Code 20002-4957	Transaction ID : VTD699VNAI	
Purpose of Disbursement Travel		Category/Type 002	Amount of Each Disbursement this Period 40.00	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1347.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)  
**A. Carroll Travel**

Mailing Address 201 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4957

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 03 / 2017

FEC Identification Number: C

Transaction ID : VTD699VNAJ

Amount of Each Disbursement this Period: 518.40

Memo Item

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

Mailing Address 201 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4957

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 03 / 2017

FEC Identification Number: C

Transaction ID : VTD699VNAK

Amount of Each Disbursement this Period: 80.00

Memo Item

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

Mailing Address 1101 15Th St NW Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 03 / 2017

FEC Identification Number: C

Transaction ID : VTD699VNAI

Amount of Each Disbursement this Period: 100.00

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)  
**A. Staples, Inc.**

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2017

FEC Identification Number: C

Transaction ID : VTD699VNAV

Amount of Each Disbursement this Period: 0.30

Memo Item

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

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2017

FEC Identification Number: C

Transaction ID : VTD699VNAX

Amount of Each Disbursement this Period: 0.28

Memo Item

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

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2017

FEC Identification Number: C

Transaction ID : VTD699VNA

Amount of Each Disbursement this Period: 1.15

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)  
**A. The Capital Grille**

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

Purpose of Disbursement Meals

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2017

FEC Identification Number: C

Transaction ID : VTD699VNAc

Amount of Each Disbursement this Period: 252.10

Memo Item

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

Mailing Address 938 1St Ave

City New York State NY Zip Code 10022-6470

Purpose of Disbursement Flowers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2017

FEC Identification Number: C

Transaction ID : VTD699VNB5

Amount of Each Disbursement this Period: 163.31

Memo Item

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

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement Credit Card - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 27 / 2017

FEC Identification Number: C

Transaction ID : VTD699XEB5

Amount of Each Disbursement this Period: 115.84

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 115.84

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Bistro Bis**

Mailing Address 15 E St NW

City  
Washington

State  
DC

Zip Code  
20001-1501

Purpose of Disbursement  
Meals

**001**

Category/  
Type

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	3		2	7		2	0	1	7

FEC Identification Number

**C**

**Transaction ID : VTD699XEDV**  
Amount of Each Disbursement this Period

12.39

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

City  
Newark

State  
NJ

Zip Code  
07101-1270

Purpose of Disbursement  
Credit Card - See Below if Itemized

**001**

Category/  
Type

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	4		0	7		2	0	1	7

FEC Identification Number

**C**

**Transaction ID : VTD699XMYF**  
Amount of Each Disbursement this Period

84.59

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 1270

City  
Newark

State  
NJ

Zip Code  
07101-1270

Purpose of Disbursement  
Credit Card Fee

**001**

Category/  
Type

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	4		0	7		2	0	1	7

FEC Identification Number

**C**

**Transaction ID : VTD699XMYI**  
Amount of Each Disbursement this Period

4.50

Memo Item

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

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

84.59



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Staples, Inc.**

Mailing Address 500 Staples Dr

City  
Framingham

State  
MA

Zip Code  
01702-4474

Purpose of Disbursement  
Office Supplies

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD699XMYX**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Staples, Inc.**

Mailing Address 500 Staples Dr

City  
Framingham

State  
MA

Zip Code  
01702-4474

Purpose of Disbursement  
Office Supplies

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD699XMYX**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 1270

City  
Newark

State  
NJ

Zip Code  
07101-1270

Purpose of Disbursement  
Credit Card - See Below if Itemized

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD699XMZ**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Hilton Hotel</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2017
Mailing Address 40 Lodge Street		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699XN6P</b> Amount of Each Disbursement this Period 4984.28
City Albany	State NY	Zip Code 12207-2119
Purpose of Disbursement Reception - Catering		Category/Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. REM Printing</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2017
Mailing Address 55 Railroad Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699XN6V</b> Amount of Each Disbursement this Period 264.60
City Albany	State NY	Zip Code 12205-5947
Purpose of Disbursement Printing		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. REM Printing</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2017
Mailing Address 55 Railroad Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699XN6V</b> Amount of Each Disbursement this Period 424.44
City Albany	State NY	Zip Code 12205-5947
Purpose of Disbursement Printing		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Renaissance Hotel**

Full Name (Last, First, Middle Initial)

Mailing Address 144 State St

City Albany State NY Zip Code 12207-1605

Purpose of Disbursement Reception - Catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 07 / 2017

FEC Identification Number: C

Transaction ID : VTD699XN6Z

Amount of Each Disbursement this Period: 11627.82

Memo Item

**B. Renaissance Hotel**

Full Name (Last, First, Middle Initial)

Mailing Address 144 State St

City Albany State NY Zip Code 12207-1605

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 07 / 2017

FEC Identification Number: C

Transaction ID : VTD699XN70

Amount of Each Disbursement this Period: 18.12

Memo Item

**C. Renaissance Hotel**

Full Name (Last, First, Middle Initial)

Mailing Address 144 State St

City Albany State NY Zip Code 12207-1605

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 07 / 2017

FEC Identification Number: C

Transaction ID : VTD699XN71

Amount of Each Disbursement this Period: 96.54

Memo Item

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

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)  
**A. Staples, Inc.**

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 07 / 2017

FEC Identification Number: C

Transaction ID : VTD699XN72

Amount of Each Disbursement this Period: 2.97

Memo Item

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

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement Credit Card - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2017

FEC Identification Number: C

Transaction ID : VTD699ZJQ8:

Amount of Each Disbursement this Period: 327.50

Memo Item

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

Mailing Address 201 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4957

Purpose of Disbursement Travel Credit

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2017

FEC Identification Number: C

Transaction ID : VTD699ZJQ9

Amount of Each Disbursement this Period: - 442.20

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 327.50

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 05 / 2017
Mailing Address 1101 15Th St NW Ste 500		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699ZJQC</b> Amount of Each Disbursement this Period [REDACTED] - 110.00
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Software Credit	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Staples, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 05 / 2017
Mailing Address 500 Staples Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699ZJQG</b> Amount of Each Disbursement this Period [REDACTED] 19.81
City Framingham	State MA	Zip Code 01702-4474
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Staples, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 05 / 2017
Mailing Address 500 Staples Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD699ZJQT</b> Amount of Each Disbursement this Period [REDACTED] 3.83
City Framingham	State MA	Zip Code 01702-4474
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Zeze Flowers</b>			Date of Disbursement MM / DD / YYYY 05 / 05 / 2017	
Mailing Address 938 1St Ave			FEC Identification Number C [REDACTED]	
City New York	State NY	Zip Code 10022-6470	Transaction ID : <b>VTD699ZJQK</b>	
Purpose of Disbursement Flowers		Category/Type 001	Amount of Each Disbursement this Period [REDACTED] 190.53	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Zeze Flowers</b>			Date of Disbursement MM / DD / YYYY 05 / 05 / 2017	
Mailing Address 938 1St Ave			FEC Identification Number C [REDACTED]	
City New York	State NY	Zip Code 10022-6470	Transaction ID : <b>VTD699ZJQM</b>	
Purpose of Disbursement Flowers		Category/Type 001	Amount of Each Disbursement this Period [REDACTED] 571.59	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. American Express</b>			Date of Disbursement MM / DD / YYYY 05 / 23 / 2017	
Mailing Address PO Box 1270			FEC Identification Number C [REDACTED]	
City Newark	State NJ	Zip Code 07101-1270	Transaction ID : <b>VTD69A0AA:</b>	
Purpose of Disbursement Credit Card - See Below if Itemized		Category/Type 001	Amount of Each Disbursement this Period [REDACTED] 175.63	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 175.63
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 05 / 23 / 2017
Mailing Address 2500 Victory Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0AAI</b> Amount of Each Disbursement this Period [REDACTED] 27.64
City Dallas	State TX	Zip Code 75219-7601
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Carroll Travel</b>		Date of Disbursement MM / DD / YYYY 05 / 23 / 2017
Mailing Address 201 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0AAR</b> Amount of Each Disbursement this Period [REDACTED] 1.51
City Washington	State DC	Zip Code 20002-4957
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Carroll Travel</b>		Date of Disbursement MM / DD / YYYY 05 / 23 / 2017
Mailing Address 201 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0AAI</b> Amount of Each Disbursement this Period [REDACTED] 4.00
City Washington	State DC	Zip Code 20002-4957
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Carroll Travel**

Mailing Address 201 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4957

Purpose of Disbursement  
Travel

**002**  
Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : VTD69A0AAV**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Staples, Inc.**

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement  
Office Supplies

**001**  
Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : VTD69A0AB9**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Staples, Inc.**

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement  
Office Supplies

**001**  
Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : VTD69A0AB1**  
Amount of Each Disbursement this Period

Memo Item

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Staples, Inc.**

Mailing Address 500 Staples Dr

City Framingham

State MA

Zip Code 01702-4474

Purpose of Disbursement  
Office Supplies

001

Category/  
Type

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	5		2	3		2	0	1	7

FEC Identification Number

C [REDACTED]  
**Transaction ID : VTD69A0AB1**  
Amount of Each Disbursement this Period  
[REDACTED] 7.46

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

City Newark

State NJ

Zip Code 07101-1270

Purpose of Disbursement  
Credit Card - See Below if Itemized

001

Category/  
Type

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	6		0	8		2	0	1	7

FEC Identification Number

C [REDACTED]  
**Transaction ID : VTD69A0D6H**  
Amount of Each Disbursement this Period  
[REDACTED] 731.55

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 1270

City Newark

State NJ

Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Fee

001

Category/  
Type

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	6		0	8		2	0	1	7

FEC Identification Number

C [REDACTED]  
**Transaction ID : VTD69A0D6I**  
Amount of Each Disbursement this Period  
[REDACTED] 95.00

Memo Item

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

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

[REDACTED]	731.55
------------	--------

[REDACTED]	
------------	--

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 600 Jefferson St

City Houston State TX Zip Code 77002-7324

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 08 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0D83

Amount of Each Disbursement this Period: 349.40

Memo Item

**B. American Express**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement Credit Card - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 22 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SHA

Amount of Each Disbursement this Period: 349.42

Memo Item

**C. American Express**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement Credit Card Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 22 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SHI

Amount of Each Disbursement this Period: 4.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 349.42

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Staples, Inc.**

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement  
Office Supplies

Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD69A0SHF**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Staples, Inc.**

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement  
Office Supplies

Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD69A0SHG**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Staples, Inc.**

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement  
Office Supplies

Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD69A0SHI**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Staples, Inc.**

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement  
Office Supplies

001  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
06 / 22 / 2017

FEC Identification Number  
C  
Transaction ID : VTD69A0SHJ  
Amount of Each Disbursement this Period  
9.37

Memo Item

Full Name (Last, First, Middle Initial)

**B. Staples, Inc.**

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4474

Purpose of Disbursement  
Office Supplies

001  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
06 / 22 / 2017

FEC Identification Number  
C  
Transaction ID : VTD69A0SHK  
Amount of Each Disbursement this Period  
25.30

Memo Item

Full Name (Last, First, Middle Initial)

**C. Anne Lewis Strategies**

Mailing Address 5304 Saratoga Ave

City Chevy Chase State MD Zip Code 20815-3723

Purpose of Disbursement  
Website Consulting

001  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
01 / 03 / 2017

FEC Identification Number  
C  
Transaction ID : VTD69A0SR1  
Amount of Each Disbursement this Period  
1500.00

Memo Item

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

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

1500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Anne Lewis Strategies**

Full Name (Last, First, Middle Initial)

Mailing Address 5304 Saratoga Ave

City Chevy Chase State MD Zip Code 20815-3723

Purpose of Disbursement Website Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 12 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SRF

Amount of Each Disbursement this Period: 25000.00

Memo Item

**B. Berman, Emily, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 107 University Pl Apt 1B

City New York State NY Zip Code 10003-4537

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 13 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SNF

Amount of Each Disbursement this Period: 3143.92

Memo Item

**C. Berman, Emily, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 107 University Pl Apt 1B

City New York State NY Zip Code 10003-4537

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SNF

Amount of Each Disbursement this Period: 474.11

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 28618.03

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Berman, Emily, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 107 University Pl  
Apt 1B

City New York State NY Zip Code 10003-4537

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 16 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SNH

Amount of Each Disbursement this Period: 474.09

Memo Item

**B. Berman, Emily, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 107 University Pl  
Apt 1B

City New York State NY Zip Code 10003-4537

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SNJ

Amount of Each Disbursement this Period: 474.10

Memo Item

**C. Berman, Emily, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 107 University Pl  
Apt 1B

City New York State NY Zip Code 10003-4537

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 16 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SNI

Amount of Each Disbursement this Period: 474.10

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1422.29

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Berman, Emily, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017	
Mailing Address 107 University Pl Apt 1B		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SNH</b> Amount of Each Disbursement this Period [REDACTED] 474.10	
City New York	State NY	Zip Code 10003-4537	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Berman, Emily, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2017	
Mailing Address 107 University Pl Apt 1B		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0AE4</b> Amount of Each Disbursement this Period [REDACTED] 521.24	
City New York	State NY	Zip Code 10003-4537	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Berman, Emily, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017	
Mailing Address 107 University Pl Apt 1B		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SNI</b> Amount of Each Disbursement this Period [REDACTED] 521.24	
City New York	State NY	Zip Code 10003-4537	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1516.58
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Berman, Emily, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2017
Mailing Address 107 University Pl Apt 1B		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SX3</b> Amount of Each Disbursement this Period 521.23
City New York	State NY	Zip Code 10003-4537
Purpose of Disbursement Salary		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Berman, Emily, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017
Mailing Address 107 University Pl Apt 1B		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SX4</b> Amount of Each Disbursement this Period 521.24
City New York	State NY	Zip Code 10003-4537
Purpose of Disbursement Salary		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Berman, Emily, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2017
Mailing Address 107 University Pl Apt 1B		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SX5</b> Amount of Each Disbursement this Period 521.24
City New York	State NY	Zip Code 10003-4537
Purpose of Disbursement Salary		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

1563.71

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

[REDACTED]



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

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

FOR LINE NUMBER: (check only one)

21b  22  23  26  27  
 28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)  
**A. Berman, Emily, , ,**

Date of Disbursement:  /  /

Mailing Address: 107 University Pl Apt 1B  
City: New York State: NY Zip Code: 10003-4537

Purpose of Disbursement: Salary  
Candidate Name:   
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

FEC Identification Number:   
Transaction ID: **VTD69A0SX6**  
Amount of Each Disbursement this Period:   
 Memo Item

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

Date of Disbursement:  /  /

Mailing Address: 1215 1St St NE Apt 12F  
City: Washington State: DC Zip Code: 20002-7949

Purpose of Disbursement: Salary  
Candidate Name:   
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

FEC Identification Number:   
Transaction ID: **VTD69A0SNP**  
Amount of Each Disbursement this Period:   
 Memo Item

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

Date of Disbursement:  /  /

Mailing Address: 1215 1St St NE Apt 12F  
City: Washington State: DC Zip Code: 20002-7949

Purpose of Disbursement: Salary  
Candidate Name:   
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

FEC Identification Number:   
Transaction ID: **VTD69A0SNP**  
Amount of Each Disbursement this Period:   
 Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Bordador, Erica, , ,</b>			Date of Disbursement MM / DD / YYYY 02 / 16 / 2017	
Mailing Address 1215 1St St NE Apt 12F			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SNF</b>	
City Washington	State DC	Zip Code 20002-7949	Amount of Each Disbursement this Period [REDACTED] 140.17	
Purpose of Disbursement Salary		Category/ Type 001	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Bordador, Erica, , ,</b>			Date of Disbursement MM / DD / YYYY 02 / 16 / 2017	
Mailing Address 1215 1St St NE Apt 12F			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SNS</b>	
City Washington	State DC	Zip Code 20002-7949	Amount of Each Disbursement this Period [REDACTED] 10.00	
Purpose of Disbursement Meals Expense Reimbursement, See Below if Itemized		Category/ Type 001	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Bordador, Erica, , ,</b>			Date of Disbursement MM / DD / YYYY 02 / 28 / 2017	
Mailing Address 1215 1St St NE Apt 12F			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SNI</b>	
City Washington	State DC	Zip Code 20002-7949	Amount of Each Disbursement this Period [REDACTED] 140.17	
Purpose of Disbursement Salary		Category/ Type 001	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

[REDACTED] 290.34
[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Bordador, Erica, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2017
Mailing Address 1215 1St St NE Apt 12F		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SNY</b> Amount of Each Disbursement this Period [REDACTED] 140.17
City Washington	State DC	Zip Code 20002-7949
Purpose of Disbursement Salary		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Bordador, Erica, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 1215 1St St NE Apt 12F		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SP1:</b> Amount of Each Disbursement this Period [REDACTED] 172.81
City Washington	State DC	Zip Code 20002-7949
Purpose of Disbursement Salary		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Bordador, Erica, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2017
Mailing Address 1215 1St St NE Apt 12F		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0AE!</b> Amount of Each Disbursement this Period [REDACTED] 428.62
City Washington	State DC	Zip Code 20002-7949
Purpose of Disbursement Salary		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

741.60

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Bordador, Erica, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1215 1St St NE  
Apt 12F

City Washington State DC Zip Code 20002-7949

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 28 / 2017

FEC Identification Number: C [REDACTED]  
**Transaction ID : VTD69A0SP3**  
Amount of Each Disbursement this Period: 303.39

Memo Item

**B. Bordador, Erica, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1215 1St St NE  
Apt 12F

City Washington State DC Zip Code 20002-7949

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 16 / 2017

FEC Identification Number: C [REDACTED]  
**Transaction ID : VTD69A0SX7**  
Amount of Each Disbursement this Period: 303.39

Memo Item

**C. Bordador, Erica, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1215 1St St NE  
Apt 12F

City Washington State DC Zip Code 20002-7949

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 31 / 2017

FEC Identification Number: C [REDACTED]  
**Transaction ID : VTD69A0SX8**  
Amount of Each Disbursement this Period: 303.40

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 910.18

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Bordador, Erica, , ,</b>			Date of Disbursement MM / DD / YYYY 06 / 16 / 2017	
Mailing Address 1215 1St St NE Apt 12F			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SX9</b> Amount of Each Disbursement this Period [REDACTED] 303.39	
City Washington	State DC	Zip Code 20002-7949	Category/Type 001	
Purpose of Disbursement Salary		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. Bordador, Erica, , ,</b>			Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address 1215 1St St NE Apt 12F			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SXA</b> Amount of Each Disbursement this Period [REDACTED] 303.39	
City Washington	State DC	Zip Code 20002-7949	Category/Type 001	
Purpose of Disbursement Salary		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. Caplin, Glen, , ,</b>			Date of Disbursement MM / DD / YYYY 03 / 16 / 2017	
Mailing Address 127 Willoughby Ave Apt 1			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQ</b> Amount of Each Disbursement this Period [REDACTED] 3074.75	
City Brooklyn	State NY	Zip Code 11205-3726	Category/Type 001	
Purpose of Disbursement Salary		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3681.53
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Caplin, Glen, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2017
Mailing Address 127 Willoughby Ave Apt 1		FEC Identification Number C <b>Transaction ID : VTD69A0SQ6</b> Amount of Each Disbursement this Period 566.00
City Brooklyn	State NY	
Zip Code 11205-3726		Memo Item <input type="checkbox"/>
Purpose of Disbursement Travel Expense Reimbursement, See Below if Itemized		
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2017
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C <b>Transaction ID : VTD69A0SQ7</b> Amount of Each Disbursement this Period 566.00
City Washington	State DC	
Zip Code 20002-4285		Memo Item <input checked="" type="checkbox"/>
Purpose of Disbursement Travel		
Candidate Name		Category/Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Caplin, Glen, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 127 Willoughby Ave Apt 1		FEC Identification Number C <b>Transaction ID : VTD69A0SQ8</b> Amount of Each Disbursement this Period 3074.75
City Brooklyn	State NY	
Zip Code 11205-3726		Memo Item <input type="checkbox"/>
Purpose of Disbursement Salary		
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

3640.75

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Caplin, Glen, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2017
Mailing Address 127 Willoughby Ave Apt 1		FEC Identification Number C <b>Transaction ID : VTD69A0AE7</b> Amount of Each Disbursement this Period 3074.75
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11205-3726	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Caplin, Glen, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017
Mailing Address 127 Willoughby Ave Apt 1		FEC Identification Number C <b>Transaction ID : VTD69A0SQ9</b> Amount of Each Disbursement this Period 3074.75
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11205-3726	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Caplin, Glen, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2017
Mailing Address 127 Willoughby Ave Apt 1		FEC Identification Number C <b>Transaction ID : VTD69A0SXI</b> Amount of Each Disbursement this Period 3074.75
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11205-3726	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

9224.25

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Caplin, Glen, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 127 Willoughby Ave  
Apt 1

City Brooklyn State NY Zip Code 11205-3726

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 31 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SXC

Amount of Each Disbursement this Period: 3074.75

Memo Item

**B. Caplin, Glen, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 127 Willoughby Ave  
Apt 1

City Brooklyn State NY Zip Code 11205-3726

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 16 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SXD

Amount of Each Disbursement this Period: 3074.75

Memo Item

**C. Caplin, Glen, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 127 Willoughby Ave  
Apt 1

City Brooklyn State NY Zip Code 11205-3726

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SXI

Amount of Each Disbursement this Period: 3074.75

Memo Item

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

9224.25

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Comcast**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30005

City Southeastern State PA Zip Code 19398

Purpose of Disbursement Telecommunication Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SSC

Amount of Each Disbursement this Period: 328.38

Memo Item

**B. Comcast**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30005

City Southeastern State PA Zip Code 19398

Purpose of Disbursement Telecommunication Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 27 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SSD

Amount of Each Disbursement this Period: 40.68

Memo Item

**C. Comcast**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30005

City Southeastern State PA Zip Code 19398

Purpose of Disbursement Telecommunication Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 23 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SSI

Amount of Each Disbursement this Period: 40.68

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 409.74

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Comcast**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30005

City Southeastern State PA Zip Code 19398

Purpose of Disbursement Telecommunication Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 23 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SSF

Amount of Each Disbursement this Period: 59.99

Memo Item

**B. Comcast**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30005

City Southeastern State PA Zip Code 19398

Purpose of Disbursement Telecommunication Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 25 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SSG

Amount of Each Disbursement this Period: 60.01

Memo Item

**C. Comcast**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30005

City Southeastern State PA Zip Code 19398

Purpose of Disbursement Telecommunication Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 01 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SSI

Amount of Each Disbursement this Period: 40.41

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 160.41

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Conahan, Stefanie, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2017	
Mailing Address 69 Gale Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SR3</b> Amount of Each Disbursement this Period [REDACTED] 3712.21	
City Swampscott	State MA	Zip Code 01907-2809	Category/Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Conahan, Stefanie, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2017	
Mailing Address 69 Gale Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SR5</b> Amount of Each Disbursement this Period [REDACTED] 504.46	
City Swampscott	State MA	Zip Code 01907-2809	Category/Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Conahan, Stefanie, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 16 / 2017	
Mailing Address 69 Gale Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SR4</b> Amount of Each Disbursement this Period [REDACTED] 504.44	
City Swampscott	State MA	Zip Code 01907-2809	Category/Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 4721.11
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Conahan, Stefanie, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017	
Mailing Address 69 Gale Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SR7</b> Amount of Each Disbursement this Period [REDACTED] 504.45	
City Swampscott	State MA	Zip Code 01907-2809	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Conahan, Stefanie, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2017	
Mailing Address 69 Gale Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SR8</b> Amount of Each Disbursement this Period [REDACTED] 504.45	
City Swampscott	State MA	Zip Code 01907-2809	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Conahan, Stefanie, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017	
Mailing Address 69 Gale Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SR9</b> Amount of Each Disbursement this Period [REDACTED] 504.45	
City Swampscott	State MA	Zip Code 01907-2809	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1513.35
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Conahan, Stefanie, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2017	
Mailing Address 69 Gale Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0AE8</b> Amount of Each Disbursement this Period [REDACTED] 559.23	
City Swampscott	State MA	Zip Code 01907-2809	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Conahan, Stefanie, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017	
Mailing Address 69 Gale Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SRA</b> Amount of Each Disbursement this Period [REDACTED] 559.23	
City Swampscott	State MA	Zip Code 01907-2809	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Conahan, Stefanie, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2017	
Mailing Address 69 Gale Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SXC</b> Amount of Each Disbursement this Period [REDACTED] 559.22	
City Swampscott	State MA	Zip Code 01907-2809	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

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

1677.68

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Conahan, Stefanie, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017	
Mailing Address 69 Gale Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SXF</b> Amount of Each Disbursement this Period 559.23	
City Swampscott	State MA	Zip Code 01907-2809	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Conahan, Stefanie, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2017	
Mailing Address 69 Gale Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SXS</b> Amount of Each Disbursement this Period 559.23	
City Swampscott	State MA	Zip Code 01907-2809	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Conahan, Stefanie, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address 69 Gale Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SX1</b> Amount of Each Disbursement this Period 559.23	
City Swampscott	State MA	Zip Code 01907-2809	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1677.69
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Crews, Aiyana, K, ,</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2017	
Mailing Address 1 Greenwood Ln		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0AE</b> Amount of Each Disbursement this Period 54.65	
City White Plains	State NY	Zip Code 10607-1020	Category/Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Crews, Aiyana, K, ,</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017	
Mailing Address 1 Greenwood Ln		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SM</b> Amount of Each Disbursement this Period 133.11	
City White Plains	State NY	Zip Code 10607-1020	Category/Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Crews, Aiyana, K, ,</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2017	
Mailing Address 1 Greenwood Ln		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SW</b> Amount of Each Disbursement this Period 133.10	
City White Plains	State NY	Zip Code 10607-1020	Category/Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	320.86
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Crews, Aiyana, K, ,</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017	
Mailing Address 1 Greenwood Ln		FEC Identification Number C [REDACTED]	
City White Plains	State NY	Zip Code 10607-1020	Transaction ID : <b>VTD69A0SW</b>
Purpose of Disbursement Salary		Category/ Type 001	Amount of Each Disbursement this Period 133.11
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Crews, Aiyana, K, ,</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2017	
Mailing Address 1 Greenwood Ln		FEC Identification Number C [REDACTED]	
City White Plains	State NY	Zip Code 10607-1020	Transaction ID : <b>VTD69A0SW</b>
Purpose of Disbursement Salary		Category/ Type 001	Amount of Each Disbursement this Period 133.10
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Crews, Aiyana, K, ,</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address 1 Greenwood Ln		FEC Identification Number C [REDACTED]	
City White Plains	State NY	Zip Code 10607-1020	Transaction ID : <b>VTD69A0SW</b>
Purpose of Disbursement Salary		Category/ Type 001	Amount of Each Disbursement this Period 133.11
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

399.32

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. DC Health Link**

Mailing Address PO Box 97022

City  
Washington

State  
DC

Zip Code  
20090-7022

Purpose of Disbursement  
Healthcare

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	7

FEC Identification Number

**Transaction ID : VTD69A0SSJ**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. DC Health Link**

Mailing Address PO Box 97022

City  
Washington

State  
DC

Zip Code  
20090-7022

Purpose of Disbursement  
Healthcare

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	7

FEC Identification Number

**Transaction ID : VTD69A0SSK**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. DC Health Link**

Mailing Address PO Box 97022

City  
Washington

State  
DC

Zip Code  
20090-7022

Purpose of Disbursement  
Healthcare

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	7

FEC Identification Number

**Transaction ID : VTD69A0SSI**  
Amount of Each Disbursement this Period

Memo Item

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

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

<input type="text" value="863.36"/>
<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. DC Health Link</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017
Mailing Address PO Box 97022		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SSN</b> Amount of Each Disbursement this Period [REDACTED] 120.22
City Washington	State DC	Zip Code 20090-7022
Purpose of Disbursement Healthcare	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Edwards, Brittany, A, ,</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017
Mailing Address 1003 Florida Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SX0</b> Amount of Each Disbursement this Period [REDACTED] 150.21
City Washington	State DC	Zip Code 20002-3705
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Edwards, Brittany, A, ,</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2017
Mailing Address 1003 Florida Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SX1</b> Amount of Each Disbursement this Period [REDACTED] 150.21
City Washington	State DC	Zip Code 20002-3705
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

420.64

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Edwards, Brittany, A, ,</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address 1003 Florida Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SX2</b> Amount of Each Disbursement this Period [REDACTED] 150.21	
City Washington	State DC	Zip Code 20002-3705	Category/ Type 001
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fassler, Jess, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2017	
Mailing Address 4313 Van Buren St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQA</b> Amount of Each Disbursement this Period [REDACTED] 899.74	
City University Park	State MD	Zip Code 20782-1190	Category/ Type 001
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fassler, Jess, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2017	
Mailing Address 4313 Van Buren St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQI</b> Amount of Each Disbursement this Period [REDACTED] 106.84	
City University Park	State MD	Zip Code 20782-1190	Category/ Type 001
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1156.79
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Fassler, Jess, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 16 / 2017	
Mailing Address 4313 Van Buren St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQC</b> Amount of Each Disbursement this Period [REDACTED] 106.84	
City University Park	State MD	Zip Code 20782-1190	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Fassler, Jess, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017	
Mailing Address 4313 Van Buren St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQD</b> Amount of Each Disbursement this Period [REDACTED] 106.84	
City University Park	State MD	Zip Code 20782-1190	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Fassler, Jess, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2017	
Mailing Address 4313 Van Buren St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQI</b> Amount of Each Disbursement this Period [REDACTED] 106.84	
City University Park	State MD	Zip Code 20782-1190	Category/ Type 001
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 320.52
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Fassler, Jess, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 4313 Van Buren St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQF</b> Amount of Each Disbursement this Period [REDACTED] 106.84
City University Park	State MD	Zip Code 20782-1190
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fassler, Jess, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2017
Mailing Address 4313 Van Buren St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0AEC</b> Amount of Each Disbursement this Period [REDACTED] 106.84
City University Park	State MD	Zip Code 20782-1190
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fassler, Jess, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017
Mailing Address 4313 Van Buren St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQI</b> Amount of Each Disbursement this Period [REDACTED] 106.84
City University Park	State MD	Zip Code 20782-1190
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

320.52

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Fassler, Jess, , ,</b>			Date of Disbursement MM / DD / YYYY 05 / 16 / 2017	
Mailing Address 4313 Van Buren St				
City University Park	State MD	Zip Code 20782-1190	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Salary			Transaction ID : VTD69A0SXF	
Candidate Name			Amount of Each Disbursement this Period 106.83	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Fassler, Jess, , ,</b>			Date of Disbursement MM / DD / YYYY 05 / 31 / 2017	
Mailing Address 4313 Van Buren St				
City University Park	State MD	Zip Code 20782-1190	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Salary			Transaction ID : VTD69A0SXF	
Candidate Name			Amount of Each Disbursement this Period 106.85	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Fassler, Jess, , ,</b>			Date of Disbursement MM / DD / YYYY 06 / 16 / 2017	
Mailing Address 4313 Van Buren St				
City University Park	State MD	Zip Code 20782-1190	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Salary			Transaction ID : VTD69A0SXF	
Candidate Name			Amount of Each Disbursement this Period 106.84	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				

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

320.52

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Fassler, Jess, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address 4313 Van Buren St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SXJ</b> Amount of Each Disbursement this Period [REDACTED] 106.84
City University Park	State MD	Zip Code 20782-1190
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Global Strategy Group, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 09 / 2017
Mailing Address 895 Broadway FI 5		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SSQ</b> Amount of Each Disbursement this Period [REDACTED] 1700.00
City New York	State NY	Zip Code 10003-1226
Purpose of Disbursement Rent	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Global Strategy Group, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2017
Mailing Address 895 Broadway FI 5		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SSR</b> Amount of Each Disbursement this Period [REDACTED] 220.00
City New York	State NY	Zip Code 10003-1226
Purpose of Disbursement Rent	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

[REDACTED] 2026.84
[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Global Strategy Group, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2017
Mailing Address 895 Broadway FI 5		FEC Identification Number C <b>Transaction ID : VTD69A0SSS</b> Amount of Each Disbursement this Period 220.00
City New York	State NY	
Zip Code 10003-1226	Purpose of Disbursement Rent	Memo Item <input type="checkbox"/>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Global Strategy Group, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2017
Mailing Address 895 Broadway FI 5		FEC Identification Number C <b>Transaction ID : VTD69A0SST</b> Amount of Each Disbursement this Period 95.00
City New York	State NY	
Zip Code 10003-1226	Purpose of Disbursement Rent	Memo Item <input type="checkbox"/>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Global Strategy Group, LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2017
Mailing Address 895 Broadway FI 5		FEC Identification Number C <b>Transaction ID : VTD69A0SSV</b> Amount of Each Disbursement this Period 315.00
City New York	State NY	
Zip Code 10003-1226	Purpose of Disbursement Rent	Memo Item <input type="checkbox"/>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	630.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Global Strategy Group, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2017
Mailing Address 895 Broadway FI 5		FEC Identification Number C <b>Transaction ID : VTD69A0SSV</b> Amount of Each Disbursement this Period 315.00
City New York	State NY	
Zip Code 10003-1226		Memo Item <input type="checkbox"/>
Purpose of Disbursement Rent		
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Global Strategy Group, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2017
Mailing Address 895 Broadway FI 5		FEC Identification Number C <b>Transaction ID : VTD69A0SSX</b> Amount of Each Disbursement this Period 315.00
City New York	State NY	
Zip Code 10003-1226		Memo Item <input type="checkbox"/>
Purpose of Disbursement Rent		
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Halverson, Taylor, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2017
Mailing Address 410 4Th St SE		FEC Identification Number C <b>Transaction ID : VTD69A0SR1</b> Amount of Each Disbursement this Period 983.04
City Washington	State DC	
Zip Code 20003-2005		Memo Item <input type="checkbox"/>
Purpose of Disbursement Salary		
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

1613.04

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Halverson, Taylor, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2017	
Mailing Address 410 4Th St SE		FEC Identification Number C [REDACTED]	
City Washington	State DC	Zip Code 20003-2005	Transaction ID : <b>VTD69A0SRC</b>
Purpose of Disbursement Salary		Category/Type 001	Amount of Each Disbursement this Period 126.79
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Halverson, Taylor, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 16 / 2017	
Mailing Address 410 4Th St SE		FEC Identification Number C [REDACTED]	
City Washington	State DC	Zip Code 20003-2005	Transaction ID : <b>VTD69A0SRD</b>
Purpose of Disbursement Salary		Category/Type 001	Amount of Each Disbursement this Period 126.80
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Halverson, Taylor, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017	
Mailing Address 410 4Th St SE		FEC Identification Number C [REDACTED]	
City Washington	State DC	Zip Code 20003-2005	Transaction ID : <b>VTD69A0SRI</b>
Purpose of Disbursement Salary		Category/Type 001	Amount of Each Disbursement this Period 126.80
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	380.39
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Halverson, Taylor, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2017	
Mailing Address 410 4Th St SE		FEC Identification Number C [REDACTED]	
City Washington	State DC	Zip Code 20003-2005	Transaction ID : <b>VTD69A0SRF</b>
Purpose of Disbursement Salary		Category/Type 001	Amount of Each Disbursement this Period 126.79
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Halverson, Taylor, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017	
Mailing Address 410 4Th St SE		FEC Identification Number C [REDACTED]	
City Washington	State DC	Zip Code 20003-2005	Transaction ID : <b>VTD69A0SRG</b>
Purpose of Disbursement Salary		Category/Type 001	Amount of Each Disbursement this Period 126.80
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Halverson, Taylor, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2017	
Mailing Address 410 4Th St SE		FEC Identification Number C [REDACTED]	
City Washington	State DC	Zip Code 20003-2005	Transaction ID : <b>VTD69A0AEI</b>
Purpose of Disbursement Salary		Category/Type 001	Amount of Each Disbursement this Period 126.79
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	380.38
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Halverson, Taylor, , ,</b>			Date of Disbursement MM / DD / YYYY 04 / 28 / 2017		
Mailing Address 410 4Th St SE			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SR-</b> Amount of Each Disbursement this Period [REDACTED] 35.43		
City Washington	State DC	Zip Code 20003-2005	Category/Type 001		
Purpose of Disbursement Salary		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) <b>B. Liberty Mutual Insurance</b>			Date of Disbursement MM / DD / YYYY 04 / 18 / 2017		
Mailing Address PO Box 72470109			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SSZ</b> Amount of Each Disbursement this Period [REDACTED] 1050.00		
City Philadelphia	State PA	Zip Code 19170-0001	Category/Type 001		
Purpose of Disbursement Insurance		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) <b>C. New York State Insurance Fund</b>			Date of Disbursement MM / DD / YYYY 01 / 10 / 2017		
Mailing Address 1 Watervliet Avenue Ext			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A1GM</b> Amount of Each Disbursement this Period [REDACTED] 10.00		
City Albany	State NY	Zip Code 12206-1629	Category/Type 001		
Purpose of Disbursement Worker's Compensation Insurance		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

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

[REDACTED] 1095.43

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. New York State Insurance Fund</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address 1 Watervliet Avenue Ext		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A1GM<sup>1</sup></b> Amount of Each Disbursement this Period 1011.48
City Albany	State NY	Zip Code 12206-1629
Purpose of Disbursement Worker's Compensation Insurance		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NGP VAN, Inc.</b>		Date of Disbursement MM / DD / YYYY 01 / 27 / 2017
Mailing Address 1101 15Th St NW Ste 500		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0ST1:</b> Amount of Each Disbursement this Period 300.00
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Software		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2017
Mailing Address 1101 15Th St NW Ste 500		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0ST3</b> Amount of Each Disbursement this Period 52.50
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Software		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1363.98
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN, Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 1101 15Th St NW Ste 500		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0ST4</b> Amount of Each Disbursement this Period [REDACTED] 300.00
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Software		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Parsons, Charles, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 09 / 2017
Mailing Address 129 C St SE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SR4</b> Amount of Each Disbursement this Period [REDACTED] 2295.00
City Washington	State DC	Zip Code 20003-1806
Purpose of Disbursement Rent		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Parsons, Charles, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2017
Mailing Address 129 C St SE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SSC</b> Amount of Each Disbursement this Period [REDACTED] 270.00
City Washington	State DC	Zip Code 20003-1806
Purpose of Disbursement Rent		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2865.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Parsons, Charles, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 129 C St SE

City Washington State DC Zip Code 20003-1806

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SS2

Amount of Each Disbursement this Period: 270.00

Memo Item

**B. Parsons, Charles, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 129 C St SE

City Washington State DC Zip Code 20003-1806

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SS4

Amount of Each Disbursement this Period: 270.00

Memo Item

**C. Parsons, Charles, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 129 C St SE

City Washington State DC Zip Code 20003-1806

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 01 / 2017

FEC Identification Number: C

Transaction ID : VTD69A0SS5

Amount of Each Disbursement this Period: 270.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 810.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Parsons, Charles, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2017
Mailing Address 129 C St SE		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SS7</b> Amount of Each Disbursement this Period [REDACTED] 270.00
City Washington	State DC	Zip Code 20003-1806
Purpose of Disbursement Rent	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Perkins Coie, LLP</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2017
Mailing Address 1201 3Rd Ave FI 40		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0ST5:</b> Amount of Each Disbursement this Period [REDACTED] 160.00
City Seattle	State WA	Zip Code 98101-3029
Purpose of Disbursement Legal Consulting	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Perkins Coie, LLP</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2017
Mailing Address 1201 3Rd Ave FI 40		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0ST6</b> Amount of Each Disbursement this Period [REDACTED] 64.00
City Seattle	State WA	Zip Code 98101-3029
Purpose of Disbursement Legal Consulting	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 494.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Perkins Coie, LLP</b>		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 1201 3Rd Ave FI 40		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0ST7</b> Amount of Each Disbursement this Period [REDACTED] 187.00
City Seattle	State WA	Zip Code 98101-3029
Purpose of Disbursement Legal Consulting		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Perkins Coie, LLP</b>		Date of Disbursement MM / DD / YYYY 05 / 04 / 2017
Mailing Address 1201 3Rd Ave FI 40		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0ST8!</b> Amount of Each Disbursement this Period [REDACTED] 140.25
City Seattle	State WA	Zip Code 98101-3029
Purpose of Disbursement Legal Consulting		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Perkins Coie, LLP</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2017
Mailing Address 1201 3Rd Ave FI 40		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0ST9!</b> Amount of Each Disbursement this Period [REDACTED] 833.00
City Seattle	State WA	Zip Code 98101-3029
Purpose of Disbursement Legal Consulting		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1160.25
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Rokoff, Laura, , ,</b>			Date of Disbursement MM / DD / YYYY 05 / 31 / 2017	
Mailing Address 311 E 71St St Apt 2A			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SXH</b>	
City New York	State NY	Zip Code 10021-4722	Amount of Each Disbursement this Period [REDACTED] 303.97	
Purpose of Disbursement Salary		Candidate Name	Memo Item <input type="checkbox"/>	
Category/Type 001				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Rokoff, Laura, , ,</b>			Date of Disbursement MM / DD / YYYY 06 / 16 / 2017	
Mailing Address 311 E 71St St Apt 2A			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SXH</b>	
City New York	State NY	Zip Code 10021-4722	Amount of Each Disbursement this Period [REDACTED] 303.95	
Purpose of Disbursement Salary		Candidate Name	Memo Item <input type="checkbox"/>	
Category/Type 001				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Rokoff, Laura, , ,</b>			Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address 311 E 71St St Apt 2A			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SXF</b>	
City New York	State NY	Zip Code 10021-4722	Amount of Each Disbursement this Period [REDACTED] 303.97	
Purpose of Disbursement Salary		Candidate Name	Memo Item <input type="checkbox"/>	
Category/Type 001				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

911.89

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Rue Group LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2017
Mailing Address 708 3Rd Ave FI 6		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SW</b> Amount of Each Disbursement this Period 548.40
City New York	State NY	Zip Code 10017-4119
Purpose of Disbursement Fundraising Consulting		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Rue Group LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 23 / 2017
Mailing Address 708 3Rd Ave FI 6		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SW</b> Amount of Each Disbursement this Period 1000.00
City New York	State NY	Zip Code 10017-4119
Purpose of Disbursement Fundraising Consulting		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Rue Group LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2017
Mailing Address 708 3Rd Ave FI 6		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SW</b> Amount of Each Disbursement this Period 1000.00
City New York	State NY	Zip Code 10017-4119
Purpose of Disbursement Fundraising Consulting		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

2548.40

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Rue Group LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2017
Mailing Address 708 3Rd Ave FI 6		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SWI</b> Amount of Each Disbursement this Period 1005.05
City New York	State NY	Zip Code 10017-4119
Purpose of Disbursement Fundraising Consulting		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Rue Group LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2017
Mailing Address 708 3Rd Ave FI 6		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SWI</b> Amount of Each Disbursement this Period 1017.44
City New York	State NY	Zip Code 10017-4119
Purpose of Disbursement Fundraising Consulting		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Rue Group LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017
Mailing Address 708 3Rd Ave FI 6		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SWI</b> Amount of Each Disbursement this Period 13.15
City New York	State NY	Zip Code 10017-4119
Purpose of Disbursement Travel		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2035.64
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Rue Group LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2017
Mailing Address 708 3Rd Ave FI 6		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SWI</b>
City New York	State NY	Zip Code 10017-4119
Purpose of Disbursement Fundraising Consulting		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item Not for Federal Candidate	

Full Name (Last, First, Middle Initial) <b>B. Saidel, Matthew, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2017
Mailing Address 597 Saint Marks Ave Apt 3		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQN</b>
City Brooklyn	State NY	Zip Code 11216-4686
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 1364.52
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Saidel, Matthew, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2017
Mailing Address 597 Saint Marks Ave Apt 3		FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQI</b>
City Brooklyn	State NY	Zip Code 11216-4686
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 192.39
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2556.91
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Saidel, Matthew, , ,</b>			Date of Disbursement MM / DD / YYYY 02 / 16 / 2017	
Mailing Address 597 Saint Marks Ave Apt 3			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQC</b> Amount of Each Disbursement this Period [REDACTED] 192.40	
City Brooklyn	State NY	Zip Code 11216-4686	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Saidel, Matthew, , ,</b>			Date of Disbursement MM / DD / YYYY 02 / 28 / 2017	
Mailing Address 597 Saint Marks Ave Apt 3			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQR</b> Amount of Each Disbursement this Period [REDACTED] 192.39	
City Brooklyn	State NY	Zip Code 11216-4686	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Saidel, Matthew, , ,</b>			Date of Disbursement MM / DD / YYYY 03 / 16 / 2017	
Mailing Address 597 Saint Marks Ave Apt 3			FEC Identification Number C [REDACTED] <b>Transaction ID : VTD69A0SQI</b> Amount of Each Disbursement this Period [REDACTED] 192.39	
City Brooklyn	State NY	Zip Code 11216-4686	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

[REDACTED] 577.18
[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Saidel, Matthew, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 597 Saint Marks Ave Apt 3		FEC Identification Number C <b>Transaction ID : VTD69A0SQ</b> Amount of Each Disbursement this Period 192.40
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11216-4686	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Saidel, Matthew, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2017
Mailing Address 597 Saint Marks Ave Apt 3		FEC Identification Number C <b>Transaction ID : VTD69A0AED</b> Amount of Each Disbursement this Period 192.39
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11216-4686	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Saidel, Matthew, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017
Mailing Address 597 Saint Marks Ave Apt 3		FEC Identification Number C <b>Transaction ID : VTD69A0SQ</b> Amount of Each Disbursement this Period 113.86
City Brooklyn	State NY	
Purpose of Disbursement Salary	Zip Code 11216-4686	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

498.65

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Salsa Labs, Inc.**

Mailing Address PO Box 674533

City  
Detroit

State  
MI

Zip Code  
48267-4533

Purpose of Disbursement  
Software

001

Category/  
Type

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	2		0	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : VTD69A0SWI

Amount of Each Disbursement this Period

[REDACTED] 16497.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Salsa Labs, Inc.**

Mailing Address PO Box 674533

City  
Detroit

State  
MI

Zip Code  
48267-4533

Purpose of Disbursement  
Software

001

Category/  
Type

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	5		0	4		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : VTD69A0SWC

Amount of Each Disbursement this Period

[REDACTED] 16497.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verdolino & Lowey, P.C.**

Mailing Address 124 Washington St  
Ste 101

City  
Foxboro

State  
MA

Zip Code  
02035-1368

Purpose of Disbursement  
Professional Services-Accounting

001

Category/  
Type

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	2		1	4		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : VTD69A0SW

Amount of Each Disbursement this Period

[REDACTED] 3841.40

Memo Item

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

[REDACTED] 36835.40

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

[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement Telephone Service

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD69A0SW.**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon Wireless**

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement Telephone Service

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD69A0SW**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement Telephone Service

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD69A0SW**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement Telephone Service

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD69A0SWI**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon Wireless**

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement Telephone Service

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD69A0SWF**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement Telephone Service

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTD69A0SW**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Chrissy Houlahan For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 222

City Devon State PA Zip Code 19333-0222

Purpose of Disbursement Contribution  
Candidate Name Houlahan, Chrissy, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: PA District: 06

Date of Disbursement: 05 / 25 / 2017

FEC Identification Number: C00637371  
Transaction ID : VTD69A0SY1  
Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

Memo Item

**B. Clarke For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 111-36 200Th Street

City Hollis State NY Zip Code 11412

Purpose of Disbursement Contribution  
Candidate Name Clarke, Yvette, D, ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: NY District: 09

Date of Disbursement: 03 / 15 / 2017

FEC Identification Number: C00415331  
Transaction ID : VTD69A0SY1  
Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

Memo Item

**C. Clarke For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 111-36 200Th Street

City Hollis State NY Zip Code 11412

Purpose of Disbursement Contribution  
Candidate Name Clarke, Yvette, D, ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: NY District: 09

Date of Disbursement: 03 / 15 / 2017

FEC Identification Number: C00415331  
Transaction ID : VTD69A0SY2  
Amount of Each Disbursement this Period: 5000.00

Category/Type: 011

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Committee To Re-Elect Nydia M. Velazquez To Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 315 Inspiration Ln

City Gaithersburg State MD Zip Code 20878-5808

Purpose of Disbursement Contribution  
Candidate Name Velazquez, Nydia, M, ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: NY District: 07

Date of Disbursement: 03 / 15 / 2017

FEC Identification Number: C00271312  
Transaction ID : VTD69A0SY4  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. Committee To Re-Elect Nydia M. Velazquez To Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 315 Inspiration Ln

City Gaithersburg State MD Zip Code 20878-5808

Purpose of Disbursement Contribution  
Candidate Name Velazquez, Nydia, M, ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: NY District: 07

Date of Disbursement: 03 / 15 / 2017

FEC Identification Number: C00271312  
Transaction ID : VTD69A0SY5  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Elizabeth For MA Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 290568

City Boston State MA Zip Code 02129-0210

Purpose of Disbursement Contribution  
Candidate Name Warren, Elizabeth, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: MA District: 00

Date of Disbursement: 01 / 10 / 2017

FEC Identification Number: C00500843  
Transaction ID : VTD69A0SY6  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Elizabeth For MA Inc.**

Mailing Address PO Box 290568

City  
Boston

State  
MA

Zip Code  
02129-0210

Purpose of Disbursement  
Contribution

011

Candidate Name

**Warren, Elizabeth, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MA District: 00

Date of Disbursement

MM / DD / YYYY  
01 / 10 / 2017

FEC Identification Number

C00500843

**Transaction ID : VTD69A0SY7**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Elizabeth Pannill Fletcher For Congress**

Mailing Address 3262 Westheimer Rd  
# 636

City  
Houston

State  
TX

Zip Code  
77098-1002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Fletcher, Elizabeth Pannill, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: TX District: 07

Date of Disbursement

MM / DD / YYYY  
06 / 14 / 2017

FEC Identification Number

C00640045

**Transaction ID : VTD69A0SZ0**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. EMILY'S LIST**

Mailing Address 1800 M St NW  
Ste 375N

City  
Washington

State  
DC

Zip Code  
20036-5862

Purpose of Disbursement  
2017 Contribution

011

Candidate Name

**EMILY'S LIST**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2017  
 Primary  General  
 Other (specify) ▼

State: District: 2017 Contribution

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2017

FEC Identification Number

C00193433

**Transaction ID : VTD69A0SY8**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

12500.00

**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"/> 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)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Feinstein For Senate 2018</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address 918 Pennsylvania Ave SE		FEC Identification Number C00539890 <b>Transaction ID : VTD69A0SZ1</b>
City Washington	State DC	Zip Code 20003-2140
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>Feinstein, Dianne, , ,</b>		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 00	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Feinstein For Senate 2018</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address 918 Pennsylvania Ave SE		FEC Identification Number C00539890 <b>Transaction ID : VTD69A0SZ1</b>
City Washington	State DC	Zip Code 20003-2140
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>Feinstein, Dianne, , ,</b>		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 00	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Friends Of Mazie Hirono</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address PO Box 677		FEC Identification Number C00420760 <b>Transaction ID : VTD69A0SY1</b>
City Honolulu	State HI	Zip Code 96809-0677
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>Hirono, Mazie, K, ,</b>		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: HI District: 00	<input type="checkbox"/> Memo Item	

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

15000.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Friends Of Mazie Hirono**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 677

City Honolulu State HI Zip Code 96809-0677

Purpose of Disbursement Contribution  
Candidate Name Hirono, Mazie, K, ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: HI District: 00

Date of Disbursement: 01 / 10 / 2017

FEC Identification Number: C00420760  
Transaction ID : VTD69A0SYA  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. Grace For New York**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 656555

City Fresh Meadows State NY Zip Code 11365-6555

Purpose of Disbursement Contribution  
Candidate Name Meng, Grace, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: NY District: 06

Date of Disbursement: 01 / 27 / 2017

FEC Identification Number: C00516666  
Transaction ID : VTD69A0SYB  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Grace For New York**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 656555

City Fresh Meadows State NY Zip Code 11365-6555

Purpose of Disbursement Contribution  
Candidate Name Meng, Grace, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: NY District: 06

Date of Disbursement: 01 / 27 / 2017

FEC Identification Number: C00516666  
Transaction ID : VTD69A0SYC  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Heidi For Senate</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address PO Box 1577		FEC Identification Number C00505552 <b>Transaction ID : VTD69A0SYC</b> Amount of Each Disbursement this Period 5000.00
City Bismarck	State ND	Zip Code 58502-1577
Purpose of Disbursement Contribution		011 Category/Type
Candidate Name <b>Heitkamp, Heidi, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ND	District: 00	

Full Name (Last, First, Middle Initial) <b>B. Heidi For Senate</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address PO Box 1577		FEC Identification Number C00505552 <b>Transaction ID : VTD69A0SYE</b> Amount of Each Disbursement this Period 5000.00
City Bismarck	State ND	Zip Code 58502-1577
Purpose of Disbursement Contribution		011 Category/Type
Candidate Name <b>Heitkamp, Heidi, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ND	District: 00	

Full Name (Last, First, Middle Initial) <b>C. Katherine Clark For Congress</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017
Mailing Address PO Box 361		FEC Identification Number C00541888 <b>Transaction ID : VTD69A0SYF</b> Amount of Each Disbursement this Period 1000.00
City Malden	State MA	Zip Code 02148-0004
Purpose of Disbursement Contribution		011 Category/Type
Candidate Name <b>Clark, Katherine, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA	District: 05	

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. Katie Porter For Congress**

Full Name (Last, First, Middle Initial)  
Katie Porter For Congress

Date of Disbursement: 06 / 14 / 2017

Mailing Address: 777 S Figueroa St, Ste 4050  
City: Los Angeles, State: CA, Zip Code: 90017-5864

Purpose of Disbursement: Contribution  
Candidate Name: Porter, Katherine, , ,  
Office Sought:  House,  Senate,  President  
Disbursement For: 2018  
State: CA, District: 45  
Category/Type: 011

FEC Identification Number: C00636571  
Transaction ID: VTD69A0SZ3  
Amount of Each Disbursement this Period: 5000.00  
 Memo Item

**B. Kuster For Congress, Inc.**

Full Name (Last, First, Middle Initial)  
Kuster For Congress, Inc.

Date of Disbursement: 06 / 14 / 2017

Mailing Address: PO Box 1498  
City: Concord, State: NH, Zip Code: 03302-1498

Purpose of Disbursement: Contribution  
Candidate Name: Kuster, Ann McLane, , ,  
Office Sought:  House,  Senate,  President  
Disbursement For: 2018  
State: NH, District: 02  
Category/Type: 011

FEC Identification Number: C00462861  
Transaction ID: VTD69A0SYH  
Amount of Each Disbursement this Period: 5000.00  
 Memo Item

**C. Kyrsten Sinema For Congress**

Full Name (Last, First, Middle Initial)  
Kyrsten Sinema For Congress

Date of Disbursement: 03 / 30 / 2017

Mailing Address: PO Box 25879  
City: Tempe, State: AZ, Zip Code: 85285-5879

Purpose of Disbursement: Contribution  
Candidate Name: Sinema, Kyrsten, , ,  
Office Sought:  House,  Senate,  President  
Disbursement For: 2018  
State: AZ, District: 09  
Category/Type: 011

FEC Identification Number: C00508804  
Transaction ID: VTD69A0SZ4  
Amount of Each Disbursement this Period: 5000.00  
 Memo Item

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

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

15000.00

**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"/> 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)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)  
**A. Kyrsten Sinema For Congress**

Date of Disbursement:  /  /

Mailing Address: PO Box 25879

City: Tempe State: AZ Zip Code: 85285-5879

Purpose of Disbursement: Contribution  
Category/Type:

Candidate Name: Sinema, Kyrsten, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼

State: AZ District: 09

FEC Identification Number:   
Transaction ID: **VTD69A0SZ5**  
Amount of Each Disbursement this Period:   
 Memo Item

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

Date of Disbursement:  /  /

Mailing Address: PO Box 300077

City: Saint Louis State: MO Zip Code: 63130-0338

Purpose of Disbursement: Contribution  
Category/Type:

Candidate Name: McCaskill, Claire, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼

State: MO District: 00

FEC Identification Number:   
Transaction ID: **VTD69A0SZ6**  
Amount of Each Disbursement this Period:   
 Memo Item

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

Date of Disbursement:  /  /

Mailing Address: PO Box 300077

City: Saint Louis State: MO Zip Code: 63130-0338

Purpose of Disbursement: Contribution  
Category/Type:

Candidate Name: McCaskill, Claire, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼

State: MO District: 00

FEC Identification Number:   
Transaction ID: **VTD69A0SZ7**  
Amount of Each Disbursement this Period:   
 Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Mikie Sherrill For Congress</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2017
Mailing Address PO Box 43032		FEC Identification Number C00640003 <b>Transaction ID : VTD69A0SZ8</b> Amount of Each Disbursement this Period 5000.00
City Montclair	State NJ	Zip Code 07043-0032
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>Sherrill, Rebecca Michelle, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Moser For Congress</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2017
Mailing Address 2726 Bissonnet St Ste 240-517		FEC Identification Number C00638726 <b>Transaction ID : VTD69A0SZ9!</b> Amount of Each Disbursement this Period 2500.00
City Houston	State TX	Zip Code 77005-1319
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>Moser, Laura, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 07	

Full Name (Last, First, Middle Initial) <b>C. Tammy Baldwin For Senate</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address PO Box 696		FEC Identification Number C00326801 <b>Transaction ID : VTD69A0SY!</b> Amount of Each Disbursement this Period 5000.00
City Madison	State WI	Zip Code 53701-0696
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>Baldwin, Tammy, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI	District: 00	

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

12500.00

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial) <b>A. Tammy Baldwin For Senate</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address PO Box 696		FEC Identification Number C 000326801 <b>Transaction ID : VTD69A0SYC</b> Amount of Each Disbursement this Period 5000.00
City Madison	State WI	Zip Code 53701-0696
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>Baldwin, Tammy, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. The Niki Tsongas Committee</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017
Mailing Address PO Box 1454		FEC Identification Number C 000433136 <b>Transaction ID : VTD69A0SYR</b> Amount of Each Disbursement this Period 1000.00
City Lowell	State MA	Zip Code 01853-1454
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>Tsongas, Nicola, S, ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA	District: 03	<input type="checkbox"/> Memo Item

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	132000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

Full Name (Last, First, Middle Initial)

**A. Sevcik, Beatrice, , ,**

Mailing Address 6 Broadmoor Rd

City  
Scarsdale

State  
NY

Zip Code  
10583-7604

Purpose of Disbursement  
Refund of Contribution

010

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 22 / 2017

FEC Identification Number

C

**Transaction ID : VTD69A1GM!**  
Amount of Each Disbursement this Period

650.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

650.00

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

650.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Off the Sidelines PAC**

**A. The Committee To Recall Judge Persky**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1787 Tribute Rd  
Ste K

M M M	/	D D D	/	Y Y Y Y Y
06		14		2017

City Sacramento State CA Zip Code 95815-4404

FEC Identification Number

Purpose of Disbursement  
Non-Federal Contribution

C
---

Candidate Name

011
Category/ Type

**Transaction ID : VTD69A1GN1**  
Amount of Each Disbursement this Period

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

1000.00
---------

Memo Item

**B. US Treasury**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3700 E West Hwy

M M M	/	D D D	/	Y Y Y Y Y
01		10		2017

City Hyattsville State MD Zip Code 20782-2015

FEC Identification Number

Purpose of Disbursement  
General Fund/Uncashed Refund Check

C
---

Candidate Name

001
Category/ Type

**Transaction ID : VTD69A1GN1**  
Amount of Each Disbursement this Period

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

2500.00
---------

Memo Item W Salon LLC Refund Issued in 2014 But Subsequently Cashied on 04/10/17 After Disgorgement

**C. WomenCount**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 393 7Th Ave  
Ste 301

M M M	/	D D D	/	Y Y Y Y Y
04		26		2017

City San Francisco State CA Zip Code 94118-2378

FEC Identification Number

Purpose of Disbursement  
Charitable Donation

C
---

Candidate Name

012
Category/ Type

**Transaction ID : VTD69A1GN1**  
Amount of Each Disbursement this Period

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

15000.00
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Memo Item

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

18500.00
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**TOTAL** This Period (last page this line number only)..... ▶

18500.00
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