

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**

For Our Future

ADDRESS (number and street) **PO Box 65729**

Check if different than previously reported. (ACC) **Washington DC 20035**

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

**C** **C00620971**

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)  General (12G)  Runoff (12R)
  - Convention (12C)  Special (12S)

Election on **11 / 08 / 2016** in the State of **DC**

- (d) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

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

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

Type or Print Name of Treasurer **Bidel-Niyat, Shirin, , ,**

Signature of Treasurer **Bidel-Niyat, Shirin, , ,** [Electronically Filed] Date **01 / 27 / 2017**

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**For Our Future**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="11086586.06"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1771519.68"/>	<input type="text" value="34344144.45"/>
(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="12858105.74"/>	<input type="text" value="34344144.45"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10804382.34"/>	<input type="text" value="32290421.05"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2053723.40"/>	<input type="text" value="2053723.40"/>
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="379108.94"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
**For Our Future**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	166262.37	19460979.46
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	166262.37	19460979.46
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1500000.00	14008117.67
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1666262.37	33469097.13
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	1807.71	535251.27
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	103449.60	339796.05
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)).....▶	1771519.68	34344144.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1771519.68	34344144.45

**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 .....	3564297.49	8580867.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3564297.49	8580867.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1412760.99	3459932.66
24. Independent Expenditures (use Schedule E) .....	1227268.52	2690269.63
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	4600055.34	17559350.86
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)) ..	10804382.34	32290421.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10804382.34	32290421.05

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1666262.37	33469097.13
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1666262.37	33469097.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3564297.49	8580867.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1807.71	535251.27
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3562489.78	8045616.63

**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 289
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**For Our Future**

**A. AFSCME Special Account**

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

Mailing Address 1625 L St NW

City Washington	State DC	Zip Code 20036-5665
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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 ▼  
5251479.46

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2016

**Transaction ID : VSH7WD8JRY4**

Amount of Each Receipt this Period  
6288.66

Memo Item

\* In-Kind: Rent

**B. AFSCME Special Account**

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

Mailing Address 1625 L St NW

City Washington	State DC	Zip Code 20036-5665
--------------------	-------------	------------------------

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 ▼  
5251479.46

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2016

**Transaction ID : VSH7WDC3CQ4**

Amount of Each Receipt this Period  
159973.71

Memo Item

\* In-Kind: Staff Salaries and Benefits

**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 Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	166262.37
<b>TOTAL</b> This Period (last page this line number only).....	166262.37

**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 289
<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)  
**For Our Future**

**A. NEXTGEN CLIMATE ACTION COMMITTEE**

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

Mailing Address 700 13Th St NW  
Ste 600

City Washington State DC Zip Code 20005-5998

FEC ID number of contributing federal political committee. **C** C00547349

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6500000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 04 / 2016

**Transaction ID : VSH7WDC0TJ9**

Amount of Each Receipt this Period  
1000000.00

Memo Item

**B. NEXTGEN CLIMATE ACTION COMMITTEE**

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

Mailing Address 700 13Th St NW  
Ste 600

City Washington State DC Zip Code 20005-5998

FEC ID number of contributing federal political committee. **C** C00547349

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6500000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : VSH7WDC0TN2**

Amount of Each Receipt this Period  
500000.00

Memo Item

**C.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1500000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 289
<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)  
**For Our Future**

**A. Amazon**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 345 Boren Ave N  
City Seattle State WA Zip Code 98109-5306  
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 ▼ 2539.81

Date of Receipt 10 / 06 / 2016  
**Transaction ID : VSH7WDC0SN9**  
Amount of Each Receipt this Period 17.09  
 Memo Item  
Refund

**B. Amazon**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 345 Boren Ave N  
City Seattle State WA Zip Code 98109-5306  
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 ▼ 2539.81

Date of Receipt 10 / 13 / 2016  
**Transaction ID : VSH7WDC0SQ5**  
Amount of Each Receipt this Period 1215.05  
 Memo Item  
Refund

**C. American Airlines**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 619616  
City Dallas State TX Zip Code 75261-9616  
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 ▼ 298.10

Date of Receipt 10 / 11 / 2016  
**Transaction ID : VSH7WDC0SY1**  
Amount of Each Receipt this Period 298.10  
 Memo Item  
Refund

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1530.24  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 289
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**For Our Future**

**A. Amtrak**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 60 Massachusetts Ave NE  
City Washington State DC Zip Code 20002-4285  
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 ▼ 353.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2016  
**Transaction ID : VSH7WDBP095**  
Amount of Each Receipt this Period  
260.00  
 Memo Item  
Refund

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

Date of Receipt  
M M / D D / Y Y Y Y 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 Y Y  
Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	260.00
<b>TOTAL</b> This Period (last page this line number only).....	1790.24

**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 289
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**For Our Future**

**A. VoteVets Action Fund**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 75357

City Washington	State DC	Zip Code 20013-0357
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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 ▼  
103449.60

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		05		2016

**Transaction ID : VSH7WDC0SK4**

Amount of Each Receipt this Period  
103449.60

Memo Item

Refund of Misdeposited Funds

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

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	103449.60
<b>TOTAL</b> This Period (last page this line number only).....	103449.60

**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)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Activate Inc.**

Mailing Address 1030 15Th St NW  
Ste 180

City  
Washington

State  
DC

Zip Code  
20005-1503

Purpose of Disbursement  
Communications Consulting Services

001

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
10	/	03	/	2016

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TNW

Amount of Each Disbursement this Period

10000.00
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Memo Item

Full Name (Last, First, Middle Initial)

**B. AFSCME Special Account**

Mailing Address 1625 L St NW

City  
Washington

State  
DC

Zip Code  
20036-5665

Purpose of Disbursement  
Rent

[REDACTED]

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
10	/	01	/	2016

FEC Identification Number

C [REDACTED]

Transaction ID : VSH7WD8JR'

Amount of Each Disbursement this Period

6288.66
---------

\* In-Kind Received

Memo Item

Full Name (Last, First, Middle Initial)

**C. AFSCME Special Account**

Mailing Address 1625 L St NW

City  
Washington

State  
DC

Zip Code  
20036-5665

Purpose of Disbursement  
Staff Salaries and Benefits

[REDACTED]

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
10	/	01	/	2016

FEC Identification Number

C [REDACTED]

Transaction ID : VSH7WDC3C

Amount of Each Disbursement this Period

159973.71
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\* In-Kind Received

Memo Item

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

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

176262.37
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[REDACTED]
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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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Allianz Global Assistance</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016	
Mailing Address 9950 Mayland Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6I</b> Amount of Each Disbursement this Period [REDACTED] 26.48	
City Henrico	State VA	Zip Code 23233-1463	Category/ Type 002
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Allianz Global Assistance</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016	
Mailing Address 9950 Mayland Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6I</b> Amount of Each Disbursement this Period [REDACTED] 24.91	
City Henrico	State VA	Zip Code 23233-1463	Category/ Type 002
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Allianz Global Assistance</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016	
Mailing Address 9950 Mayland Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6I</b> Amount of Each Disbursement this Period [REDACTED] 42.98	
City Henrico	State VA	Zip Code 23233-1463	Category/ Type 002
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 94.37
<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

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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Allianz Global Assistance</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address 9950 Mayland Dr		FEC Identification Number C <b>Transaction ID : VSG8M9TP6F</b> Amount of Each Disbursement this Period 31.41
City Henrico	State VA	
Zip Code 23233-1463	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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>B. Allianz Global Assistance</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address 9950 Mayland Dr		FEC Identification Number C <b>Transaction ID : VSG8M9TP6S</b> Amount of Each Disbursement this Period 26.11
City Henrico	State VA	
Zip Code 23233-1463	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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. Allianz Global Assistance</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 9950 Mayland Dr		FEC Identification Number C <b>Transaction ID : VSG8M9TP6'</b> Amount of Each Disbursement this Period 50.91
City Henrico	State VA	
Zip Code 23233-1463	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	108.43
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Allianz Global Assistance</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016	
Mailing Address 9950 Mayland Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6</b> Amount of Each Disbursement this Period 25.13	
City Henrico	State VA	Zip Code 23233-1463	Category/ Type 002
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Allianz Global Assistance</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016	
Mailing Address 9950 Mayland Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6</b> Amount of Each Disbursement this Period 42.00	
City Henrico	State VA	Zip Code 23233-1463	Category/ Type 002
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. Allianz Global Assistance</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016	
Mailing Address 9950 Mayland Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6</b> Amount of Each Disbursement this Period 35.11	
City Henrico	State VA	Zip Code 23233-1463	Category/ Type 002
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	102.24
<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)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Allianz Global Assistance**

Mailing Address 9950 Mayland Dr

City  
Henrico

State  
VA

Zip Code  
23233-1463

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	/	D	D	/	Y	Y	Y	Y
10			11			2016			

FEC Identification Number

C [REDACTED]  
**Transaction ID : VSG8M9TP61**  
Amount of Each Disbursement this Period  
[REDACTED] 21.88

Memo Item

Full Name (Last, First, Middle Initial)

**B. Allianz Global Assistance**

Mailing Address 9950 Mayland Dr

City  
Henrico

State  
VA

Zip Code  
23233-1463

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	/	D	D	/	Y	Y	Y	Y
10			12			2016			

FEC Identification Number

C [REDACTED]  
**Transaction ID : VSG8M9TP62**  
Amount of Each Disbursement this Period  
[REDACTED] 58.76

Memo Item

Full Name (Last, First, Middle Initial)

**C. Allianz Global Assistance**

Mailing Address 9950 Mayland Dr

City  
Henrico

State  
VA

Zip Code  
23233-1463

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	/	D	D	/	Y	Y	Y	Y
10			14			2016			

FEC Identification Number

C [REDACTED]  
**Transaction ID : VSG8M9TP71**  
Amount of Each Disbursement this Period  
[REDACTED] 44.48

Memo Item

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

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

[REDACTED]	125.12
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[REDACTED]	
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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)  
**For Our Future**

**A. Allianz Global Assistance**

Full Name (Last, First, Middle Initial)

Mailing Address 9950 Mayland Dr

City Henrico State VA Zip Code 23233-1463

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP71

Amount of Each Disbursement this Period: 40.32

Memo Item

**B. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNZJ

Amount of Each Disbursement this Period: 74.38

Memo Item

**C. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNZ

Amount of Each Disbursement this Period: 33.98

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 148.68

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNY1**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNY1**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNY1**  
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)  
**For Our Future**

**A. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 04 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNZI

Amount of Each Disbursement this Period: 96.28

Memo Item

**B. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNYI

Amount of Each Disbursement this Period: 14822.28

Memo Item

**C. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNYI

Amount of Each Disbursement this Period: 53.94

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 14972.50

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

Purpose of Disbursement  
Office Equipment

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
10			05			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNYz

Amount of Each Disbursement this Period

62.93
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

Purpose of Disbursement  
Office Equipment

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
10			05			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNYz

Amount of Each Disbursement this Period

71.92
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

Purpose of Disbursement  
Office Equipment

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
10			05			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNZ

Amount of Each Disbursement this Period

62.93
-------

Memo Item

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

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

197.78
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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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

Purpose of Disbursement  
Office Equipment

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
10			05			2016			

FEC Identification Number

**Transaction ID : VSG8M9TNZ'**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

Purpose of Disbursement  
Office Equipment

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
10			05			2016			

FEC Identification Number

**Transaction ID : VSG8M9TNZ2**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

Purpose of Disbursement  
Office Equipment

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
10			05			2016			

FEC Identification Number

**Transaction ID : VSG8M9TNZ**  
Amount of Each Disbursement this Period

Memo Item

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

<input type="text" value="143.74"/>
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**TOTAL** This Period (last page this line number only)..... ▶

<input type="text"/>
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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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

Purpose of Disbursement  
Office Equipment

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
10			05			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNZ  
Amount of Each Disbursement this Period

[Redacted] 62.93

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

Purpose of Disbursement  
Office Equipment

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
10			05			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNZ  
Amount of Each Disbursement this Period

[Redacted] 89.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

Purpose of Disbursement  
Office Equipment

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
10			05			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNZ  
Amount of Each Disbursement this Period

[Redacted] 73.98

Memo Item

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

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

[Redacted] 226.71

[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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ</b> Amount of Each Disbursement this Period [REDACTED] 132.66
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Equipment		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ</b> Amount of Each Disbursement this Period [REDACTED] 5.95
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ</b> Amount of Each Disbursement this Period [REDACTED] 10.40
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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] 149.01
<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)  
**For Our Future**

**A. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNZF

Amount of Each Disbursement this Period: 29.09

Memo Item

**B. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNZF

Amount of Each Disbursement this Period: 78.89

Memo Item

**C. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 06 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNZF

Amount of Each Disbursement this Period: 66.33

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 174.31

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ/</b> Amount of Each Disbursement this Period [REDACTED] 365.48
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Equipment		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ/</b> Amount of Each Disbursement this Period [REDACTED] 103.35
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Equipment		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ/</b> Amount of Each Disbursement this Period [REDACTED] 2006.99
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Equipment		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] 2475.82
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ!</b> Amount of Each Disbursement this Period [REDACTED] 32.99
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ!</b> Amount of Each Disbursement this Period [REDACTED] 32.99
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ!</b> Amount of Each Disbursement this Period [REDACTED] 45.00
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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] 110.98
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ</b>
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 45.00
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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ</b>
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 32.99
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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ</b>
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 45.00
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).....▶	122.99
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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
10			11			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNZ  
Amount of Each Disbursement this Period

[Redacted] 32.99

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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
10			11			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TP0  
Amount of Each Disbursement this Period

[Redacted] 32.99

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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
10			11			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TP0  
Amount of Each Disbursement this Period

[Redacted] 45.00

Memo Item

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

[Redacted] 110.98

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

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 : VSG8M9TP02**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

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 : VSG8M9TP03**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

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 : VSG8M9TP0**  
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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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  
10 / 11 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TP0\*

Amount of Each Disbursement this Period

[REDACTED] 32.99

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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  
10 / 11 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TP0\*

Amount of Each Disbursement this Period

[REDACTED] 120.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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  
10 / 12 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TP0\*

Amount of Each Disbursement this Period

[REDACTED] 125.42

Memo Item

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

[REDACTED] 278.41

**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)  
**For Our Future**

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

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Event Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP3

Amount of Each Disbursement this Period: 277.12

Memo Item

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

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNZC

Amount of Each Disbursement this Period: 119.99

Memo Item

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

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP0

Amount of Each Disbursement this Period: 989.58

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1386.69

**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)  
**For Our Future**

**A. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP0E

Amount of Each Disbursement this Period: 127.92

Memo Item

**B. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP0A

Amount of Each Disbursement this Period: 127.92

Memo Item

**C. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP0I

Amount of Each Disbursement this Period: 107.82

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 363.66

**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

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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0C</b> Amount of Each Disbursement this Period [REDACTED] 179.70
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0C</b> Amount of Each Disbursement this Period [REDACTED] 529.20
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0C</b> Amount of Each Disbursement this Period [REDACTED] 95.94
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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] 804.84
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0f</b> Amount of Each Disbursement this Period 95.94
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0c</b> Amount of Each Disbursement this Period 99.99
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0i</b> Amount of Each Disbursement this Period 127.92
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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)..... ▶

323.85

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0</b> Amount of Each Disbursement this Period 95.94
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0</b> Amount of Each Disbursement this Period 127.92
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0</b> Amount of Each Disbursement this Period 127.92
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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).....▶	351.78
<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

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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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
10			17			2016			

FEC Identification Number

C [REDACTED]  
**Transaction ID : VSG8M9TP0f**  
Amount of Each Disbursement this Period  
[REDACTED] 127.92

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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
10			17			2016			

FEC Identification Number

C [REDACTED]  
**Transaction ID : VSG8M9TP0f**  
Amount of Each Disbursement this Period  
[REDACTED] 127.92

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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
10			17			2016			

FEC Identification Number

C [REDACTED]  
**Transaction ID : VSG8M9TP0f**  
Amount of Each Disbursement this Period  
[REDACTED] 127.92

Memo Item

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

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

383.76
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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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0f</b> Amount of Each Disbursement this Period [REDACTED] 100.00
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0S</b> Amount of Each Disbursement this Period [REDACTED] 166.80
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0'</b> Amount of Each Disbursement this Period [REDACTED] 166.80
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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] 433.68
<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

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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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  
10 / 17 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TP0  
Amount of Each Disbursement this Period

[REDACTED] 33.36

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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  
10 / 17 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TP0  
Amount of Each Disbursement this Period

[REDACTED] 159.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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  
10 / 17 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TP0  
Amount of Each Disbursement this Period

[REDACTED] 95.94

Memo Item

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

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

[REDACTED] 289.20

[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

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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP0</b> Amount of Each Disbursement this Period 98.44
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP3</b> Amount of Each Disbursement this Period 69.90
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Event Supplies		Category/Type 007
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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP3</b> Amount of Each Disbursement this Period 110.97
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Event Supplies		Category/Type 007
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).....▶	279.31
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

Purpose of Disbursement  
Event 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 : VSG8M9TP3**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNZI**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 345 Boren Ave N

City  
Seattle

State  
WA

Zip Code  
98109-5306

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 : VSG8M9TP0**  
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)  
**For Our Future**

**A. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP1C

Amount of Each Disbursement this Period: 475.50

Memo Item

**B. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP1C

Amount of Each Disbursement this Period: 475.50

Memo Item

**C. Amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP1C

Amount of Each Disbursement this Period: 475.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1426.50

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP13</b> Amount of Each Disbursement this Period [REDACTED] 475.50
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP14</b> Amount of Each Disbursement this Period [REDACTED] 950.99
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP1:</b> Amount of Each Disbursement this Period [REDACTED] 475.50
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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] 1901.99
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

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  
MM / DD / YYYY  
10 / 19 / 2016

FEC Identification Number  
  
**Transaction ID : VSG8M9TP1f**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

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  
MM / DD / YYYY  
10 / 19 / 2016

FEC Identification Number  
  
**Transaction ID : VSG8M9TP17**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 345 Boren Ave N

City Seattle State WA Zip Code 98109-5306

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  
MM / DD / YYYY  
10 / 19 / 2016

FEC Identification Number  
  
**Transaction ID : VSG8M9TP1i**  
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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP1</b> Amount of Each Disbursement this Period [REDACTED] 152.55
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP1A</b> Amount of Each Disbursement this Period [REDACTED] 7.37
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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. Amazon</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 345 Boren Ave N		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP11</b> Amount of Each Disbursement this Period [REDACTED] 29.48
City Seattle	State WA	Zip Code 98109-5306
Purpose of Disbursement Office Supplies		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] 189.40
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address PO Box 619616		FEC Identification Number C <b>Transaction ID : VSG8M9TP5C</b> Amount of Each Disbursement this Period 423.60
City Dallas	State TX	
Zip Code 75261-9616	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address PO Box 619616		FEC Identification Number C <b>Transaction ID : VSG8M9TP5C</b> Amount of Each Disbursement this Period 358.10
City Dallas	State TX	
Zip Code 75261-9616	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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. American Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address PO Box 619616		FEC Identification Number C <b>Transaction ID : VSG8M9TP5C</b> Amount of Each Disbursement this Period 358.10
City Dallas	State TX	
Zip Code 75261-9616	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1139.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address PO Box 619616		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP51</b> Amount of Each Disbursement this Period [REDACTED] 783.20
City Dallas	State TX	
Zip Code 75261-9616	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address PO Box 619616		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5V</b> Amount of Each Disbursement this Period [REDACTED] 540.20
City Dallas	State TX	
Zip Code 75261-9616	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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. American Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address PO Box 619616		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP51</b> Amount of Each Disbursement this Period [REDACTED] 732.70
City Dallas	State TX	
Zip Code 75261-9616	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2056.10
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address PO Box 619616		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5</b> Amount of Each Disbursement this Period 239.10
City Dallas	State TX	
Zip Code 75261-9616	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address PO Box 619616		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5</b> Amount of Each Disbursement this Period 239.10
City Dallas	State TX	
Zip Code 75261-9616	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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. American Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address PO Box 619616		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5</b> Amount of Each Disbursement this Period 228.60
City Dallas	State TX	
Zip Code 75261-9616	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	706.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016	
Mailing Address PO Box 619616		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6</b> Amount of Each Disbursement this Period [REDACTED] 370.60	
City Dallas	State TX	Zip Code 75261-9616	Category/ Type 002
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016	
Mailing Address PO Box 619616		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6</b> Amount of Each Disbursement this Period [REDACTED] 370.60	
City Dallas	State TX	Zip Code 75261-9616	Category/ Type 002
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016	
Mailing Address PO Box 619616		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6</b> Amount of Each Disbursement this Period [REDACTED] 183.10	
City Dallas	State TX	Zip Code 75261-9616	Category/ Type 002
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 924.30
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address PO Box 619616

City  
Dallas

State  
TX

Zip Code  
75261-9616

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

MM / DD / YYYY  
10 / 19 / 2016

FEC Identification Number

C  
Transaction ID : VSG8M9TP6:  
Amount of Each Disbursement this Period  
343.60

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Unions Embroidery And Screen Printing, Inc.**

Mailing Address 123 Swiggum Rd

City  
Westby

State  
WI

Zip Code  
54667-8187

Purpose of Disbursement  
Printing - T-Shirts, No Express Advocacy

004

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2016

FEC Identification Number

C  
Transaction ID : VSG8M9TP3C  
Amount of Each Disbursement this Period  
3788.03

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

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2016

FEC Identification Number

C  
Transaction ID : VSG8M9TP6:  
Amount of Each Disbursement this Period  
144.00

Memo Item

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

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

4275.63



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6</b> Amount of Each Disbursement this Period 89.00
City Washington	State DC	
Zip Code 20002-4285	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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>B. Amtrak</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6</b> Amount of Each Disbursement this Period 348.00
City Washington	State DC	
Zip Code 20002-4285	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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. Amtrak</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6</b> Amount of Each Disbursement this Period 348.00
City Washington	State DC	
Zip Code 20002-4285	Purpose of Disbursement Travel	Memo Item <input type="checkbox"/>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	785.00
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. AP Campaigns, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 345 Huron Ave			FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNW</b>	
City Cambridge	State MA	Zip Code 02138-6830	Amount of Each Disbursement this Period [REDACTED] 22500.00	
Purpose of Disbursement Communications Consulting Services		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. Arwa, Garrett, , ,</b>			Date of Disbursement MM / DD / YYYY 10 / 11 / 2016	
Mailing Address 425 Massachusetts Ave NW Apt 309			FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ8</b>	
City Washington	State DC	Zip Code 20001-7615	Amount of Each Disbursement this Period [REDACTED] 323.29	
Purpose of Disbursement Reimbursement - Travel, Food/Beverage		Category/Type 002	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. Uber</b>			Date of Disbursement MM / DD / YYYY 10 / 11 / 2016	
Mailing Address 1455 Market St Ste 400			FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ8</b>	
City San Francisco	State CA	Zip Code 94103-1355	Amount of Each Disbursement this Period [REDACTED] 134.53	
Purpose of Disbursement Travel		Category/Type 002	Memo Item <input checked="" 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)..... ▶

[REDACTED] 22823.29

**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)  
**For Our Future**

**A. Arwa, Garrett, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 425 Massachusetts Ave NW  
Apt 309

City Washington State DC Zip Code 20001-7615

Purpose of Disbursement Reimb. - Travel, Food/Beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 13 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9T7ZE

Amount of Each Disbursement this Period: 457.47

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St  
Ste 400

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 13 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9T7ZC

Amount of Each Disbursement this Period: 182.07

Memo Item

**C. Asian Journal Publications**

Full Name (Last, First, Middle Initial)

Mailing Address 3700 W Desert Inn Rd  
Ste A

City Las Vegas State NV Zip Code 89102-8377

Purpose of Disbursement Printing Advertising - IE Not Yet Disseminated

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 12 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ8

Amount of Each Disbursement this Period: 2000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2457.47

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address PO Box 6463		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP3:</b> Amount of Each Disbursement this Period 96.64
City Carol Stream	State IL	Zip Code 60197-6463
Purpose of Disbursement Telecommunications Services		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. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address PO Box 6463		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP3:</b> Amount of Each Disbursement this Period 126.62
City Carol Stream	State IL	Zip Code 60197-6463
Purpose of Disbursement Telecommunications Services		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. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address PO Box 6463		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ:</b> Amount of Each Disbursement this Period 16213.30
City Carol Stream	State IL	Zip Code 60197-6463
Purpose of Disbursement Office Equipment		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).....▶	16436.56
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address PO Box 6463

City  
Carol Stream

State  
IL

Zip Code  
60197-6463

Purpose of Disbursement  
Telecommunications Services

**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 : VSG8M9TP3**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Attache Property Management, LLC**

Mailing Address 1800 R St NW  
NW Ste. C1

City  
Washington

State  
DC

Zip Code  
20009-1625

Purpose of Disbursement  
Rent

**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 : VSG8M9TP1V**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Battle Born Progress**

Mailing Address 2657 Windmill Pkwy  
# 619

City  
Henderson

State  
NV

Zip Code  
89074-3384

Purpose of Disbursement  
Communications Consulting Services

**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 : VSG8M9TQ1**  
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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Benny's Sports Bar, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016	
Mailing Address 3463 Fulton Rd		FEC Identification Number C [REDACTED]	
City Cleveland	State OH	Zip Code 44109-1454	Transaction ID : <b>VSG8M9TP4</b>
Purpose of Disbursement Room Rental and Catering for Event		Category/Type 007	Amount of Each Disbursement this Period 700.00
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. Blanco, Artie, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016	
Mailing Address 9342 Summer Rain Dr.		FEC Identification Number C [REDACTED]	
City Las Vegas	State NV	Zip Code 89134	Transaction ID : <b>VSG8M9TQ7</b>
Purpose of Disbursement Reimbursement - Food for Event		Category/Type 007	Amount of Each Disbursement this Period 2005.00
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. Nuevo Vallarta Hot Truck</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016	
Mailing Address 4181 Pioneer Ave		FEC Identification Number C [REDACTED]	
City Las Vegas	State NV	Zip Code 89102-8225	Transaction ID : <b>VSG8M9TQ7</b>
Purpose of Disbursement Food for Event		Category/Type 007	Amount of Each Disbursement this Period 2005.00
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).....▶	2705.00
<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)		PAGE 55 OF 289			
	<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Blanco, Artie, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016	
Mailing Address 9342 Summer Rain Dr.		FEC Identification Number C [REDACTED]	
City Las Vegas	State NV	Zip Code 89134	<b>Transaction ID : VSG8M9TQ7!</b>
Purpose of Disbursement Reimbursement - Lodging, Food for Events		001	Amount of Each Disbursement this Period 1455.17
Candidate Name		Category/Type	<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. Costco</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016	
Mailing Address 222 S Martin L King Blvd		FEC Identification Number C [REDACTED]	
City Las Vegas	State NV	Zip Code 89106-4305	<b>Transaction ID : VSG8M9TQ7C</b>
Purpose of Disbursement Food for Event		007	Amount of Each Disbursement this Period 214.90
Candidate Name		Category/Type	<input checked="" 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. Costco</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016	
Mailing Address 222 S Martin L King Blvd		FEC Identification Number C [REDACTED]	
City Las Vegas	State NV	Zip Code 89106-4305	<b>Transaction ID : VSG8M9TQ7</b>
Purpose of Disbursement Food for Event		007	Amount of Each Disbursement this Period 598.80
Candidate Name		Category/Type	<input checked="" 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).....▶	1455.17
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Expedia</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address 333 108Th Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ7I</b> Amount of Each Disbursement this Period [REDACTED] 262.04
City Bellevue	State WA	Zip Code 98004-5703
Purpose of Disbursement Lodging		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Nuevo Vallarta Hot Truck</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address 4181 Pioneer Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ7I</b> Amount of Each Disbursement this Period [REDACTED] 247.00
City Las Vegas	State NV	Zip Code 89102-8225
Purpose of Disbursement Food for Event		Category/ Type 007
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. Blanco, Artie, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address 9342 Summer Rain Dr.		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ7I</b> Amount of Each Disbursement this Period [REDACTED] 661.69
City Las Vegas	State NV	Zip Code 89134
Purpose of Disbursement Reimbursement - Travel, Food for Events		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] 661.69
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Costco**

Mailing Address 222 S Martin L King Blvd

City  
Las Vegas

State  
NV

Zip Code  
89106-4305

Purpose of Disbursement  
Food for Event

007

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TQ7I

Amount of Each Disbursement this Period

[REDACTED] 423.04

Memo Item

Full Name (Last, First, Middle Initial)

**B. BlueLabs, LLC**

Mailing Address 700 14Th St NW  
Frnt 2

City  
Washington

State  
DC

Zip Code  
20005-2016

Purpose of Disbursement  
Research Services

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TP20

Amount of Each Disbursement this Period

[REDACTED] 12500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BlueLabs, LLC**

Mailing Address 700 14Th St NW  
Frnt 2

City  
Washington

State  
DC

Zip Code  
20005-2016

Purpose of Disbursement  
Research Services

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TP2

Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

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

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

[REDACTED] 17500.00

[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)  
**For Our Future**

**A. Bouchard Gold Communications**

Full Name (Last, First, Middle Initial)

Mailing Address 1617 W 6Th St  
Ste B

City Austin State TX Zip Code 78703-5080

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 04 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQY

Amount of Each Disbursement this Period: 682.00

Memo Item

**B. Bouchard Gold Communications**

Full Name (Last, First, Middle Initial)

Mailing Address 1617 W 6Th St  
Ste B

City Austin State TX Zip Code 78703-5080

Purpose of Disbursement Photography Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 04 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQZ!

Amount of Each Disbursement this Period: 3000.00

Memo Item

**C. Bright House Networks**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 31710

City Tampa State FL Zip Code 33631-3710

Purpose of Disbursement Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 07 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP3!

Amount of Each Disbursement this Period: 569.76

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4251.76

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Caesars Party Rentals**

Mailing Address 275 Boulder Hwy #14

City Las Vegas State NV Zip Code 89122

Purpose of Disbursement  
Event Equipment Rental

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 : VSG8M9TP3C**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAL KAR LLC**

Mailing Address 3245 E 5Th Ave

City Columbus State OH Zip Code 43219-2807

Purpose of Disbursement  
Rent

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 : VSG8M9TP1X**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. CDW Direct LLC**

Mailing Address PO Box 75723

City Chicago State IL Zip Code 60675-5723

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNN**  
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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Centaur North Strategies</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address PO Box 1474		FEC Identification Number C [REDACTED]
City Whittier	State CA	Zip Code 90609-1474
Purpose of Disbursement Direct Mail Services - No Express Advocacy		Category/Type 004
Candidate Name		Transaction ID : VSG8M9TQZ
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Amount of Each Disbursement this Period 108187.00
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. Centaur North Strategies</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address PO Box 1474		FEC Identification Number C [REDACTED]
City Whittier	State CA	Zip Code 90609-1474
Purpose of Disbursement Printing - Direct Mail, IE Not Yet Disseminated		Category/Type 004
Candidate Name		Transaction ID : VSG8M9TMBI
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Amount of Each Disbursement this Period 5909.27
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. Centaur North Strategies</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address PO Box 1474		FEC Identification Number C [REDACTED]
City Whittier	State CA	Zip Code 90609-1474
Purpose of Disbursement Printing - Direct Mail, IE Not Yet Disseminated		Category/Type 004
Candidate Name		Transaction ID : VSG8M9TME
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Amount of Each Disbursement this Period 2462.20
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).....▶	116558.47
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Centaur North Strategies</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address PO Box 1474		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TMB</b>
City Whittier	State CA	Zip Code 90609-1474
Purpose of Disbursement Printing - Direct Mail, IE Not Yet Disseminated		004 Category/Type
Candidate Name		Amount of Each Disbursement this Period 1477.31
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. Centaur North Strategies</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address PO Box 1474		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TMBI</b>
City Whittier	State CA	Zip Code 90609-1474
Purpose of Disbursement Printing - Direct Mail, IE Not Yet Disseminated		004 Category/Type
Candidate Name		Amount of Each Disbursement this Period 9921.60
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. Centaur North Strategies</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address PO Box 1474		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TME</b>
City Whittier	State CA	Zip Code 90609-1474
Purpose of Disbursement Printing - Direct Mail, IE Not Yet Disseminated		004 Category/Type
Candidate Name		Amount of Each Disbursement this Period 6614.40
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:		

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

18013.31

**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)  
**For Our Future**

**A. Chandler Park LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1700 London Rd  
Ste 2A

City Cleveland State OH Zip Code 44112-1200

Purpose of Disbursement Room Rental for Event

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 07 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP47

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Chandler Park LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1700 London Rd  
Ste 2A

City Cleveland State OH Zip Code 44112-1200

Purpose of Disbursement Room Rental for Event

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP48

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. Chapman, Jeremiah, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4426 Meridian Dr

City Charlotte State NC Zip Code 28216-2320

Purpose of Disbursement Field Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ8

Amount of Each Disbursement this Period: 5000.00

Memo Item

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

**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)  
**For Our Future**

**A. City Of Miami Garden**

Full Name (Last, First, Middle Initial)

Mailing Address 3000 NW 199Th St

City Miami Gardens State FL Zip Code 33056-1703

Purpose of Disbursement Room Rental for Event

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP4#

Amount of Each Disbursement this Period: 231.00

Memo Item

**B. City Of Orlando**

Full Name (Last, First, Middle Initial)

Mailing Address 595 N Primrose Dr

City Orlando State FL Zip Code 32803-5014

Purpose of Disbursement Room Rental for Event

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP4#

Amount of Each Disbursement this Period: 302.35

Memo Item

**C. CKB Products**

Full Name (Last, First, Middle Initial)

Mailing Address 8900 Directors Row

City Dallas State TX Zip Code 75247-5310

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNZ

Amount of Each Disbursement this Period: 200.81

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 734.16

**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)  
**For Our Future**

**A. Clear Channel Outdoor**

Full Name (Last, First, Middle Initial)

Mailing Address 5333 Old Winter Garden Rd

City Orlando State FL Zip Code 32811-1520

Purpose of Disbursement Advertising, IE Disclosed on Schedule E

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TD4

Amount of Each Disbursement this Period: -3473.00

Memo Item

**B. Columbus Hospitality, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 33 E Nationwide Blvd

City Columbus State OH Zip Code 43215-2512

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 06 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP1Y

Amount of Each Disbursement this Period: 2700.00

Memo Item

**C. D. Flowers DJ**

Full Name (Last, First, Middle Initial)

Mailing Address 1615 Burnham St

City Orlando State FL Zip Code 32808-6011

Purpose of Disbursement Entertainment for Event

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP3I

Amount of Each Disbursement this Period: 300.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ -473.00

**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)  
**For Our Future**

**A. Damra, Alex, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 145 E Harmon Ave  
Unit 38609

City Las Vegas State NV Zip Code 89109-4504

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 07 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ6.

Amount of Each Disbursement this Period: 3000.00

Memo Item

**B. Data Farm Consulting, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 12932 W Glacier Dr

City Evansville State WI Zip Code 53536-9389

Purpose of Disbursement Data Research Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNW

Amount of Each Disbursement this Period: 6250.00

Memo Item

**C. Delta**

Full Name (Last, First, Middle Initial)

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 04 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP6i

Amount of Each Disbursement this Period: 415.10

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9665.10

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Delta</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address 1030 Delta Blvd		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6</b> Amount of Each Disbursement this Period [REDACTED] 435.20
City Atlanta	State GA	Zip Code 30354-1989
Purpose of Disbursement Travel	Category/Type 002	
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. Delta</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address 1030 Delta Blvd		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6</b> Amount of Each Disbursement this Period [REDACTED] 483.20
City Atlanta	State GA	Zip Code 30354-1989
Purpose of Disbursement Travel	Category/Type 002	
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. Delta</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 1030 Delta Blvd		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6</b> Amount of Each Disbursement this Period [REDACTED] 489.60
City Atlanta	State GA	Zip Code 30354-1989
Purpose of Disbursement Travel	Category/Type 002	
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] 1408.00
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Delta</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 1030 Delta Blvd		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6C</b> Amount of Each Disbursement this Period [REDACTED] 489.60
City Atlanta	State GA	Zip Code 30354-1989
Purpose of Disbursement Travel	Category/Type 002	
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. Delta</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 1030 Delta Blvd		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6C</b> Amount of Each Disbursement this Period [REDACTED] 346.60
City Atlanta	State GA	Zip Code 30354-1989
Purpose of Disbursement Travel	Category/Type 002	
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. Dhir, Nimit, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address 2140 E Pebble Rd Ste 260		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQB</b> Amount of Each Disbursement this Period [REDACTED] 1671.90
City Las Vegas	State NV	Zip Code 89123-3237
Purpose of Disbursement Reimbursement - Lodging	Category/Type 002	
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] 2508.10
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. AirBNB**

Mailing Address 888 Brannan St

City San Francisco State CA Zip Code 94103-4928

Purpose of Disbursement  
Lodging

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
10		07		2016

FEC Identification Number

C
Transaction ID : VSG8M9TQB
Amount of Each Disbursement this Period
1509.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Drinkmore Delivery, Inc.**

Mailing Address 7595 Rickenbacker Dr

City Gaithersburg State MD Zip Code 20879-4808

Purpose of Disbursement  
Water for Office

001
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
10		11		2016

FEC Identification Number

C
Transaction ID : VSG8M9TP3C
Amount of Each Disbursement this Period
131.51

Memo Item

Full Name (Last, First, Middle Initial)

**C. Duke Energy**

Mailing Address PO Box 1004

City Charlotte State NC Zip Code 28201-1004

Purpose of Disbursement  
Utilities

001
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
10		11		2016

FEC Identification Number

C
Transaction ID : VSG8M9TP3
Amount of Each Disbursement this Period
127.19

Memo Item

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

258.70
--------

**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)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. El Vaquero Mexican Restaurant**

Mailing Address 3230 Olentangy River Rd

City Columbus State OH Zip Code 43202-1519

Purpose of Disbursement  
Catering

001  
 002  
 003  
 004  
 005  
 006  
 007  
 008  
 009  
 010  
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 Y  
10 / 05 / 2016

FEC Identification Number

C   
**Transaction ID : VSG8M9TP3I**  
Amount of Each Disbursement this Period  
 200.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. El Vaquero Mexican Restaurant**

Mailing Address 3230 Olentangy River Rd

City Columbus State OH Zip Code 43202-1519

Purpose of Disbursement  
Catering

001  
 002  
 003  
 004  
 005  
 006  
 007  
 008  
 009  
 010  
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 Y  
10 / 13 / 2016

FEC Identification Number

C   
**Transaction ID : VSG8M9TP3J**  
Amount of Each Disbursement this Period  
 434.75

Memo Item

Full Name (Last, First, Middle Initial)

**C. Enterprise Rent-A-Car**

Mailing Address 200 W Beltline Hwy

City Madison State WI Zip Code 53713-2685

Purpose of Disbursement  
Travel

001  
 002  
 003  
 004  
 005  
 006  
 007  
 008  
 009  
 010  
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 Y  
10 / 14 / 2016

FEC Identification Number

C   
**Transaction ID : VSG8M9TP7I**  
Amount of Each Disbursement this Period  
 3146.58

Memo Item

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

3781.33

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Enterprise Rent-A-Car</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address 200 W Beltline Hwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP77</b>
City Madison	State WI	Zip Code 53713-2685
Purpose of Disbursement Travel	Candidate Name	Amount of Each Disbursement this Period 2900.00
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 002	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Enterprise Rent-A-Car</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address 200 W Beltline Hwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP78</b>
City Madison	State WI	Zip Code 53713-2685
Purpose of Disbursement Travel	Candidate Name	Amount of Each Disbursement this Period 3.48
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 002	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Enterprise Rent-A-Car</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 200 W Beltline Hwy		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP7!</b>
City Madison	State WI	Zip Code 53713-2685
Purpose of Disbursement Travel	Candidate Name	Amount of Each Disbursement this Period 2033.44
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 002	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4936.92
<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)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Evans & Katz, LLC**

Mailing Address PO Box 75357

City  
Washington

State  
DC

Zip Code  
20013-0357

Purpose of Disbursement  
Compliance Services

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
10			03			2016			

FEC Identification Number

C [REDACTED]  
**Transaction ID : VSG8M9TNW**  
Amount of Each Disbursement this Period  
[REDACTED] 13401.62

Memo Item

Full Name (Last, First, Middle Initial)

**B. Extra Extras, Inc.**

Mailing Address 151 E Los Torritos St

City  
Weslaco

State  
TX

Zip Code  
78596-5333

Purpose of Disbursement  
Actual Cost for Canvassing Services from 10/1-10/2, IE Disclosed on Sched. E

004

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
10			01			2016			

FEC Identification Number

C [REDACTED]  
**Transaction ID : VSG8M9VK51**  
Amount of Each Disbursement this Period  
[REDACTED] -9990.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Extra Extras, Inc.**

Mailing Address 151 E Los Torritos St

City  
Weslaco

State  
TX

Zip Code  
78596-5333

Purpose of Disbursement  
Actual Cost for Canvassing Services for 10/3-10/9, IE Disclosed on Sched. E

004

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
10			03			2016			

FEC Identification Number

C [REDACTED]  
**Transaction ID : VSG8M9TRG**  
Amount of Each Disbursement this Period  
[REDACTED] -8347.50

Memo Item

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

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

[REDACTED]	-4935.88
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[REDACTED]	
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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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Extra Extras, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 151 E Los Torritos St				
City Weslaco	State TX	Zip Code 78596-5333	FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TRG</b> Amount of Each Disbursement this Period [REDACTED] -8347.50	
Purpose of Disbursement Actual Cost for Canvassing Services for 10/3-10/9, IE Disclosed on Sched. E		004	Memo Item <input type="checkbox"/>	
Candidate Name		Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Extra Extras, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 151 E Los Torritos St				
City Weslaco	State TX	Zip Code 78596-5333	FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TRG</b> Amount of Each Disbursement this Period [REDACTED] -8347.50	
Purpose of Disbursement Actual Cost for Canvassing Services for 10/3-10/9, IE Disclosed on Sched. E		004	Memo Item <input type="checkbox"/>	
Candidate Name		Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Extra Extras, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 151 E Los Torritos St				
City Weslaco	State TX	Zip Code 78596-5333	FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TRG</b> Amount of Each Disbursement this Period [REDACTED] -8347.50	
Purpose of Disbursement Actual Cost for Canvassing Services for 10/3-10/9, IE Disclosed on Sched. E		004	Memo Item <input type="checkbox"/>	
Candidate Name		Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

[REDACTED] -25042.50
[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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Extra Extras, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 10 / 2016	
Mailing Address 151 E Los Torritos St				
City Weslaco	State TX	Zip Code 78596-5333	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Actual Cost for Canvassing Services for 10/10-10/16, IE Disclosed on Sched. E			Transaction ID : VSG8M9TRG	
Candidate Name			Amount of Each Disbursement this Period [REDACTED] -9022.50	
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. Extra Extras, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 10 / 2016	
Mailing Address 151 E Los Torritos St				
City Weslaco	State TX	Zip Code 78596-5333	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Actual Cost for Canvassing Services for 10/10-10/16, IE Disclosed on Sched. E			Transaction ID : VSG8M9TRG	
Candidate Name			Amount of Each Disbursement this Period [REDACTED] -9022.50	
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. Extra Extras, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 10 / 2016	
Mailing Address 151 E Los Torritos St				
City Weslaco	State TX	Zip Code 78596-5333	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Actual Cost for Canvassing Services for 10/10-10/16, IE Disclosed on Sched. E			Transaction ID : VSG8M9TRG	
Candidate Name			Amount of Each Disbursement this Period [REDACTED] -9022.50	
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] -27067.50
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Extra Extras, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2016
Mailing Address 151 E Los Torritos St		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TRG</b> Amount of Each Disbursement this Period -9022.50
City Weslaco	State TX	Zip Code 78596-5333
Purpose of Disbursement Actual Cost for Canvassing Services for 10/10-10/16, IE Disclosed on Sched. E		Category/Type 004
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. Extra Extras, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address 151 E Los Torritos St		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TRG</b> Amount of Each Disbursement this Period 11511.69
City Weslaco	State TX	Zip Code 78596-5333
Purpose of Disbursement Canvassing Services - IE Not Yet Disseminated		Category/Type 004
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. Extra Extras, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 151 E Los Torritos St		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TRG</b> Amount of Each Disbursement this Period -3582.00
City Weslaco	State TX	Zip Code 78596-5333
Purpose of Disbursement Actual Cost for Canvassing Services from 10/17-10/19, IE Disclosed on Sched. E		Category/Type 004
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).....▶	-1092.81
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Extra Extras, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 19 / 2016	
Mailing Address 151 E Los Torritos St				
City Weslaco	State TX	Zip Code 78596-5333		
Purpose of Disbursement Actual Cost for Canvassing Services from 10/17-10/19, IE Disclosed on Sched. E			004	
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	Memo Item <input type="checkbox"/>			

FEC Identification Number  
C [REDACTED]  
**Transaction ID : VSG8M9TRG**  
Amount of Each Disbursement this Period  
[REDACTED] -688.69

Full Name (Last, First, Middle Initial) <b>B. Extra Extras, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 19 / 2016	
Mailing Address 151 E Los Torritos St				
City Weslaco	State TX	Zip Code 78596-5333		
Purpose of Disbursement Actual Cost for Canvassing Services from 10/17-10/19, IE Disclosed on Sched. E			004	
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	Memo Item <input type="checkbox"/>			

FEC Identification Number  
C [REDACTED]  
**Transaction ID : VSG8M9TRG**  
Amount of Each Disbursement this Period  
[REDACTED] -1567.13

Full Name (Last, First, Middle Initial) <b>C. Extra Extras, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 19 / 2016	
Mailing Address 151 E Los Torritos St				
City Weslaco	State TX	Zip Code 78596-5333		
Purpose of Disbursement Actual Cost for Canvassing Services from 10/17-10/19, IE Disclosed on Sched. E			004	
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	Memo Item <input type="checkbox"/>			

FEC Identification Number  
C [REDACTED]  
**Transaction ID : VSG8M9TRG**  
Amount of Each Disbursement this Period  
[REDACTED] -3582.00

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] -5837.82
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Extra Extras, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 19 / 2016	
Mailing Address 151 E Los Torritos St				
City Weslaco	State TX	Zip Code 78596-5333	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Actual Cost for Canvassing Services from 10/17-10/19, IE Disclosed on Sched E			004	Transaction ID : VSG8M9TRG
Candidate Name			Amount of Each Disbursement this Period -3751.16	
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. Extra Extras, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 19 / 2016	
Mailing Address 151 E Los Torritos St				
City Weslaco	State TX	Zip Code 78596-5333	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Actual Cost for Canvassing Services from 10/17-10/19, IE Disclosed on Sched E			004	Transaction ID : VSG8M9TRGI
Candidate Name			Amount of Each Disbursement this Period -3751.16	
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. Faith Organizing Alliance</b>			Date of Disbursement MM / DD / YYYY 10 / 18 / 2016	
Mailing Address 2446 Revere St				
City North Las Vegas	State NV	Zip Code 89030-3824	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Room Rental for Event			007	Transaction ID : VSG8M9TP4I
Candidate Name			Amount of Each Disbursement this Period 683.33	
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).....▶	-6818.99
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 1612 K St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP2:</b> Amount of Each Disbursement this Period [REDACTED] 34.50	
City Washington	State DC	Zip Code 20006-2802	Category/ Type 001
Purpose of Disbursement Shipping		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. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 1612 K St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP2:</b> Amount of Each Disbursement this Period [REDACTED] 34.50	
City Washington	State DC	Zip Code 20006-2802	Category/ Type 001
Purpose of Disbursement Shipping		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. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 1612 K St NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP2:</b> Amount of Each Disbursement this Period [REDACTED] 34.50	
City Washington	State DC	Zip Code 20006-2802	Category/ Type 001
Purpose of Disbursement Shipping		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:		

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

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

[REDACTED] 103.50
[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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1612 K St NW		FEC Identification Number C <b>Transaction ID : VSG8M9TP2f</b> Amount of Each Disbursement this Period 34.50
City Washington	State DC	
Zip Code 20006-2802		Memo Item <input type="checkbox"/>
Purpose of Disbursement Shipping	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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1612 K St NW		FEC Identification Number C <b>Transaction ID : VSG8M9TP2f</b> Amount of Each Disbursement this Period 34.50
City Washington	State DC	
Zip Code 20006-2802		Memo Item <input type="checkbox"/>
Purpose of Disbursement Shipping	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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1612 K St NW		FEC Identification Number C <b>Transaction ID : VSG8M9TP2f</b> Amount of Each Disbursement this Period 34.50
City Washington	State DC	
Zip Code 20006-2802		Memo Item <input type="checkbox"/>
Purpose of Disbursement Shipping	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) ▼	

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

103.50

**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)  
**For Our Future**

**A. Fedex Office**

Full Name (Last, First, Middle Initial)

Mailing Address 1612 K St NW

City Washington State DC Zip Code 20006-2802

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP2

Amount of Each Disbursement this Period: 34.50

Memo Item

**B. Fedex Office**

Full Name (Last, First, Middle Initial)

Mailing Address 1612 K St NW

City Washington State DC Zip Code 20006-2802

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP2

Amount of Each Disbursement this Period: 34.50

Memo Item

**C. Fedex Office**

Full Name (Last, First, Middle Initial)

Mailing Address 1612 K St NW

City Washington State DC Zip Code 20006-2802

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP2

Amount of Each Disbursement this Period: 34.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 103.50

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1612 K St NW		FEC Identification Number C <b>Transaction ID : VSG8M9TP2C</b> Amount of Each Disbursement this Period 34.50
City Washington	State DC	
Zip Code 20006-2802	Purpose of Disbursement Shipping	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. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1612 K St NW		FEC Identification Number C <b>Transaction ID : VSG8M9TP2C</b> Amount of Each Disbursement this Period 34.50
City Washington	State DC	
Zip Code 20006-2802	Purpose of Disbursement Shipping	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. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1612 K St NW		FEC Identification Number C <b>Transaction ID : VSG8M9TP2C</b> Amount of Each Disbursement this Period 34.50
City Washington	State DC	
Zip Code 20006-2802	Purpose of Disbursement Shipping	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)..... ▶

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

103.50



**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1612 K St NW		FEC Identification Number C [ ] <b>Transaction ID : VSG8M9TP2f</b> Amount of Each Disbursement this Period [ ] 25.75
City Washington	State DC	Zip Code 20006-2802
Purpose of Disbursement Shipping		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. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1612 K St NW		FEC Identification Number C [ ] <b>Transaction ID : VSG8M9TP2c</b> Amount of Each Disbursement this Period [ ] 22.25
City Washington	State DC	Zip Code 20006-2802
Purpose of Disbursement Shipping		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. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1612 K St NW		FEC Identification Number C [ ] <b>Transaction ID : VSG8M9TP2i</b> Amount of Each Disbursement this Period [ ] 25.75
City Washington	State DC	Zip Code 20006-2802
Purpose of Disbursement Shipping		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).....▶	[ ] 73.75
<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)  
**For Our Future**

**A. Fedex Office**

Full Name (Last, First, Middle Initial)

Mailing Address 1612 K St NW

City Washington State DC Zip Code 20006-2802

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP2J

Amount of Each Disbursement this Period: 25.75

Memo Item

**B. Fedex Office**

Full Name (Last, First, Middle Initial)

Mailing Address 1612 K St NW

City Washington State DC Zip Code 20006-2802

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP2K

Amount of Each Disbursement this Period: 9.75

Memo Item

**C. Fedex Office**

Full Name (Last, First, Middle Initial)

Mailing Address 1612 K St NW

City Washington State DC Zip Code 20006-2802

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP2I

Amount of Each Disbursement this Period: 9.75

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 45.25

**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)  
**For Our Future**

**A. Fedex Office**

Full Name (Last, First, Middle Initial)

Mailing Address 1612 K St NW

City Washington State DC Zip Code 20006-2802

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP2F

Amount of Each Disbursement this Period: 9.75

Memo Item

**B. Fedex Office**

Full Name (Last, First, Middle Initial)

Mailing Address 1612 K St NW

City Washington State DC Zip Code 20006-2802

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP2F

Amount of Each Disbursement this Period: 9.75

Memo Item

**C. Fedex Office**

Full Name (Last, First, Middle Initial)

Mailing Address 1612 K St NW

City Washington State DC Zip Code 20006-2802

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP2F

Amount of Each Disbursement this Period: 9.75

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 29.25

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Fieldworks LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016	
Mailing Address PO Box 9897		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TRFI</b>	
City Washington	State DC	Zip Code 20016-8897	Amount of Each Disbursement this Period [REDACTED] 42500.00
Purpose of Disbursement Administrative Fee for Canvassing Services		Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Fieldworks LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016	
Mailing Address PO Box 9897		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TRFI</b>	
City Washington	State DC	Zip Code 20016-8897	Amount of Each Disbursement this Period [REDACTED] 7500.00
Purpose of Disbursement Administrative Fee for Canvassing Services		Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Fieldworks LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016	
Mailing Address PO Box 9897		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TRFI</b>	
City Washington	State DC	Zip Code 20016-8897	Amount of Each Disbursement this Period [REDACTED] 20666.67
Purpose of Disbursement Administrative Fee for Canvassing Services		Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 70666.67
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Fieldworks LLC**

Mailing Address PO Box 9897

City  
Washington

State  
DC

Zip Code  
20016-8897

Purpose of Disbursement  
Canvassing Services - IE Not Yet Disseminated

004

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
10			14			2016			

FEC Identification Number

C  
Transaction ID : VSG8M9TRTI  
Amount of Each Disbursement this Period

543923.74

Memo Item

Full Name (Last, First, Middle Initial)

**B. For Our Future Action Fund**

Mailing Address 888 16Th St NW  
Ste 650

City  
Washington

State  
DC

Zip Code  
20006-4112

Purpose of Disbursement  
Administrative Staff Salaries and Benefits

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
10			06			2016			

FEC Identification Number

C  
Transaction ID : VSG8M9TR0V  
Amount of Each Disbursement this Period

77224.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. For Our Future Action Fund**

Mailing Address 888 16Th St NW  
Ste 650

City  
Washington

State  
DC

Zip Code  
20006-4112

Purpose of Disbursement  
Administrative Staff Salaries and Benefits

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
10			06			2016			

FEC Identification Number

C  
Transaction ID : VSG8M9TR0  
Amount of Each Disbursement this Period

233140.03

Memo Item

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

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

854287.77

**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)  
**For Our Future**

**A. FPL**

Full Name (Last, First, Middle Initial)

Mailing Address General Mail Facility

City Miami State FL Zip Code 33188-0001

Purpose of Disbursement Utilities

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP3E

Amount of Each Disbursement this Period: 217.38

Memo Item

**B. Frontier Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 7001 Tower Rd

City Denver State CO Zip Code 80249-7312

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 06 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP6E

Amount of Each Disbursement this Period: 126.20

Memo Item

**C. Frontier Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 7001 Tower Rd

City Denver State CO Zip Code 80249-7312

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 07 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP6I

Amount of Each Disbursement this Period: 151.10

Memo Item

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

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

494.68

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Frontier Airlines</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 7001 Tower Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP6c</b> Amount of Each Disbursement this Period [REDACTED] 188.10
City Denver	State CO	Zip Code 80249-7312
Purpose of Disbursement Travel		Category/ Type 002
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. Full Circle Production Team</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address 6659 N Bourbon St		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP3F</b> Amount of Each Disbursement this Period [REDACTED] 2658.00
City Milwaukee	State WI	Zip Code 53224-5151
Purpose of Disbursement Entertainment for Event		Category/ Type 007
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. Gateway Retail Center LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2016
Mailing Address 5238-6 Norwood Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP1:</b> Amount of Each Disbursement this Period [REDACTED] 880.16
City Jacksonville	State FL	Zip Code 32208-5005
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: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3726.26
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Giant Eagle</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2016
Mailing Address 15919 Pearl Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5t</b> Amount of Each Disbursement this Period [REDACTED] 750.00
City Strongsville	State OH	Zip Code 44136-6031
Purpose of Disbursement Prepaid Gas Cards		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	

Full Name (Last, First, Middle Initial) <b>B. Gilbert &amp; Wolfand, PC</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 2201 Wisconsin Ave NW		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNW</b> Amount of Each Disbursement this Period [REDACTED] 11625.00
City Washington	State DC	Zip Code 20007-4105
Purpose of Disbursement Accounting Services		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. GM Networking, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 309 N Royal St		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP3'</b> Amount of Each Disbursement this Period [REDACTED] 1000.00
City Alexandria	State VA	Zip Code 22314-2628
Purpose of Disbursement Event Planning Services		Category/ Type 007
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] 13375.00
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Goldman, Jerrold, , ,</b>			Date of Disbursement MM / DD / YYYY 10 / 14 / 2016	
Mailing Address 3005 W Capitol Dr Apt 1			FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQA</b>	
City Milwaukee	State WI	Zip Code 53216-2655	Amount of Each Disbursement this Period [REDACTED] 2068.00	
Purpose of Disbursement Field Consulting Services		Category/ Type 001	Memo Item <input type="checkbox"/>	
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) ▼			

Full Name (Last, First, Middle Initial) <b>B. Gongwer</b>			Date of Disbursement MM / DD / YYYY 10 / 07 / 2016	
Mailing Address 17 S High St Ste 630			FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP2Y</b>	
City Columbus	State OH	Zip Code 43215-3413	Amount of Each Disbursement this Period [REDACTED] 250.00	
Purpose of Disbursement Subscription		Category/ Type 001	Memo Item <input type="checkbox"/>	
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) ▼			

Full Name (Last, First, Middle Initial) <b>C. Grassroots Campaigns, Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address PO Box 120557			FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TR1:</b>	
City Boston	State MA	Zip Code 02112-0557	Amount of Each Disbursement this Period [REDACTED] -630.00	
Purpose of Disbursement Actual Cost for Canvassing Services for 10/3-10/9, IE Disclosed on Sched. E		Category/ Type 004	Memo Item <input type="checkbox"/>	
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) ▼			

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

[REDACTED] 1688.00

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Grassroots Campaigns, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address PO Box 120557		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TR1f</b> Amount of Each Disbursement this Period [REDACTED] -1890.00
City Boston	State MA	Zip Code 02112-0557
Purpose of Disbursement Actual Cost for Canvassing Services for 10/3-10/9, IE Disclosed on Sched. E		Category/Type 004
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. Grassroots Campaigns, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address PO Box 120557		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TR1f</b> Amount of Each Disbursement this Period [REDACTED] -5764.96
City Boston	State MA	Zip Code 02112-0557
Purpose of Disbursement Actual Cost for Canvassing Services for 10/3-10/9, IE Disclosed on Sched. E		Category/Type 004
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. Grassroots Campaigns, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address PO Box 120557		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TR1f</b> Amount of Each Disbursement this Period [REDACTED] -5764.96
City Boston	State MA	Zip Code 02112-0557
Purpose of Disbursement Actual Cost for Canvassing Services for 10/3-10/9, IE Disclosed on Sched. E		Category/Type 004
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] -13419.92

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Grassroots Campaigns, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address PO Box 120557		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TR1/</b> Amount of Each Disbursement this Period [REDACTED] -724.96
City Boston	State MA	Zip Code 02112-0557
Purpose of Disbursement Actual Cost for Canvassing Services for 10/3-10/9, IE Disclosed on Sched. E		Category/Type 004
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. Grassroots Campaigns, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address PO Box 120557		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TR1C</b> Amount of Each Disbursement this Period [REDACTED] -724.96
City Boston	State MA	Zip Code 02112-0557
Purpose of Disbursement Actual Cost for Canvassing Services for 10/3-10/9, IE Disclosed on Sched. E		Category/Type 004
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. Grassroots Campaigns, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address PO Box 120557		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TRV</b> Amount of Each Disbursement this Period [REDACTED] 698496.34
City Boston	State MA	Zip Code 02112-0557
Purpose of Disbursement Canvassing Services - IE Not Yet Disseminated		Category/Type 004
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] 697046.42
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. GRSG Company</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 1701 Pennsylvania Ave NW Ste 300		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TRV:</b> Amount of Each Disbursement this Period 216641.00
City Washington	State DC	Zip Code 20006-5813
Purpose of Disbursement Canvassing Services - IE Not Yet Disseminated		Category/Type 004
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. Handy Rentals</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 2035 Bruton Blvd		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP3F</b> Amount of Each Disbursement this Period 1105.21
City Orlando	State FL	Zip Code 32805-5142
Purpose of Disbursement Event Equipment Rental		Category/Type 007
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. Hirestrategy</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address 7076 Solutions Ctr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP11</b> Amount of Each Disbursement this Period 757.37
City Chicago	State IL	Zip Code 60677-7000
Purpose of Disbursement Payroll - Temp Services		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)..... ▶

218503.58

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Hofer, Devin, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address 13330 W Bluemound Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ8'</b> Amount of Each Disbursement this Period 1772.00
City Elm Grove	State WI	Zip Code 53122-2536
Purpose of Disbursement Field Consulting Services		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. Holiday Inn Capitol Square Columbus</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address 175 E Town St		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5C</b> Amount of Each Disbursement this Period 1433.85
City Columbus	State OH	Zip Code 43215-4609
Purpose of Disbursement Lodging		Category/ Type 002
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. Holiday Inn Hotel And Suites</b>		Date of Disbursement MM / DD / YYYY 10 / 13 / 2016
Mailing Address 1109 Fourier Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5I</b> Amount of Each Disbursement this Period 2078.25
City Madison	State WI	Zip Code 53717-1926
Purpose of Disbursement Lodging		Category/ Type 002
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)..... ▶

5284.10

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City  
Dallas

State  
TX

Zip Code  
75240-1019

Purpose of Disbursement  
Lodging

**002**

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : VSG8M9TP4I**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City  
Dallas

State  
TX

Zip Code  
75240-1019

Purpose of Disbursement  
Lodging

**002**

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : VSG8M9TP4J**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City  
Dallas

State  
TX

Zip Code  
75240-1019

Purpose of Disbursement  
Lodging

**002**

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : VSG8M9TP4I**  
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)  
**For Our Future**

Full Name (Last, First, Middle Initial)  
**A. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement Lodging  
Candidate Name

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

Date of Disbursement: 10 / 04 / 2016

FEC Identification Number: C  
Transaction ID : VSG8M9TP4I  
Amount of Each Disbursement this Period: 476.96

Memo Item

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

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement Lodging  
Candidate Name

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

Date of Disbursement: 10 / 04 / 2016

FEC Identification Number: C  
Transaction ID : VSG8M9TP4I  
Amount of Each Disbursement this Period: 362.94

Memo Item

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

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement Lodging  
Candidate Name

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

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C  
Transaction ID : VSG8M9TP4I  
Amount of Each Disbursement this Period: 153.04

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 992.94

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging

**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 : VSG8M9TP4C**  
Amount of Each Disbursement this Period  
**362.94**

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging

**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 : VSG8M9TP4F**  
Amount of Each Disbursement this Period  
**141.74**

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging

**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 : VSG8M9TP4:**  
Amount of Each Disbursement this Period  
**179.79**

Memo Item

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

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

**684.47**



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging

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 : VSG8M9TP41**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging

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 : VSG8M9TP4V**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging

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 : VSG8M9TP41**  
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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging

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 : VSG8M9TP4**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging

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 : VSG8M9TP4**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging

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 : VSG8M9TP4;**  
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)						PAGE 99 OF 289		
	<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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Hotels.Com</b>			Date of Disbursement MM / DD / YYYY 10 / 11 / 2016		
Mailing Address 5400 Lbj Fwy Ste 500			FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5C</b> Amount of Each Disbursement this Period 289.82		
City Dallas	State TX	Zip Code 75240-1019	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Lodging		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:					

Full Name (Last, First, Middle Initial) <b>B. Hotels.Com</b>			Date of Disbursement MM / DD / YYYY 10 / 11 / 2016		
Mailing Address 5400 Lbj Fwy Ste 500			FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP51</b> Amount of Each Disbursement this Period 558.78		
City Dallas	State TX	Zip Code 75240-1019	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Lodging		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:					

Full Name (Last, First, Middle Initial) <b>C. Hotels.Com</b>			Date of Disbursement MM / DD / YYYY 10 / 11 / 2016		
Mailing Address 5400 Lbj Fwy Ste 500			FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5;</b> Amount of Each Disbursement this Period 327.02		
City Dallas	State TX	Zip Code 75240-1019	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Lodging		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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1175.62
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial)  
**A. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement Lodging  
Candidate Name

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

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C  
Transaction ID : VSG8M9TP5:  
Amount of Each Disbursement this Period: 263.10

Memo Item

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

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement Lodging  
Candidate Name

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

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C  
Transaction ID : VSG8M9TP5:  
Amount of Each Disbursement this Period: 262.64

Memo Item

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

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement Lodging  
Candidate Name

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

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C  
Transaction ID : VSG8M9TP5:  
Amount of Each Disbursement this Period: 308.66

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 834.40

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial)  
**A. Hotels.Com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement Lodging  
Candidate Name

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

Date of Disbursement: 10 / 18 / 2016

FEC Identification Number: C  
Transaction ID : VSG8M9TP5f  
Amount of Each Disbursement this Period: 86.24

Memo Item

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

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement Lodging  
Candidate Name

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

Date of Disbursement: 10 / 18 / 2016

FEC Identification Number: C  
Transaction ID : VSG8M9TP5f  
Amount of Each Disbursement this Period: 197.31

Memo Item

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

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement Lodging  
Candidate Name

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

Date of Disbursement: 10 / 18 / 2016

FEC Identification Number: C  
Transaction ID : VSG8M9TP5f  
Amount of Each Disbursement this Period: 297.98

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 581.53

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial)  
**A. Hotels.Com**

Date of Disbursement: MM / DD / YYYY  
10 / 19 / 2016

Mailing Address: 5400 Lbj Fwy, Ste 500  
City: Dallas, State: TX, Zip Code: 75240-1019

Purpose of Disbursement: Lodging  
Candidate Name: \_\_\_\_\_  
Category/Type: 002

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

FEC Identification Number: C  
**Transaction ID : VSG8M9TP5**  
Amount of Each Disbursement this Period: 168.42  
 Memo Item

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

Date of Disbursement: MM / DD / YYYY  
10 / 19 / 2016

Mailing Address: 5400 Lbj Fwy, Ste 500  
City: Dallas, State: TX, Zip Code: 75240-1019

Purpose of Disbursement: Lodging  
Candidate Name: \_\_\_\_\_  
Category/Type: 002

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

FEC Identification Number: C  
**Transaction ID : VSG8M9TP5A**  
Amount of Each Disbursement this Period: 604.05  
 Memo Item

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

Date of Disbursement: MM / DD / YYYY  
10 / 19 / 2016

Mailing Address: 5400 Lbj Fwy, Ste 500  
City: Dallas, State: TX, Zip Code: 75240-1019

Purpose of Disbursement: Lodging  
Candidate Name: \_\_\_\_\_  
Category/Type: 002

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

FEC Identification Number: C  
**Transaction ID : VSG8M9TP5I**  
Amount of Each Disbursement this Period: 123.29  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 895.76

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

**A. Houghton Street Consulting, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1001 E Sunset Rd  
# 96841

City Las Vegas State NV Zip Code 89199-5104

Purpose of Disbursement Strategic Planning Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 07 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP2A

Amount of Each Disbursement this Period: 6800.00

Memo Item

**B. Hoyer, Adam, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1560 Central Ave  
Unit 336

City Saint Petersburg State FL Zip Code 33705-1622

Purpose of Disbursement Mileage Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 10 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ6F

Amount of Each Disbursement this Period: 329.40

Memo Item

**C. Hunter, Sheila, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 12160 Greencastle Dr

City Cincinnati State OH Zip Code 45246-1430

Purpose of Disbursement DJ Services for Event

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 10 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQB

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7629.40

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. IAMAW LL 368</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2016	
Mailing Address 4349 NW 36Th St		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP11</b> Amount of Each Disbursement this Period 3200.00	
City Miami Springs	State FL	Zip Code 33166-7346	Category/Type 001
Purpose of Disbursement Rent		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: _____		
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) <b>B. Image Plus Graphics, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016	
Mailing Address 1440 NE 131St St		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQC</b> Amount of Each Disbursement this Period 65790.12	
City North Miami	State FL	Zip Code 33161-4424	Category/Type 004
Purpose of Disbursement Printing - Campaign Materials, No Express Advocacy		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: _____		
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) <b>C. Image Plus Graphics, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2016	
Mailing Address 1440 NE 131St St		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQC</b> Amount of Each Disbursement this Period 3498.90	
City North Miami	State FL	Zip Code 33161-4424	Category/Type 004
Purpose of Disbursement Printing - Pledge Cards, No Express Advocacy		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: _____		
Memo Item <input type="checkbox"/>			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	72489.02
<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)  
**For Our Future**

**A. Image Plus Graphics, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1440 NE 131St St

City North Miami State FL Zip Code 33161-4424

Purpose of Disbursement Printing - Campaign Materials, No Express Advocacy

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQC

Amount of Each Disbursement this Period: 1078.56

Memo Item

**B. Impact Office Supplies**

Full Name (Last, First, Middle Initial)

Mailing Address 6800 Distribution Dr

City Beltsville State MD Zip Code 20705-1400

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 04 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP1C

Amount of Each Disbursement this Period: 26708.76

Memo Item

**C. James Hoyer PA**

Full Name (Last, First, Middle Initial)

Mailing Address 4830 W Kennedy Blvd Ste 550

City Tampa State FL Zip Code 33609-2589

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNN

Amount of Each Disbursement this Period: 22500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 50287.32

**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)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. JAN-Pro Cleaning Systems**

Mailing Address 1050 E Flamingo Rd  
Ste E-321

City Las Vegas State NV Zip Code 89119-7427

Purpose of Disbursement  
Office Cleaning Services

001

Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2016

FEC Identification Number

C  
Transaction ID : VSG8M9TNW  
Amount of Each Disbursement this Period  
650.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. JEA**

Mailing Address 21 W Church St

City Jacksonville State FL Zip Code 32202-3155

Purpose of Disbursement  
Utilities

001

Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2016

FEC Identification Number

C  
Transaction ID : VSG8M9TP38  
Amount of Each Disbursement this Period  
882.98

Memo Item

Full Name (Last, First, Middle Initial)

**C. JetBlue**

Mailing Address 2701 Queens Plz N

City Long Island City State NY Zip Code 11101-4020

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

MM / DD / YYYY  
10 / 17 / 2016

FEC Identification Number

C  
Transaction ID : VSG8M9TP6  
Amount of Each Disbursement this Period  
215.10

Memo Item

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

1748.08

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. JLee Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 5750 Parkview Lake Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP1#</b> Amount of Each Disbursement this Period 16000.00
City Orlando	State FL	Zip Code 32821-5506
Purpose of Disbursement Political Strategy Consulting Services		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. Joe's Brick Oven Pizza</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 122 S 16Th St		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP3#</b> Amount of Each Disbursement this Period 544.00
City Philadelphia	State PA	Zip Code 19102-2820
Purpose of Disbursement Catering		Category/Type 007
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. Joshua Generation Church</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 5225 Alhambra Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP4#</b> Amount of Each Disbursement this Period 400.00
City Orlando	State FL	Zip Code 32808-7203
Purpose of Disbursement Room Rental for Event		Category/Type 007
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).....▶	16944.00
<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)  
**For Our Future**

**A. JVA Campaigns LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 240 N 5Th St  
Ste 360

City Columbus State OH Zip Code 43215-2600

Purpose of Disbursement Direct Mail Services - No Express Advocacy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 06 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQZ'

Amount of Each Disbursement this Period: 3996.00

Memo Item

**B. JVA Campaigns LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 240 N 5Th St  
Ste 360

City Columbus State OH Zip Code 43215-2600

Purpose of Disbursement Printing - Canvassing Literature, No Express Advocacy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 06 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQZ'

Amount of Each Disbursement this Period: 271965.66

Memo Item

**C. Kennedy Printing Company, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 5534 Baltimore Ave

City Philadelphia State PA Zip Code 19143-3106

Purpose of Disbursement Printing - Placards, No Express Advocacy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 19 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TFP

Amount of Each Disbursement this Period: 255.42

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	276217.08
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Las Vegas Chinese Daily News</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address 4215 Spring Mountain Rd Ste B206A		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQB</b>
City Las Vegas	State NV	Zip Code 89102-8747
Purpose of Disbursement Print Advertising, IE Not Yet Disseminated		Category/Type 004
Candidate Name		Amount of Each Disbursement this Period 2700.00
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. LAZ Parking</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 50 S Young St		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP1-</b>
City Columbus	State OH	Zip Code 43215-4351
Purpose of Disbursement Parking		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 2160.00
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. LAZ Parking</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 50 S Young St		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP1.</b>
City Columbus	State OH	Zip Code 43215-4351
Purpose of Disbursement Parking		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 1080.00
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)..... ▶

5940.00

**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)  
**For Our Future**

**A. Lee, Camden, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 10 / 07 / 2016

Mailing Address: 4072 N Sheridan Rd Apt GD

City: Chicago State: IL Zip Code: 60613-5435

Purpose of Disbursement: Digital Consulting Services

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID: VSG8M9TQ7

Amount of Each Disbursement this Period: 1025.00

Memo Item

**B. LensRentals**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 10 / 11 / 2016

Mailing Address: 7730A Trinity Rd, Suite 102

City: Cordova State: TN Zip Code: 38018-2722

Purpose of Disbursement: Office Equipment Rental

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID: VSG8M9TNZ1

Amount of Each Disbursement this Period: 660.00

Memo Item

**C. Lincoln Warehouse Inc.**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 10 / 13 / 2016

Mailing Address: 2018 S 1St St

City: Milwaukee State: WI Zip Code: 53207-1102

Purpose of Disbursement: Rent

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID: VSG8M9TP1

Amount of Each Disbursement this Period: 1605.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3290.00

**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)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Mack-Sumner Communications, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		05		2016

Mailing Address 2001 N Beaugard St  
Ste 420

City Alexandria State VA Zip Code 22311-1750

Purpose of Disbursement  
Photo License

004  
Category/  
Type

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VSG8M9TQB**  
Amount of Each Disbursement this Period  
[Redacted] 250.00

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. Market District**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2016

Mailing Address 5550 Centre Ave

City Pittsburgh State PA Zip Code 15232-1206

Purpose of Disbursement  
Food for Event

007  
Category/  
Type

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VSG8M9TP3Z**  
Amount of Each Disbursement this Period  
[Redacted] 292.56

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mission Control**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		05		2016

Mailing Address 624 Hebron Ave  
Ste 200

City Glastonbury State CT Zip Code 06033-5006

Purpose of Disbursement  
Printing - Pledge Cards, No Express Advocacy

004  
Category/  
Type

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VSG8M9TQZ**  
Amount of Each Disbursement this Period  
[Redacted] 870.00

Candidate Name

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

Memo Item

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

[Redacted] 1412.56

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. MTI Sound, Lighting And Staging</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 478 E Altamonte Dr Ste 108-273		FEC Identification Number C [ ] <b>Transaction ID : VSG8M9TP3</b> Amount of Each Disbursement this Period [ ] 3900.00
City Altamonte Springs	State FL	Zip Code 32701-4628
Purpose of Disbursement Event Equipment Rental	Category/Type 007	
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. Nelson, Norma, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address 4778 Pewter Rd		FEC Identification Number C [ ] <b>Transaction ID : VSG8M9TQB</b> Amount of Each Disbursement this Period [ ] 3800.00
City Cincinnati	State OH	Zip Code 45244-1266
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. No Pork On My Fork</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2016
Mailing Address 791 E McMillan St Ste 210A		FEC Identification Number C [ ] <b>Transaction ID : VSG8M9TP3</b> Amount of Each Disbursement this Period [ ] 599.20
City Cincinnati	State OH	Zip Code 45206-1938
Purpose of Disbursement Catering	Category/Type 007	
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).....▶	[ ] 8299.20
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. NV Energy</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address PO Box 98910		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP3E</b> Amount of Each Disbursement this Period 96.73
City Las Vegas	State NV	Zip Code 89193-8910
Purpose of Disbursement Utilities	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. Office Depot</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address 6600 N Military Trl		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP1C</b> Amount of Each Disbursement this Period 138.44
City Boca Raton	State FL	Zip Code 33496-2434
Purpose of Disbursement Office Supplies	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. Office Depot</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 6600 N Military Trl		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNZ</b> Amount of Each Disbursement this Period 47.24
City Boca Raton	State FL	Zip Code 33496-2434
Purpose of Disbursement Office Equipment	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).....▶	282.41
<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)  
**For Our Future**

**A. Office Depot**

Full Name (Last, First, Middle Initial)

Mailing Address 6600 N Military Trl

City Boca Raton State FL Zip Code 33496-2434

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP1E

Amount of Each Disbursement this Period: 78.96

Memo Item

**B. Ohio Strategic Partners**

Full Name (Last, First, Middle Initial)

Mailing Address 34 N Remington Rd

City Bexley State OH Zip Code 43209-1441

Purpose of Disbursement Communications Consulting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNW

Amount of Each Disbursement this Period: 12500.00

Memo Item

**C. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 1175 John St

City West Henrietta State NY Zip Code 14586-9102

Purpose of Disbursement Administrative Staff Salaries and Benefits

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 06 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TR0

Amount of Each Disbursement this Period: 75210.18

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 87789.14

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. PDQ Printing Of Las Vegas</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2016
Mailing Address 3820 S Valley View Blvd		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQB</b>
City Las Vegas	State NV	Zip Code 89103-2904
Purpose of Disbursement Printing - Business Cards	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 509.65	
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. Pearson Community Center</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 1625 W Carey Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP4E</b>
City North Las Vegas	State NV	Zip Code 89032-3784
Purpose of Disbursement Room Rental for Event	Category/Type 007	
Candidate Name	Amount of Each Disbursement this Period 2600.00	
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. Project New America</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 191 University Blvd Ste 831		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP2:</b>
City Denver	State CO	Zip Code 80206-4613
Purpose of Disbursement Research Services	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 25050.00	
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)..... ▶

28159.65

**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)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. ReadyRefresh By Nestle**

Mailing Address 900 Long Ridge Rd  
Bldg 2

City  
Stamford

State  
CT

Zip Code  
06902-1140

Purpose of Disbursement  
Water for Office

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
10			04			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TP3I

Amount of Each Disbursement this Period

37.04
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. ReadyRefresh By Nestle**

Mailing Address 900 Long Ridge Rd  
Bldg 2

City  
Stamford

State  
CT

Zip Code  
06902-1140

Purpose of Disbursement  
Water for Office

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
10			04			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TP3E

Amount of Each Disbursement this Period

60.34
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ricci, Tiffany, , ,**

Mailing Address 1514 Hamilton St NW  
NW

City  
Washington

State  
DC

Zip Code  
20011-3858

Purpose of Disbursement  
Reimbursement - Travel, Food/Beverage

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
10			07			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TQB

Amount of Each Disbursement this Period

246.27
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Memo Item

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

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

343.65
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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)  
**For Our Future**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St  
Ste 400

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 07 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQB

Amount of Each Disbursement this Period: 30.55

Memo Item

**B. Rising Tide Interactive**

Full Name (Last, First, Middle Initial)

Mailing Address 1250 H St NW

City Washington State DC Zip Code 20005-3952

Purpose of Disbursement Digital Advertising, IE Not Yet Disseminated

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TS4C

Amount of Each Disbursement this Period: 90000.00

Memo Item

**C. Rising Tide Interactive**

Full Name (Last, First, Middle Initial)

Mailing Address 1250 H St NW

City Washington State DC Zip Code 20005-3952

Purpose of Disbursement Digital Advertising - No Express Advocacy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TS4I

Amount of Each Disbursement this Period: 10126.48

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 100126.48

**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)  
**For Our Future**

**A. Rising Tide Interactive**

Full Name (Last, First, Middle Initial)

Mailing Address 1250 H St NW

City Washington State DC Zip Code 20005-3952

Purpose of Disbursement Digital Advertising, IE Not Yet Disseminated

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TS4f

Amount of Each Disbursement this Period: 411862.96

Memo Item

**B. Rising Tide Interactive**

Full Name (Last, First, Middle Initial)

Mailing Address 1250 H St NW

City Washington State DC Zip Code 20005-3952

Purpose of Disbursement Media Buy - No Express Advocacy

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 10 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9VJSc

Amount of Each Disbursement this Period: 30000.00

Memo Item

**C. Rocketto, Ross, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 147 Rogers Ave Apt 4R

City Brooklyn State NY Zip Code 11216-4856

Purpose of Disbursement Reimbursement - Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQB

Amount of Each Disbursement this Period: 277.70

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 442140.66

**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)  
**For Our Future**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St  
Ste 400

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 12 / 2016

FEC Identification Number: C [REDACTED]

Transaction ID : VSG8M9TQB

Amount of Each Disbursement this Period: 76.12

Memo Item

**B. Rorapough Teicher LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1017 Buchanan St

City Hollywood State FL Zip Code 33019-1106

Purpose of Disbursement Strategic Planning Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C [REDACTED]

Transaction ID : VSG8M9TP2V

Amount of Each Disbursement this Period: 8000.00

Memo Item

**C. Rorapough Teicher LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1017 Buchanan St

City Hollywood State FL Zip Code 33019-1106

Purpose of Disbursement Strategic Planning Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C [REDACTED]

Transaction ID : VSG8M9TP2:

Amount of Each Disbursement this Period: 787.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8787.50

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Royal Performance Group</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 2100 Western Ct Ste 80		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5</b> Amount of Each Disbursement this Period 12142.00
City Lisle	State IL	Zip Code 60532-1971
Purpose of Disbursement Prepaid Gas Cards		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	

Full Name (Last, First, Middle Initial) <b>B. Royal Performance Group</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address 2100 Western Ct Ste 80		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5</b> Amount of Each Disbursement this Period 5692.00
City Lisle	State IL	Zip Code 60532-1971
Purpose of Disbursement Prepaid Gas Cards		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	

Full Name (Last, First, Middle Initial) <b>C. Royal Performance Group</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 2100 Western Ct Ste 80		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5</b> Amount of Each Disbursement this Period 30039.95
City Lisle	State IL	Zip Code 60532-1971
Purpose of Disbursement Prepaid Gas Cards		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).....▶	47873.95
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**For Our Future**

Full Name (Last, First, Middle Initial)  
**A. Sammy's Place**

Mailing Address 1449 N 5Th St

City Philadelphia State PA Zip Code 19122-3601

Purpose of Disbursement Room Rental for Event

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 18 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP4E

Amount of Each Disbursement this Period: 500.00

Memo Item

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

Mailing Address 922 Penn Ave

City Pittsburgh State PA Zip Code 15222-3706

Purpose of Disbursement Food/Beverage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 18 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP43

Amount of Each Disbursement this Period: 291.66

Memo Item

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

Mailing Address 9609 W Allyn St Apt 8

City Milwaukee State WI Zip Code 53224-1675

Purpose of Disbursement Field Consulting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ8

Amount of Each Disbursement this Period: 1772.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2563.66

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Smoot Tewes Group</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 818 Connecticut Ave NW Ste 200		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP1f</b>
City Washington	State DC	Zip Code 20006-2742
Purpose of Disbursement PAC Management Consulting Services		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 25016.92
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. Smoot Tewes Group</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2016
Mailing Address 818 Connecticut Ave NW Ste 200		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP1c</b>
City Washington	State DC	Zip Code 20006-2742
Purpose of Disbursement PAC Management Consulting Services		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 3252.71
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. SnapSpot</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address 4120 N Martin L King Blvd		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP4!</b>
City North Las Vegas	State NV	Zip Code 89032-0297
Purpose of Disbursement Photo Booth Rental for Event		Category/Type 007
Candidate Name		Amount of Each Disbursement this Period 1000.00
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).....▶	29269.63
<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)  
**For Our Future**

**A. Southwest Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP6J

Amount of Each Disbursement this Period: 193.98

Memo Item

**B. Southwest Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP6K

Amount of Each Disbursement this Period: 425.96

Memo Item

**C. Southwest Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP6I

Amount of Each Disbursement this Period: 193.98

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 813.92

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Spectrum Business</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address PO Box 3019		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP3/</b> Amount of Each Disbursement this Period 68.55
City Milwaukee	State WI	Zip Code 53201-3019
Purpose of Disbursement Utilities		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. St. James AME Church</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address 444 Lincoln Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP4F</b> Amount of Each Disbursement this Period 500.00
City East Liberty	State PA	Zip Code 15206-4117
Purpose of Disbursement Room Rental for Event		Category/Type 007
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. Station</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016
Mailing Address 4744 Liberty Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP4</b> Amount of Each Disbursement this Period 244.40
City Pittsburgh	State PA	Zip Code 15224-2034
Purpose of Disbursement Food/Beverage		Category/Type 007
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)..... ▶

812.95

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. SVM, LP</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016
Mailing Address 3727 N Ventura Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5J</b> Amount of Each Disbursement this Period 10665.84
City Arlington Heights	State IL	Zip Code 60004-7952
Purpose of Disbursement Prepaid Gas Cards		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	

Full Name (Last, First, Middle Initial) <b>B. SVM, LP</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 3727 N Ventura Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5K</b> Amount of Each Disbursement this Period 497.75
City Arlington Heights	State IL	Zip Code 60004-7952
Purpose of Disbursement Prepaid Gas Cards		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	

Full Name (Last, First, Middle Initial) <b>C. SVM, LP</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 3727 N Ventura Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5I</b> Amount of Each Disbursement this Period 981.12
City Arlington Heights	State IL	Zip Code 60004-7952
Purpose of Disbursement Prepaid Gas Cards		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).....▶	12144.71
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. SVM, LP</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address 3727 N Ventura Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5I</b> Amount of Each Disbursement this Period 6848.44
City Arlington Heights	State IL	Zip Code 60004-7952
Purpose of Disbursement Prepaid Gas Cards		Category/ Type 002
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. SVM, LP</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 3727 N Ventura Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP5F</b> Amount of Each Disbursement this Period 1468.52
City Arlington Heights	State IL	Zip Code 60004-7952
Purpose of Disbursement Prepaid Gas Cards		Category/ Type 002
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. The Contact Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address PO Box 187		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQZ</b> Amount of Each Disbursement this Period 63847.00
City Grasonville	State MD	Zip Code 21638-0187
Purpose of Disbursement Survey Robocalls - No Express Advocacy		Category/ Type 004
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).....▶	72163.96
<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)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. The Contact Group, Inc.**

Mailing Address PO Box 187

City  
Grasonville

State  
MD

Zip Code  
21638-0187

Purpose of Disbursement  
Survey Robocalls - No Express Advocacy

004

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
10			05			2016			

FEC Identification Number

C [REDACTED]

**Transaction ID : VSG8M9TQZ:**  
Amount of Each Disbursement this Period

[REDACTED] 8895.32

Memo Item

Full Name (Last, First, Middle Initial)

**B. The Contact Group, Inc.**

Mailing Address PO Box 187

City  
Grasonville

State  
MD

Zip Code  
21638-0187

Purpose of Disbursement  
Survey Robocalls - No Express Advocacy

004

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
10			18			2016			

FEC Identification Number

C [REDACTED]

**Transaction ID : VSG8M9TR00**  
Amount of Each Disbursement this Period

[REDACTED] 887.04

Memo Item

Full Name (Last, First, Middle Initial)

**C. The Hatcher Group**

Mailing Address 4340 E West Hwy  
Ste 912

City  
Bethesda

State  
MD

Zip Code  
20814-4447

Purpose of Disbursement  
Design and Editing Services

001

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
10			07			2016			

FEC Identification Number

C [REDACTED]

**Transaction ID : VSG8M9TNN**  
Amount of Each Disbursement this Period

[REDACTED] 2312.50

Memo Item

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

[REDACTED]	12094.86
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**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]	
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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)  
**For Our Future**

Full Name (Last, First, Middle Initial)  
**A. The Ohio Education Association**

Mailing Address 225 E Broad St

City Columbus State OH Zip Code 43215-3709

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 07 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP1

Amount of Each Disbursement this Period: 234.56

Memo Item

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

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP2

Amount of Each Disbursement this Period: 200.00

Memo Item

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

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP7

Amount of Each Disbursement this Period: 437.10

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 871.66

**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)  
**For Our Future**

**A. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP74

Amount of Each Disbursement this Period: 366.60

Memo Item

**B. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP75

Amount of Each Disbursement this Period: 366.60

Memo Item

**C. Upland IX, LLC (D/B/A Mobile Commons)**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 205921

City Dallas State TX Zip Code 75320-5921

Purpose of Disbursement Mobile Engagement Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 10 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP3I

Amount of Each Disbursement this Period: 673.74

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1406.94

**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)  
**For Our Future**

**A. USPS**

Full Name (Last, First, Middle Initial)

Mailing Address 1050 Connecticut Ave NW

City Washington State DC Zip Code 20036-5303

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP1f

Amount of Each Disbursement this Period: 5101.75

Memo Item

**B. USPS**

Full Name (Last, First, Middle Initial)

Mailing Address 1050 Connecticut Ave NW

City Washington State DC Zip Code 20036-5303

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP1C

Amount of Each Disbursement this Period: 307.75

Memo Item

**C. USPS**

Full Name (Last, First, Middle Initial)

Mailing Address 1050 Connecticut Ave NW

City Washington State DC Zip Code 20036-5303

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP11

Amount of Each Disbursement this Period: 22.95

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5432.45

**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)  
**For Our Future**

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Telecommunications Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP2Z

Amount of Each Disbursement this Period: 112.00

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Telecommunications Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP30

Amount of Each Disbursement this Period: 100.00

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Telecommunications Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TP3

Amount of Each Disbursement this Period: 100.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 312.00

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			13			2016			

FEC Identification Number

**Transaction ID : VSG8M9TNW**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			13			2016			

FEC Identification Number

**Transaction ID : VSG8M9TNW**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			13			2016			

FEC Identification Number

**Transaction ID : VSG8M9TNW**  
Amount of Each Disbursement this Period

Memo Item

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

<input type="text" value="170.38"/>
-------------------------------------

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

<input type="text"/>
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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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2016

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNW

Amount of Each Disbursement this Period

[Redacted] 84.66

Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2016

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNW

Amount of Each Disbursement this Period

[Redacted] 84.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2016

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNW

Amount of Each Disbursement this Period

[Redacted] 83.97

Memo Item

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

[Redacted] 252.63

**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)  
**For Our Future**

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNW

Amount of Each Disbursement this Period: 84.36

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNW

Amount of Each Disbursement this Period: 84.95

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNW

Amount of Each Disbursement this Period: 84.08

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 253.39

**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)  
**For Our Future**

**A. Verizon**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNW

Amount of Each Disbursement this Period: 83.07

Memo Item

**B. Verizon**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNW

Amount of Each Disbursement this Period: 83.23

Memo Item

**C. Verizon**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNW

Amount of Each Disbursement this Period: 83.56

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 249.86

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNW**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNW**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNX**  
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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address PO Box 15124		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNX</b> Amount of Each Disbursement this Period [REDACTED] 84.88
City Albany	State NY	Zip Code 12212-5124
Purpose of Disbursement Office Equipment		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. Verizon</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address PO Box 15124		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNX</b> Amount of Each Disbursement this Period [REDACTED] 83.12
City Albany	State NY	Zip Code 12212-5124
Purpose of Disbursement Office Equipment		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. Verizon</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address PO Box 15124		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNX</b> Amount of Each Disbursement this Period [REDACTED] 83.78
City Albany	State NY	Zip Code 12212-5124
Purpose of Disbursement Office Equipment		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] 251.78
<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

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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNX**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNX**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNX**  
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

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)  
**For Our Future**

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNX

Amount of Each Disbursement this Period: 84.11

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNX

Amount of Each Disbursement this Period: 83.42

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNX

Amount of Each Disbursement this Period: 83.30

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 250.83

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNX

Amount of Each Disbursement this Period: 82.92

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNX

Amount of Each Disbursement this Period: 82.70

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNX

Amount of Each Disbursement this Period: 83.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 249.12

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

### A. Verizon

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			14			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNXI

Amount of Each Disbursement this Period

[Redacted] 84.38

Memo Item

Full Name (Last, First, Middle Initial)

### B. Verizon

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			14			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNXI

Amount of Each Disbursement this Period

[Redacted] 82.63

Memo Item

Full Name (Last, First, Middle Initial)

### C. Verizon

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			14			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNXI

Amount of Each Disbursement this Period

[Redacted] 83.74

Memo Item

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

[Redacted] 250.75

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			14			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNX

Amount of Each Disbursement this Period

83.11
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			14			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNX

Amount of Each Disbursement this Period

83.43
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			14			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNX

Amount of Each Disbursement this Period

84.87
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Memo Item

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

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

251.41
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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)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			14			2016			

FEC Identification Number

**Transaction ID : VSG8M9TNXI**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			14			2016			

FEC Identification Number

**Transaction ID : VSG8M9TNXI**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			14			2016			

FEC Identification Number

**Transaction ID : VSG8M9TNXI**  
Amount of Each Disbursement this Period

Memo Item

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

<input type="text" value="252.01"/>
-------------------------------------

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

<input type="text"/>
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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)  
**For Our Future**

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNXI

Amount of Each Disbursement this Period: 80.00

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNXI

Amount of Each Disbursement this Period: 4.95

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNXI

Amount of Each Disbursement this Period: 82.27

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 167.22

**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)  
**For Our Future**

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNX!

Amount of Each Disbursement this Period: 82.84

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNX!

Amount of Each Disbursement this Period: 84.37

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNX!

Amount of Each Disbursement this Period: 84.26

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 251.47

**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)  
**For Our Future**

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNX

Amount of Each Disbursement this Period: 84.14

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNX

Amount of Each Disbursement this Period: 83.90

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNX

Amount of Each Disbursement this Period: 83.78

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 251.82

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNX**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNYC**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement  
Office Equipment

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 : VSG8M9TNY**  
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)  
**For Our Future**

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNY:

Amount of Each Disbursement this Period: 83.08

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNY:

Amount of Each Disbursement this Period: 82.72

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNY:

Amount of Each Disbursement this Period: 82.60

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 248.40

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address PO Box 15124		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNY!</b> Amount of Each Disbursement this Period [REDACTED] 82.49
City Albany	State NY	
Zip Code 12212-5124	Purpose of Disbursement Office Equipment	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. Verizon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address PO Box 15124		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNY!</b> Amount of Each Disbursement this Period [REDACTED] 82.37
City Albany	State NY	
Zip Code 12212-5124	Purpose of Disbursement Office Equipment	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. Verizon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address PO Box 15124		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNY!</b> Amount of Each Disbursement this Period [REDACTED] 82.25
City Albany	State NY	
Zip Code 12212-5124	Purpose of Disbursement Office Equipment	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 247.11
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			17			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNY!

Amount of Each Disbursement this Period

[Redacted] 85.05

Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			17			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNY!

Amount of Each Disbursement this Period

[Redacted] 84.84

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

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
10			17			2016			

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNY!

Amount of Each Disbursement this Period

[Redacted] 84.63

Memo Item

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

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

[Redacted] 254.52

[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)  
**For Our Future**

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNYI

Amount of Each Disbursement this Period: 84.42

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNYI

Amount of Each Disbursement this Period: 84.20

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNYI

Amount of Each Disbursement this Period: 83.99

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 252.61

**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)  
**For Our Future**

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNYf

Amount of Each Disbursement this Period: 83.77

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNYf

Amount of Each Disbursement this Period: 84.72

Memo Item

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

Mailing Address PO Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TNYf

Amount of Each Disbursement this Period: 84.61

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 253.10

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address PO Box 15124		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNYI</b>
City Albany	State NY	Zip Code 12212-5124
Purpose of Disbursement Office Equipment		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 42.00
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. Verizon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address PO Box 15124		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNY.</b>
City Albany	State NY	Zip Code 12212-5124
Purpose of Disbursement Office Equipment		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 43.19
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. Verizon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address PO Box 15124		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNY</b>
City Albany	State NY	Zip Code 12212-5124
Purpose of Disbursement Office Equipment		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 84.95
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).....▶	170.14
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2016

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNYI

Amount of Each Disbursement this Period

[Redacted] 82.04

Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2016

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNYI

Amount of Each Disbursement this Period

[Redacted] 84.06

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address PO Box 15124

City  
Albany

State  
NY

Zip Code  
12212-5124

Purpose of Disbursement  
Office Equipment

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2016

FEC Identification Number

C [Redacted]

Transaction ID : VSG8M9TNYI

Amount of Each Disbursement this Period

[Redacted] 84.01

Memo Item

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

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

[Redacted] 250.11

[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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address PO Box 15124		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNYf</b> Amount of Each Disbursement this Period [REDACTED] 83.56
City Albany	State NY	Zip Code 12212-5124
Purpose of Disbursement Office Equipment		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. Verizon</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address PO Box 15124		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TNYf</b> Amount of Each Disbursement this Period [REDACTED] 83.19
City Albany	State NY	Zip Code 12212-5124
Purpose of Disbursement Office Equipment		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. Verizon</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address PO Box 15124		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TP3;</b> Amount of Each Disbursement this Period [REDACTED] 100.00
City Albany	State NY	Zip Code 12212-5124
Purpose of Disbursement Telecommunications Services		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] 266.75
<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)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Walker, Avree, , ,**

Mailing Address 3414 E Rochelle Ave

City  
Las Vegas

State  
NV

Zip Code  
89121-5141

Purpose of Disbursement  
Event Entertainment

007

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
10			18			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TQ7

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Webb, Antonia, , ,**

Mailing Address 64 E Kelso Rd

City  
Columbus

State  
OH

Zip Code  
43202-2312

Purpose of Disbursement  
Reimbursement - Food for Events

007

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
10			11			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TQ6

Amount of Each Disbursement this Period

[REDACTED] 846.11

Memo Item

Full Name (Last, First, Middle Initial)

**C. Townhall**

Mailing Address 1909 W 25Th St

City  
Cleveland

State  
OH

Zip Code  
44113-3418

Purpose of Disbursement  
Food for Event

007

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
10			11			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : VSG8M9TQ6

Amount of Each Disbursement this Period

[REDACTED] 247.50

Memo Item

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

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

[REDACTED] 1346.11

[REDACTED] 3563453.73

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. America Votes Action Fund</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016
Mailing Address 1155 Connecticut Ave NW Ste 600		FEC Identification Number C00492520 <b>Transaction ID : VSG8M9TQ6!</b> Amount of Each Disbursement this Period 111000.00
City Washington	State DC	Zip Code 20036-4324
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>America Votes Action Fund</b>		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. COLOROFCHANGE PAC</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 1714 Franklin St # 100-136		FEC Identification Number C00428557 <b>Transaction ID : VSG8M9TQ1C!</b> Amount of Each Disbursement this Period 200000.00
City Oakland	State CA	Zip Code 94612-3488
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>COLOROFCHANGE PAC</b>		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. NCLR Action PAC</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 1126 16Th St NW Ste 600		FEC Identification Number C00626390 <b>Transaction ID : VSG8M9TQ2!</b> Amount of Each Disbursement this Period 195626.00
City Washington	State DC	Zip Code 20036-4845
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>NCLR Action PAC</b>		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)..... ▶

506626.00

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Stand Up For Ohio PAC</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016
Mailing Address 112 S Water St Ste B		FEC Identification Number C00586610 <b>Transaction ID : VSG8M9TFPI</b>
City Kent	State OH	Zip Code 44240-3524
Purpose of Disbursement Voided Check from 9/12/2016		011 Category/ Type
Candidate Name <b>Stand Up For Ohio PAC</b>		Amount of Each Disbursement this Period -315951.45
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. Stand Up For Ohio PAC</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016
Mailing Address 112 S Water St Ste B		FEC Identification Number C00586610 <b>Transaction ID : VSG8M9TQ5C</b>
City Kent	State OH	Zip Code 44240-3524
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>Stand Up For Ohio PAC</b>		Amount of Each Disbursement this Period 575951.45
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. Stand Up For Ohio PAC</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address 112 S Water St Ste B		FEC Identification Number C00586610 <b>Transaction ID : VSG8M9TQ5</b>
City Kent	State OH	Zip Code 44240-3524
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name <b>Stand Up For Ohio PAC</b>		Amount of Each Disbursement this Period 46000.00
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).....▶	306000.00
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. VoteVets**

Mailing Address PO Box 75357

City Washington State DC Zip Code 20013-0357

Purpose of Disbursement  
Contribution

**011**  
Category/  
Type

Candidate Name  
**VoteVets**

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00418897  
**Transaction ID : VSG8M9TQ5**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. VoteVets**

Mailing Address PO Box 75357

City Washington State DC Zip Code 20013-0357

Purpose of Disbursement  
Contribution

**011**  
Category/  
Type

Candidate Name  
**VoteVets**

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00418897  
**Transaction ID : VSG8M9TQ6**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. VoteVets**

Mailing Address PO Box 75357

City Washington State DC Zip Code 20013-0357

Purpose of Disbursement  
Contribution

**011**  
Category/  
Type

Candidate Name  
**VoteVets**

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00418897  
**Transaction ID : VSG8M9TQ6**  
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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Working America Coalition</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address 815 16Th St NW NW		FEC Identification Number C [ ] <b>Transaction ID : VSG8M9TQ6;</b> Amount of Each Disbursement this Period [ ] 110680.00
City Washington	State DC	Zip Code 20006-4101
Purpose of Disbursement Contribution		Category/ Type 011
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.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]
City	State	Zip Code
Purpose of Disbursement		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.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]
City	State	Zip Code
Purpose of Disbursement		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).....▶	[ ] 110680.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 1412760.99



**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Action NC</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 5500 Executive Center Dr Ste 234		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ0:</b> Amount of Each Disbursement this Period 162000.00
City Charlotte	State NC	Zip Code 28212-8821
Purpose of Disbursement Donation		Category/ Type 012
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. Action NC</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 5500 Executive Center Dr Ste 234		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ1C</b> Amount of Each Disbursement this Period 10000.00
City Charlotte	State NC	Zip Code 28212-8821
Purpose of Disbursement Donation		Category/ Type 012
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. Action Network</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1900 L St NW Ste 900		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ6</b> Amount of Each Disbursement this Period 300.00
City Washington	State DC	Zip Code 20036-5005
Purpose of Disbursement Donation		Category/ Type 012
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

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

172300.00
[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

**A. Action Network**

Full Name (Last, First, Middle Initial)

Mailing Address 1900 L St NW  
Ste 900

City Washington State DC Zip Code 20036-5005

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 07 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ6I

Amount of Each Disbursement this Period: 2000.00

Memo Item

**B. Advance North Carolina**

Full Name (Last, First, Middle Initial)

Mailing Address 401 N Mangum St

City Durham State NC Zip Code 27701-3310

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ14

Amount of Each Disbursement this Period: 45000.00

Memo Item

**C. Advance North Carolina**

Full Name (Last, First, Middle Initial)

Mailing Address 401 N Mangum St

City Durham State NC Zip Code 27701-3310

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ1

Amount of Each Disbursement this Period: 44100.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 91100.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Alliance For Retired Americans</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 815 16Th St NW FI 4		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ1/</b> Amount of Each Disbursement this Period 200000.00
City Washington	State DC	Zip Code 20006-4101
Purpose of Disbursement Donation		Category/ Type 012
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. Alliance For Retired Americans</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 815 16Th St NW FI 4		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ1/</b> Amount of Each Disbursement this Period 40000.00
City Washington	State DC	Zip Code 20006-4101
Purpose of Disbursement Donation		Category/ Type 012
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. America's Voice</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address 1250 I St NW Ste 200		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ1</b> Amount of Each Disbursement this Period 11000.00
City Washington	State DC	Zip Code 20005-5994
Purpose of Disbursement Donation		Category/ Type 012
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).....▶	251000.00
<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 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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Bouchard Gold Communications**

Mailing Address 1617 W 6Th St  
Ste B

City  
Austin

State  
TX

Zip Code  
78703-5080

Purpose of Disbursement  
Printing and Shipping - Non-Federal Canvassing Literature

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : VSG8M9STX1**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bouchard Gold Communications**

Mailing Address 1617 W 6Th St  
Ste B

City  
Austin

State  
TX

Zip Code  
78703-5080

Purpose of Disbursement  
Printing - Non-Federal Canvassing Literature

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : VSG8M9TQZ1**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. CASA In Action**

Mailing Address 8151 15Th Ave

City  
Hyattsville

State  
MD

Zip Code  
20783-3501

Purpose of Disbursement  
Donation

**012**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : VSG8M9TQ1**  
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 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)  
**For Our Future**

**A. CASA In Action**

Full Name (Last, First, Middle Initial)

Mailing Address 8151 15Th Ave

City Hyattsville State MD Zip Code 20783-3501

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ11

Amount of Each Disbursement this Period: 35045.00

Memo Item

**B. Centaur North Strategies**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1474

City Whittier State CA Zip Code 90609-1474

Purpose of Disbursement Printing - Non-Federal Doorhangers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TEC1

Amount of Each Disbursement this Period: 3221.74

Memo Item

**C. Citizens Action Wisconsin**

Full Name (Last, First, Middle Initial)

Mailing Address 221 S 2Nd St Ste 300

City Milwaukee State WI Zip Code 53204-1467

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ1

Amount of Each Disbursement this Period: 15000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 53266.74

**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 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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Coalition Of Black Trade Unionists</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address PO Box 66268		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ11</b> Amount of Each Disbursement this Period 121708.00
City Washington	State DC	Zip Code 20035-6268
Purpose of Disbursement Donation		Category/ Type 012
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. Equality Pennsylvania</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2016
Mailing Address 1211 Chestnut St Ste 605		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ1F</b> Amount of Each Disbursement this Period 73357.26
City Philadelphia	State PA	Zip Code 19107-4117
Purpose of Disbursement Donation		Category/ Type 012
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. Equality Pennsylvania</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 1211 Chestnut St Ste 605		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ1</b> Amount of Each Disbursement this Period 54111.00
City Philadelphia	State PA	Zip Code 19107-4117
Purpose of Disbursement Donation		Category/ Type 012
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).....▶	249176.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Fair Share Action</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address 294 Washington St Ste 500		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ1</b> Amount of Each Disbursement this Period 69998.00
City Boston	State MA	Zip Code 02108-4612
Purpose of Disbursement Donation		Category/Type 012
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. Innovation Ohio</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2016
Mailing Address 35 E Gay St Ste 403		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ1</b> Amount of Each Disbursement this Period 15000.00
City Columbus	State OH	Zip Code 43215-3138
Purpose of Disbursement Donation		Category/Type 012
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. JVA Campaigns LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 13 / 2016
Mailing Address 240 N 5Th St Ste 360		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TCN</b> Amount of Each Disbursement this Period 3613.76
City Columbus	State OH	Zip Code 43215-2600
Purpose of Disbursement Printing - Non-Federal Canvassing Literature		Category/Type 004
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).....▶	88611.76
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Latino Voters Action Fund</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2016
Mailing Address 3556 Sullivant Ave Ste 105		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ11</b> Amount of Each Disbursement this Period 14650.00
City Columbus	State OH	Zip Code 43204-1153
Purpose of Disbursement Donation		012 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. Make The Road Action Fund</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 449 Troutman St Ste C		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ11</b> Amount of Each Disbursement this Period 53314.63
City Brooklyn	State NY	Zip Code 11237-2618
Purpose of Disbursement Donation		012 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. Mi Familia Vota</b>		Date of Disbursement MM / DD / YYYY 10 / 13 / 2016
Mailing Address 1710 E Indian School Rd Ste 100		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ2</b> Amount of Each Disbursement this Period 71766.00
City Phoenix	State AZ	Zip Code 85016-5948
Purpose of Disbursement Donation		012 Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

139730.63

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

[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Mi Familia Vota**

Mailing Address 1710 E Indian School Rd  
Ste 100

City Phoenix State AZ Zip Code 85016-5948

Purpose of Disbursement  
Donation

**012**  
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 : VSG8M9TQ2'**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Missouri Jobs With Justice Voter Action**

Mailing Address 2725 Clifton Ave

City Saint Louis State MO Zip Code 63139-2712

Purpose of Disbursement  
Donation

**012**  
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 : VSG8M9TQ23**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Missouri Jobs With Justice Voter Action**

Mailing Address 2725 Clifton Ave

City Saint Louis State MO Zip Code 63139-2712

Purpose of Disbursement  
Donation

**012**  
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 : VSG8M9TQ2**  
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 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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Missouri Jobs With Justice Voter Action</b>		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address 2725 Clifton Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ2!</b> Amount of Each Disbursement this Period 33000.00
City Saint Louis	State MO	Zip Code 63139-2712
Purpose of Disbursement Donation		Category/Type 012
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. National Council Of La Raza Action Fund, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 1126 16Th St NW Ste 600		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ2!</b> Amount of Each Disbursement this Period 7327.00
City Washington	State DC	Zip Code 20036-4845
Purpose of Disbursement Donation		Category/Type 012
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. National Council Of La Raza Action Fund, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016
Mailing Address 1126 16Th St NW Ste 600		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ2!</b> Amount of Each Disbursement this Period 41757.00
City Washington	State DC	Zip Code 20036-4845
Purpose of Disbursement Donation		Category/Type 012
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).....▶	82084.00
<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 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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Ohio Environmental Council Action Fund</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 1145 Chesapeake Ave Ste I		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ2I</b> Amount of Each Disbursement this Period 133729.00
City Columbus	State OH	Zip Code 43212-2286
Purpose of Disbursement Donation		Category/ Type 012
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. One Pennsylvania</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016
Mailing Address 1500 N 2Nd St Ste 11		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ2E</b> Amount of Each Disbursement this Period 65750.00
City Harrisburg	State PA	Zip Code 17102-2527
Purpose of Disbursement Donation		Category/ Type 012
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. One Pennsylvania</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016
Mailing Address 1500 N 2Nd St Ste 11		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ2</b> Amount of Each Disbursement this Period 30988.00
City Harrisburg	State PA	Zip Code 17102-2527
Purpose of Disbursement Donation		Category/ Type 012
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).....▶	230467.00
<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 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)  
**For Our Future**

**A. One Wisconsin Now**

Full Name (Last, First, Middle Initial)

Mailing Address 152 W Johnson St  
Ste 214

City Madison State WI Zip Code 53703-2296

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 03 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ2I

Amount of Each Disbursement this Period: 12500.00

Memo Item

**B. PICO Faith In Florida Action Fund**

Full Name (Last, First, Middle Initial)

Mailing Address 406 E Amelia St

City Orlando State FL Zip Code 32803-5316

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ2J

Amount of Each Disbursement this Period: 51000.00

Memo Item

**C. Pittsburgh A. Phillip Randolph Institute Education Fund**

Full Name (Last, First, Middle Initial)

Mailing Address 60 Blvd Of The Allies  
Ste 200

City Pittsburgh State PA Zip Code 15222-1232

Purpose of Disbursement Refund of Overpayment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 07 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ5

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 63750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**For Our Future**

**A. ProgressOhio.Org**

Full Name (Last, First, Middle Initial)

Mailing Address 35 E Gay St  
Ste 404

City Columbus State OH Zip Code 43215-3138

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ5I

Amount of Each Disbursement this Period: 8000.00

Memo Item

**B. Sixteen Thirty Fund**

Full Name (Last, First, Middle Initial)

Mailing Address 1201 Connecticut Ave NW  
Ste 300

City Washington State DC Zip Code 20036-2656

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 19 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ5I

Amount of Each Disbursement this Period: 35000.00

Memo Item

**C. The Ohio Organizing Campaign**

Full Name (Last, First, Middle Initial)

Mailing Address 25 E Boardman St  
Ste 428

City Youngstown State OH Zip Code 44503-1842

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C

Transaction ID : VSG8M9TQ5I

Amount of Each Disbursement this Period: 121752.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	164752.00
<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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Urban Media LLC</b>			Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 2417 N 2Nd St			FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ5</b> Amount of Each Disbursement this Period 7500.00	
City Milwaukee	State WI	Zip Code 53212-2808	Category/ Type 012	
Purpose of Disbursement Donation		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: _____			
Memo Item <input type="checkbox"/>				

Full Name (Last, First, Middle Initial) <b>B. Voces De La Frontera Action</b>			Date of Disbursement MM / DD / YYYY 10 / 05 / 2016	
Mailing Address 1027 S 5Th St			FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQ5</b> Amount of Each Disbursement this Period 25000.00	
City Milwaukee	State WI	Zip Code 53204-1734	Category/ Type 012	
Purpose of Disbursement Donation		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: _____			
Memo Item <input type="checkbox"/>				

Full Name (Last, First, Middle Initial) <b>C. VoteVets Action Fund</b>			Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address PO Box 75357			FEC Identification Number C [REDACTED] <b>Transaction ID : VSG8M9TQB</b> Amount of Each Disbursement this Period 103449.60	
City Washington	State DC	Zip Code 20013-0357	Category/ Type 001	
Purpose of Disbursement Misdeposited Funds		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: _____			
Memo Item <input type="checkbox"/>				

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

135949.60

**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 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)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Wisconsin Jobs Now, Inc.**

Mailing Address 1862 W Fond Du Lac Ave

City Milwaukee

State WI

Zip Code 53205-1146

Purpose of Disbursement Donation

012

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2016

FEC Identification Number

C  
Transaction ID : VSG8M9TQ6  
Amount of Each Disbursement this Period  
109375.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Working America**

Mailing Address 815 16Th St NW

City Washington

State DC

Zip Code 20006-4101

Purpose of Disbursement Donation

012

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2016

FEC Identification Number

C  
Transaction ID : VSG8M9TQ6  
Amount of Each Disbursement this Period  
2068967.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. Working America**

Mailing Address 815 16Th St NW

City Washington

State DC

Zip Code 20006-4101

Purpose of Disbursement Donation

012

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2016

FEC Identification Number

C  
Transaction ID : VSG8M9TQ6  
Amount of Each Disbursement this Period  
125160.00

Memo Item

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

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

2303502.50

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Working America**

Mailing Address 815 16Th St NW

City  
Washington

State  
DC

Zip Code  
20006-4101

Purpose of Disbursement  
Donation

012

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
10			14			2016			

FEC Identification Number

C [ ]  
**Transaction ID : VSG8M9TQ6!**  
Amount of Each Disbursement this Period  
[ ] 82312.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. Working America**

Mailing Address 815 16Th St NW

City  
Washington

State  
DC

Zip Code  
20006-4101

Purpose of Disbursement  
Donation

012

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
10			18			2016			

FEC Identification Number

C [ ]  
**Transaction ID : VSG8M9TQ6!**  
Amount of Each Disbursement this Period  
[ ] 275925.00

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

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]  
Amount of Each Disbursement this Period  
[ ]

Memo Item

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

[ ] 358237.50

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

[ ] 4600055.34



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 177 OF 289
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**For Our Future**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AFSCME Council 32</b>			Nature of Debt (Purpose): Printing - Pledge Cards
Mailing Address 8033 Excelsior Dr			
City Madison	State WI	Zip Code 53717-2900	

Outstanding Balance Beginning This Period	<b>Transaction ID : VSEA49H8TJ4</b>	
<input type="text" value="547.20"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="547.20"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Bouchard Gold Communications</b>			Nature of Debt (Purpose): Printing - Canvassing Literature
Mailing Address 1617 W 6Th St Ste B			
City Austin	State TX	Zip Code 78703-5080	

Outstanding Balance Beginning This Period	<b>Transaction ID : VSEA49H88V4</b>	
<input type="text" value="52121.65"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="9841.73"/>	<input type="text" value="52121.65"/>	<input type="text" value="9841.73"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Fieldworks LLC</b>			Nature of Debt (Purpose): Printing - Canvassing Literature
Mailing Address PO Box 9897			
City Washington	State DC	Zip Code 20016-8897	

Outstanding Balance Beginning This Period	<b>Transaction ID : VSEA49H8GJ2</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="174.80"/>	<input type="text" value="0.00"/>	<input type="text" value="174.80"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="10016.53"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 178 OF 289
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**For Our Future**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>For Our Future Action Fund</b>			Nature of Debt (Purpose): Canvassing Services
Mailing Address 888 16Th St NW Ste 650			
City Washington	State DC	Zip Code 20006-4112	

Outstanding Balance Beginning This Period 240111.10	<b>Transaction ID : VSEA49H7E98</b>	
Amount Incurred This Period 126209.99	Payment This Period 240111.10	Outstanding Balance at Close of This Period 126209.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>For Our Future Action Fund</b>			Nature of Debt (Purpose): Admin Salaries and Benefits
Mailing Address 888 16Th St NW Ste 650			
City Washington	State DC	Zip Code 20006-4112	

Outstanding Balance Beginning This Period 77224.00	<b>Transaction ID : VSEA49H8BQ9</b>	
Amount Incurred This Period 0.00	Payment This Period 77224.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HSG Campaigns</b>			Nature of Debt (Purpose): Advertising Production and Design
Mailing Address 1201 W 5Th St Ste F105			
City Los Angeles	State CA	Zip Code 90017-5120	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : VSEA49H8GK0</b>	
Amount Incurred This Period 1000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	127209.99
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 179 OF 289
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**For Our Future**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Image Plus Graphics, Inc.</b>			Nature of Debt (Purpose): Printing - Stickers
Mailing Address 1440 NE 131St St			
City North Miami	State FL	Zip Code 33161-4424	

Outstanding Balance Beginning This Period	<b>Transaction ID : VSEA49H8GM8</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="3462.00"/>	<input type="text" value="0.00"/>	<input type="text" value="3462.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lee, Mark, , ,</b>			Nature of Debt (Purpose): Advertising Production and Design
Mailing Address 8253 Rush St			
City Rosemead	State CA	Zip Code 91770-3614	

Outstanding Balance Beginning This Period	<b>Transaction ID : VSEA49H8GN5</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mission Control</b>			Nature of Debt (Purpose): Canvassing Literature
Mailing Address 624 Hebron Ave Ste 200			
City Glastonbury	State CT	Zip Code 06033-5006	

Outstanding Balance Beginning This Period	<b>Transaction ID : VSEA49H8GP3</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2760.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2760.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="7222.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 180 OF 289
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**For Our Future**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Paychex</b>			Nature of Debt (Purpose): Canvassing Services
Mailing Address 1175 John St			
City West Henrietta	State NY	Zip Code 14586-9102	

Outstanding Balance Beginning This Period	Transaction ID : VSEA49H8BG4		
53492.20			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
156301.82	53492.20	156301.82	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RKJ Promotions</b>			Nature of Debt (Purpose): Advertising Production and Design
Mailing Address 5455 S Fort Apache Rd Ste 108-114			
City Las Vegas	State NV	Zip Code 89148-6408	

Outstanding Balance Beginning This Period	Transaction ID : VSEA49H8GQ1		
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
2000.00	0.00	2000.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Waterfront Strategies</b>			Nature of Debt (Purpose): Advertising and Mail Production and Design
Mailing Address 3050 K St NW NW Ste. 100			
City Washington	State DC	Zip Code 20007-5108	

Outstanding Balance Beginning This Period	Transaction ID : VSEA49H8GR9		
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
76358.60	0.00	76358.60	

1) SUBTOTALS This Period This Page (optional).....▶	234660.42
2) TOTALS This Period (last page this line number only).....▶	379108.94
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	379108.94

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>AFSCME Council 32</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 09 / 21 / 2016			
Mailing Address 8033 Excelsior Dr	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     273.60                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Madison</td> <td style="width:17%; padding: 2px;">State WI</td> <td style="width:50%; padding: 2px;">Zip Code 53717-2900</td> </tr> </table>		City Madison	State WI	Zip Code 53717-2900
City Madison		State WI	Zip Code 53717-2900	
Purpose of Expenditure Payment for Printing - Pledge Cards, as Disclosed on Oct. Quarterly Report				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY RODHAM, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     2304901.02                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item <b>AFSCME Council 32</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 09 / 21 / 2016			
Mailing Address 8033 Excelsior Dr	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     273.60                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Madison</td> <td style="width:17%; padding: 2px;">State WI</td> <td style="width:50%; padding: 2px;">Zip Code 53717-2900</td> </tr> </table>		City Madison	State WI	Zip Code 53717-2900
City Madison		State WI	Zip Code 53717-2900	
Purpose of Expenditure Payment for Printing - Pledge Cards, as Disclosed on Oct. Quarterly Report				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose FEINGOLD, RUSSELL DANA, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: WI			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     120395.19                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     547.20                 </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     _____                 </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     _____                 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*  
 Signature
 

 [Electronically Filed]
 

 Date M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
--	--

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Asian Journal Publications</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      10 / 06 / 2016                 </div>
Mailing Address 3700 W Desert Inn Rd Ste A	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">2000.00</span> </div> Transaction ID : <b>VSG8M9T4SW6</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      10 / 05 / 2016                 </div>
City Las Vegas State NV Zip Code 89102-8377	
Purpose of Expenditure Print Advertising Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MASTO, CATHERINE CORTEZ, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">164632.92</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Asian Journal Publications</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      10 / 06 / 2016                 </div>
Mailing Address 3700 W Desert Inn Rd Ste A	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">1200.00</span> </div> Transaction ID : <b>VSG8M9T4SX4</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      10 / 05 / 2016                 </div>
City Las Vegas State NV Zip Code 89102-8377	
Purpose of Expenditure Print Advertising Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD J., , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">3200.00</span> </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;"> </span> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;"> </span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Asian Journal Publications</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016	
Mailing Address 3700 W Desert Inn Rd Ste A		Amount <span style="font-size: 1.2em;">400.00</span>	
City Las Vegas	State NV	Zip Code 89102-8377	<b>Transaction ID : VSG8M9T4SY2</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 05 / 2016
Purpose of Expenditure Print Advertising		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: HECK, JOE, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ _____ District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ <span style="font-size: 1.2em; border: 1px solid black; padding: 2px;">164632.92</span>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Asian Journal Publications</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2016	
Mailing Address 3700 W Desert Inn Rd Ste A		Amount <span style="font-size: 1.2em;">1800.00</span>	
City Las Vegas	State NV	Zip Code 89102-8377	<b>Transaction ID : VSG8M9TB7B8</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2016
Purpose of Expenditure Print Advertising		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: HECK, JOE, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ _____ District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ <span style="font-size: 1.2em; border: 1px solid black; padding: 2px;">164632.92</span>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="font-size: 1.2em; border: 1px solid black; padding: 2px;">2200.00</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="font-size: 1.2em; border: 1px solid black; padding: 2px;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="font-size: 1.2em; border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Asian Journal Publications</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 3700 W Desert Inn Rd Ste A			Amount <input type="text"/>		
City Las Vegas	State NV	Zip Code 89102-8377	<b>Transaction ID : VSG8M9TB7C6</b>		
Purpose of Expenditure Print Advertising		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: TRUMP, DONALD J., ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item <b>Bouchard Gold Communications</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 1617 W 6Th St Ste B			Amount <input type="text"/>		
City Austin	State TX	Zip Code 78703-5080	<b>Transaction ID : VSG8M9TQYZ0</b>		
Purpose of Expenditure Payment for Printing and Shipping - Canvassing Literature		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: TRUMP, DONALD J., ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

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*Bidel-Niyat, Shirin, , ,* [Electronically Filed]  
Signature \_\_\_\_\_ Date  /  /



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00620971             </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Bouchard Gold Communications</b>		Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 13 / 2016</div>	
Mailing Address 1617 W 6Th St Ste B		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">13406.88</div>	
City Austin	State TX	Zip Code 78703-5080	Transaction ID : <b>VSG8M9TQZ08</b>
Purpose of Expenditure Payment for Printing and Shipping - Canvassing Literature		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 04 / 2016</div>
Name of Federal Candidate: Johnson, Ronald Harold, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">120395.19</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Bouchard Gold Communications</b>		Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 13 / 2016</div>	
Mailing Address 1617 W 6Th St Ste B		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">2694.16</div>	
City Austin	State TX	Zip Code 78703-5080	Transaction ID : <b>VSG8M9TQZ16</b>
Purpose of Expenditure Payment for Printing and Shipping - Canvassing Literature		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 04 / 2016</div>
Name of Federal Candidate: Gallagher, Michael John, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">20282.05</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">16101.04</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, ,*

**[Electronically Filed]**

Date

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

01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Bouchard Gold Communications</b>			Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 09 / 17 / 2016		
Mailing Address 1617 W 6Th St Ste B			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1020.62</div>		
City Austin	State TX	Zip Code 78703-5080			
Purpose of Expenditure Payment for Printing - Canvassing Literature		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>VSG8M9TQZ32</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 04 / 2016		
Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WI</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">120395.19</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item <b>Bouchard Gold Communications</b>			Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 09 / 17 / 2016		
Mailing Address 1617 W 6Th St Ste B			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1020.63</div>		
City Austin	State TX	Zip Code 78703-5080			
Purpose of Expenditure Payment for Printing - Canvassing Literature		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>VSG8M9TQZ48</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 04 / 2016		
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">2041.25</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Bouchard Gold Communications</b> *		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016
Mailing Address 1617 W 6Th St Ste B		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">617.04</div>
City Austin State TX Zip Code 78703-5080		
Purpose of Expenditure Printing - Canvassing Literature		Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">2304901.02</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Bouchard Gold Communications</b> *		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2016
Mailing Address 1617 W 6Th St Ste B		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1646.71</div>
City Austin State TX Zip Code 78703-5080		
Purpose of Expenditure Printing - Canvassing Literature		Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">2304901.02</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Bouchard Gold Communications</b> *			Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2016
Mailing Address 1617 W 6Th St Ste B			
City Austin	State TX	Zip Code 78703-5080	
Purpose of Expenditure Printing - Canvassing Literature		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: NELSON, TOM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: WI	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">20282.05</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Bouchard Gold Communications</b> *			Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2016
Mailing Address 1617 W 6Th St Ste B			
City Austin	State TX	Zip Code 78703-5080	
Purpose of Expenditure Printing - Canvassing Literature		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: WI	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">120395.19</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Bouchard Gold Communications</b> *		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016
Mailing Address 1617 W 6Th St Ste B		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">617.04</div>
City Austin State TX Zip Code 78703-5080		
Purpose of Expenditure Printing - Canvassing Literature		Transaction ID : <b>VSG8M9TD3X8</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>
Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">120395.19</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Centaur North Strategies</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 14 / 2016
Mailing Address PO Box 1474		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11700.00</div>
City Whittier State CA Zip Code 90609-1474		
Purpose of Expenditure Actual Cost for Printing - Doorhangers		Transaction ID : <b>VSG8M9TDQY8</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 14 / 2016
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">2304901.02</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">11700.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Centaur North Strategies
Mailing Address PO Box 1474
City Whittier State CA Zip Code 90609-1474
Purpose of Expenditure Actual Cost for Printing - Doorhangers
Category/Type 004
Date of Public Distribution/Dissemination 10/14/2016
Amount 11700.00
Transaction ID : VSG8M9TDQZ6
Date of Disbursement or Obligation 10/14/2016

Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,
Support Oppose
Office Sought: House Senate State: NV
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Centaur North Strategies
Mailing Address PO Box 1474
City Whittier State CA Zip Code 90609-1474
Purpose of Expenditure Actual Cost for Printing - Doorhangers
Category/Type 004
Date of Public Distribution/Dissemination 10/14/2016
Amount 4239.13
Transaction ID : VSG8M9TDR04
Date of Disbursement or Obligation 10/18/2016

Name of Federal Candidate: TITUS, DINA, , ,
Support Oppose
Office Sought: House Senate State: NV
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 15939.13
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , ,

[Electronically Filed]

Date

01/27/2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on 

M	M
D	D
Y	Y

Y	Y	Y	Y
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Full Name of Payee <input type="checkbox"/> Memo Item <b>Centaur North Strategies</b>	Date of Public Distribution/Dissemination <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">M</td></tr> <tr><td style="width: 20px; text-align: center;">D</td><td style="width: 20px; text-align: center;">D</td></tr> <tr><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td></tr> </table>	M	M	D	D	Y	Y	Y	Y	Y	Y
M	M										
D	D										
Y	Y										
Y	Y	Y	Y								
Mailing Address <b>PO Box 1474</b>	Amount <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; text-align: center;">3</td><td style="width: 20px; text-align: center;">3</td><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">1</td><td style="width: 20px; text-align: center;">3</td><td style="width: 20px; text-align: center;">0</td></tr> </table>	3	3	9	1	3	0				
3		3	9	1	3	0					
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City Whittier</td> <td style="width:20%;">State CA</td> <td style="width:50%;">Zip Code 90609-1474</td> </tr> </table>		City Whittier	State CA	Zip Code 90609-1474							
City Whittier	State CA	Zip Code 90609-1474									
Purpose of Expenditure Actual Cost for Printing - Doorhangers											
Name of Federal Candidate: ROSEN, JACKY, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose										
Calendar Year-To-Date Per Election for Office Sought	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; text-align: center;">4</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">7</td><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">9</td></tr> </table>	4	0	7	9	9					
4	0	7	9	9							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate											
District: <u>03</u> State: <u>NV</u>											
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶											

Full Name of Payee <input type="checkbox"/> Memo Item <b>Centaur North Strategies</b>	Date of Public Distribution/Dissemination <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">M</td></tr> <tr><td style="width: 20px; text-align: center;">D</td><td style="width: 20px; text-align: center;">D</td></tr> <tr><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td></tr> </table>	M	M	D	D	Y	Y	Y	Y	Y	Y
M	M										
D	D										
Y	Y										
Y	Y	Y	Y								
Mailing Address <b>PO Box 1474</b>	Amount <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; text-align: center;">8</td><td style="width: 20px; text-align: center;">4</td><td style="width: 20px; text-align: center;">7</td><td style="width: 20px; text-align: center;">8</td><td style="width: 20px; text-align: center;">3</td></tr> </table>	8	4	7	8	3					
8		4	7	8	3						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City Whittier</td> <td style="width:20%;">State CA</td> <td style="width:50%;">Zip Code 90609-1474</td> </tr> </table>		City Whittier	State CA	Zip Code 90609-1474							
City Whittier	State CA	Zip Code 90609-1474									
Purpose of Expenditure Actual Cost for Printing - Doorhangers											
Name of Federal Candidate: KIHUEN, RUBEN, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose										
Calendar Year-To-Date Per Election for Office Sought	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; text-align: center;">8</td><td style="width: 20px; text-align: center;">4</td><td style="width: 20px; text-align: center;">7</td><td style="width: 20px; text-align: center;">8</td><td style="width: 20px; text-align: center;">3</td></tr> </table>	8	4	7	8	3					
8	4	7	8	3							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate											
District: <u>04</u> State: <u>NV</u>											
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶											

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">4</td><td style="width: 20px; text-align: center;">2</td><td style="width: 20px; text-align: center;">3</td><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">1</td><td style="width: 20px; text-align: center;">3</td></tr></table>	4	2	3	9	1	3
4	2	3	9	1	3		
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;"> </td><td style="width: 20px; text-align: center;"> </td><td style="width: 20px; text-align: center;"> </td><td style="width: 20px; text-align: center;"> </td><td style="width: 20px; text-align: center;"> </td><td style="width: 20px; text-align: center;"> </td></tr></table>						
(a) TOTAL Independent Expenditures .....	▶ <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;"> </td><td style="width: 20px; text-align: center;"> </td><td style="width: 20px; text-align: center;"> </td><td style="width: 20px; text-align: center;"> </td><td style="width: 20px; text-align: center;"> </td><td style="width: 20px; text-align: center;"> </td></tr></table>						

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Bidel-Niyat, Shirin, , , [Electronically Filed] Date

M	M
D	D
Y	Y

0	1
2	7
2	0

Y	Y	Y	Y
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**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>Clear Channel Outdoor</b>			<input type="checkbox"/> Memo Item
Mailing Address 5333 Old Winter Garden Rd			
City Orlando	State FL	Zip Code 32811-1520	
Purpose of Expenditure Advertising		Category/ Type <input type="text"/> 004	

Date of Public Distribution/Dissemination  
 10 /  12 /  2016

Amount  
 3473.00

**Transaction ID : VSG8M9T07Y2**  
Date of Disbursement or Obligation  
 /  /

Name of Federal Candidate:  
CLINTON, HILLARY RODHAM, , ,

Support  Oppose

Calendar Year-To-Date  
Per Election for Office Sought  2304901.02

Office Sought:  House  President  Senate  
District: \_\_\_\_\_ State: \_\_\_\_\_

Disbursement For:  Primary  General  
2016  Other (specify) ▶ \_\_\_\_\_

Full Name of Payee <b>Extra Extras, Inc.</b>			<input type="checkbox"/> Memo Item
Mailing Address 151 E Los Torritos St			
City Weslaco	State TX	Zip Code 78596-5333	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/1-10/2		Category/ Type <input type="text"/> 004	

Date of Public Distribution/Dissemination  
 10 /  01 /  2016

Amount  
 2497.50

**Transaction ID : VSG8M9VK5P6**  
Date of Disbursement or Obligation  
 /  /

Name of Federal Candidate:  
CLINTON, HILLARY RODHAM, , ,

Support  Oppose

Calendar Year-To-Date  
Per Election for Office Sought  2304901.02

Office Sought:  House  President  Senate  
District: \_\_\_\_\_ State: \_\_\_\_\_

Disbursement For:  Primary  General  
2016  Other (specify) ▶ \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/> 5970.50
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(a) TOTAL Independent Expenditures .....	<input type="text"/>

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Bidel-Niyat, Shirin, , ,

[Electronically Filed]

Date

01 /  27 /  2017

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report     48-hour report     New report    Amends report filed on   /  /  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Extra Extras, Inc.</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">01</span> / <span style="font-size: 1.2em;">2016</span> </div>			
Mailing Address <b>151 E Los Torritos St</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2497.50</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black; padding: 2px;">City Weslaco</td> <td style="width:16%; border-right: 1px solid black; padding: 2px;">State TX</td> <td style="padding: 2px;">Zip Code 78596-5333</td> </tr> </table>		City Weslaco	State TX	Zip Code 78596-5333
City Weslaco		State TX	Zip Code 78596-5333	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/1-10/2				
Name of Federal Candidate: <input type="checkbox"/> Support TRUMP, DONALD J., , , <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Extra Extras, Inc.</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">01</span> / <span style="font-size: 1.2em;">2016</span> </div>			
Mailing Address <b>151 E Los Torritos St</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2497.50</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black; padding: 2px;">City Weslaco</td> <td style="width:16%; border-right: 1px solid black; padding: 2px;">State TX</td> <td style="padding: 2px;">Zip Code 78596-5333</td> </tr> </table>		City Weslaco	State TX	Zip Code 78596-5333
City Weslaco		State TX	Zip Code 78596-5333	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/1-10/2				
Name of Federal Candidate: <input type="checkbox"/> Support HECK, JOE, , , <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">164632.92</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">4995.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date 01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
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Check if  24-hour report     48-hour report     New report    Amends report filed on   /  /  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Extra Extras, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">10 / 01 / 2016</span>			
Mailing Address 151 E Los Torritos St	Amount <span style="border: 1px solid black; padding: 2px;">2497.50</span> <b>Transaction ID : VSG8M9VK5S0</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">  /  /  </span>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Weslaco</td> <td style="width:17%; padding: 2px;">State TX</td> <td style="width:50%; padding: 2px;">Zip Code 78596-5333</td> </tr> </table>		City Weslaco	State TX	Zip Code 78596-5333
City Weslaco		State TX	Zip Code 78596-5333	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/1-10/2				
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NV			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Extra Extras, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">10 / 03 / 2016</span>			
Mailing Address 151 E Los Torritos St	Amount <span style="border: 1px solid black; padding: 2px;">8347.50</span> <b>Transaction ID : VSG8M9T62N9</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">  /  /  </span>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Weslaco</td> <td style="width:17%; padding: 2px;">State TX</td> <td style="width:50%; padding: 2px;">Zip Code 78596-5333</td> </tr> </table>		City Weslaco	State TX	Zip Code 78596-5333
City Weslaco		State TX	Zip Code 78596-5333	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9				
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">10845.00</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">  </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">  </span>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>Extra Extras, Inc.</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>151 E Los Torritos St</b>	Amount <input type="text"/>
City <b>Weslaco</b> State <b>TX</b> Zip Code <b>78596-5333</b>	
Purpose of Expenditure <b>Actual Cost for Canvassing Services for 10/3-10/9</b>	Transaction ID : <b>VSG8M9T62P7</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>TRUMP, DONALD J., , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>2304901.02</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Extra Extras, Inc.</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>151 E Los Torritos St</b>	Amount <input type="text"/>
City <b>Weslaco</b> State <b>TX</b> Zip Code <b>78596-5333</b>	
Purpose of Expenditure <b>Actual Cost for Canvassing Services for 10/3-10/9</b>	Transaction ID : <b>VSG8M9T62Q5</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>HECK, JOE, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>164632.92</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/> <b>16695.00</b>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(a) TOTAL Independent Expenditures .....	<input type="text"/>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Extra Extras, Inc.</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016						
Mailing Address 151 E Los Torritos St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8347.50</div> Transaction ID : <b>VSG8M9T62R3</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Weslaco</td> <td>TX</td> <td>78596-5333</td> </tr> </table>		City	State	Zip Code	Weslaco	TX	78596-5333
City		State	Zip Code				
Weslaco	TX	78596-5333					
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MASTO, CATHERINE CORTEZ, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>NV</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">164632.92</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item <b>Extra Extras, Inc.</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016						
Mailing Address 151 E Los Torritos St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9022.50</div> Transaction ID : <b>VSG8M9TB6W9</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Weslaco</td> <td>TX</td> <td>78596-5333</td> </tr> </table>		City	State	Zip Code	Weslaco	TX	78596-5333
City		State	Zip Code				
Weslaco	TX	78596-5333					
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY RODHAM, , ,	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">17370.00</div>
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) <b>TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Extra Extras, Inc.
Mailing Address 151 E Los Torritos St
City Weslaco State TX Zip Code 78596-5333
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16
Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 9022.50
Transaction ID: VSG8M9TB6X7
Date of Disbursement or Obligation

Name of Federal Candidate: TRUMP, DONALD J., ,
Support Oppose
Office Sought: President
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 2304901.02

Full Name of Payee Extra Extras, Inc.
Mailing Address 151 E Los Torritos St
City Weslaco State TX Zip Code 78596-5333
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16
Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 9022.50
Transaction ID: VSG8M9TB6Y5
Date of Disbursement or Obligation

Name of Federal Candidate: HECK, JOE, ,
Support Oppose
Office Sought: Senate
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 164632.92

(a) SUBTOTAL of Itemized Independent Expenditures 18045.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01/27/2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00620971                 </div>
--	---

Check if  24-hour report  48-hour report ➤  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Extra Extras, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016			
Mailing Address 151 E Los Torritos St	Amount <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">9022.50</span> <b>Transaction ID : VSG8M9TB6Z3</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black; padding: 2px;">City Weslaco</td> <td style="width:17%; border-right: 1px solid black; padding: 2px;">State TX</td> <td style="padding: 2px;">Zip Code 78596-5333</td> </tr> </table>		City Weslaco	State TX	Zip Code 78596-5333
City Weslaco		State TX	Zip Code 78596-5333	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16				
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: _____ State: NV			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">164632.92</span>			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Extra Extras, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 17 / 2016			
Mailing Address 151 E Los Torritos St	Amount <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">3751.16</span> <b>Transaction ID : VSG8M9TFN96</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black; padding: 2px;">City Weslaco</td> <td style="width:17%; border-right: 1px solid black; padding: 2px;">State TX</td> <td style="padding: 2px;">Zip Code 78596-5333</td> </tr> </table>		City Weslaco	State TX	Zip Code 78596-5333
City Weslaco		State TX	Zip Code 78596-5333	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19				
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> Other (specify) _____ District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">2304901.02</span>			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ➤	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">12773.66</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ➤	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ➤	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,* **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Extra Extras, Inc. Memo Item
Mailing Address 151 E Los Torritos St
City Weslaco State TX Zip Code 78596-5333
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004

Date of Public Distribution/Dissemination 10 / 17 / 2016
Amount 3751.16
Transaction ID : VSG8M9TFNA4
Date of Disbursement or Obligation

Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 164632.92

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

Full Name of Payee Extra Extras, Inc. Memo Item
Mailing Address 151 E Los Torritos St
City Weslaco State TX Zip Code 78596-5333
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004

Date of Public Distribution/Dissemination 10 / 17 / 2016
Amount 3582.00
Transaction ID : VSG8M9TFNB1
Date of Disbursement or Obligation

Name of Federal Candidate: TRUMP, DONALD J., , ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 2304901.02

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

(a) SUBTOTAL of Itemized Independent Expenditures
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

7333.16

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , ,

[Electronically Filed]

Date

01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
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Check if  24-hour report     48-hour report     New report    Amends report filed on   /  /  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Extra Extras, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">10 / 17 / 2016</span>			
Mailing Address 151 E Los Torritos St	Amount <span style="border: 1px solid black; padding: 2px;">1567.13</span>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Weslaco</td> <td style="width:17%; border-bottom: 1px solid black;">State TX</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 78596-5333</td> </tr> </table>		City Weslaco	State TX	Zip Code 78596-5333
City Weslaco		State TX	Zip Code 78596-5333	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TITUS, DINA, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01    State: NV			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5806.26</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Extra Extras, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">10 / 17 / 2016</span>			
Mailing Address 151 E Los Torritos St	Amount <span style="border: 1px solid black; padding: 2px;">688.69</span>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Weslaco</td> <td style="width:17%; border-bottom: 1px solid black;">State TX</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 78596-5333</td> </tr> </table>		City Weslaco	State TX	Zip Code 78596-5333
City Weslaco		State TX	Zip Code 78596-5333	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose ROSEN, JACKY, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03    State: NV			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4079.99</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">2255.82</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

01 / 27 / 2017

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report     48-hour report     New report    Amends report filed on   /  /  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Extra Extras, Inc.</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">17</span> / <span style="font-size: 1.2em;">2016</span> </div>
Mailing Address <b>151 E Los Torritos St</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3582.00</div>
City <b>Weslaco</b> State <b>TX</b> Zip Code <b>78596-5333</b>	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19    Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>HECK, JOE, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">164632.92</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Fieldworks LLC</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">17</span> / <span style="font-size: 1.2em;">2016</span> </div>
Mailing Address <b>PO Box 9897</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8101.95</div>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20016-8897</b>	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19    Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>CLINTON, HILLARY RODHAM, , ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">11683.95</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
--	---

Check if  24-hour report     48-hour report     New report    Amends report filed on   /  /  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Fieldworks LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">10 / 17 / 2016</span>
Mailing Address <b>PO Box 9897</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">405.00</div>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20016-8897</b>	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19    Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>MASTO, CATHERINE CORTEZ, , ,</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">164632.92</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Fieldworks LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">10 / 17 / 2016</span>
Mailing Address <b>PO Box 9897</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7195.50</div>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20016-8897</b>	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19    Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>TRUMP, DONALD J., , ,</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    District: _____ <input type="checkbox"/> House    State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">7600.50</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Fieldworks LLC</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>PO Box 9897</b>	Amount <input type="text"/>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20016-8897</b>	<b>405.00</b>
Purpose of Expenditure <b>Actual Cost for Canvassing Services from 10/17-10/19</b> Category/Type <input type="text"/>	<b>Transaction ID : VSG8M9TFNK3</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>HECK, JOE, , ,</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
<b>164632.92</b>	<input type="text"/>

Full Name of Payee <input type="checkbox"/> Memo Item <b>Fieldworks LLC</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>PO Box 9897</b>	Amount <input type="text"/>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20016-8897</b>	<b>906.45</b>
Purpose of Expenditure <b>Actual Cost for Canvassing Services from 10/17-10/19</b> Category/Type <input type="text"/>	<b>Transaction ID : VSG8M9TFNM1</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>ROSS, DEBORAH, K, ,</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>NC</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
<b>2373.85</b>	<input type="text"/>

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
<b>(a) TOTAL</b> Independent Expenditures .....	<input type="text"/>
<b>1311.45</b>	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report     48-hour report     New report    Amends report filed on   /  /  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Fieldworks LLC</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">2016</span> </div>
Mailing Address <b>PO Box 9897</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3455.25</div>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20016-8897</b>	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16	
Name of Federal Candidate: <b>McGinty, Kathleen Alana, , ,</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Other    State: <b>PA</b>
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; text-align: right;">173622.61</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Fieldworks LLC</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">2016</span> </div>
Mailing Address <b>PO Box 9897</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3455.25</div>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20016-8897</b>	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16	
Name of Federal Candidate: <b>TOOMEY, PATRICK JOSEPH, , ,</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Other    State: <b>PA</b>
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; text-align: right;">173622.61</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">6910.50</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

  /  /    
01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>Fieldworks LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>PO Box 9897</b>	Amount <input type="text"/> <b>777.38</b> <b>Transaction ID : VSG8M9TRJ31</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20016-8897</b>	
Purpose of Expenditure <b>Actual Cost for Canvassing Services for 10/10-10/16</b> Category/Type <input type="text"/> <b>004</b>	
Name of Federal Candidate: <b>MASTO, CATHERINE CORTEZ, , ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>164632.92</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Fieldworks LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>PO Box 9897</b>	Amount <input type="text"/> <b>777.38</b> <b>Transaction ID : VSG8M9TRJ49</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20016-8897</b>	
Purpose of Expenditure <b>Actual Cost for Canvassing Services for 10/10-10/16</b> Category/Type <input type="text"/> <b>004</b>	
Name of Federal Candidate: <b>HECK, JOE, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>164632.92</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> <b>1554.76</b>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
<b>(a) TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>Fieldworks LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>PO Box 9897</b>	Amount <input type="text"/>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20016-8897</b>	<b>4232.63</b>
Purpose of Expenditure <b>Actual Cost for Canvassing Services for 10/10-10/16</b> Category/Type <input type="text"/> <b>004</b>	<b>Transaction ID : VSG8M9TRJ65</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>TRUMP, DONALD J., ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>2304901.02</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Fieldworks LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>PO Box 9897</b>	Amount <input type="text"/>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20016-8897</b>	<b>4232.63</b>
Purpose of Expenditure <b>Actual Cost for Canvassing Services for 10/10-10/16</b> Category/Type <input type="text"/> <b>004</b>	<b>Transaction ID : VSG8M9TRJ73</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>CLINTON, HILLARY RODHAM, ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>2304901.02</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/> <b>8465.26</b>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(a) TOTAL Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , [Electronically Filed] Date  /  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Fieldworks LLC
Mailing Address PO Box 9897
City Washington State DC Zip Code 20016-8897
Purpose of Expenditure Estimated Cost for Printing - Canvassing Literature
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 87.40
Transaction ID: VSG8M9TFMQ3
Date of Disbursement or Obligation

Name of Federal Candidate: CLINTON, HILLARY RODHAM, ,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Fieldworks LLC
Mailing Address PO Box 9897
City Washington State DC Zip Code 20016-8897
Purpose of Expenditure Estimated Cost for Printing - Canvassing Literature
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 87.40
Transaction ID: VSG8M9TFMS9
Date of Disbursement or Obligation

Name of Federal Candidate: ROSS, DEBORAH, K,
Support Oppose
Office Sought: House Senate State: NC
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date 01/27/2017

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9
Category/Type 004
Date of Public Distribution/Dissemination 10/03/2016
Amount 3311.03
Transaction ID : VSG8M9T62S0
Date of Disbursement or Obligation

Name of Federal Candidate: MURPHY, PATRICK E, ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9
Category/Type 004
Date of Public Distribution/Dissemination 10/03/2016
Amount 1103.68
Transaction ID : VSG8M9T62T8
Date of Disbursement or Obligation

Name of Federal Candidate: Rubio, Marco, ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9
Category/Type 004
Date of Public Distribution/Dissemination 10/03/2016
Amount 6531.18
Transaction ID : VSG8M9T62X2
Date of Disbursement or Obligation

Name of Federal Candidate: McGinty, Kathleen Alana, ,
Support Oppose
Office Sought: House Senate PA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9
Category/Type 004
Date of Public Distribution/Dissemination 10/03/2016
Amount 6531.18
Transaction ID : VSG8M9T62Y0
Date of Disbursement or Obligation

Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, ,
Support Oppose
Office Sought: House Senate PA
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>For Our Future Action Fund</b> *		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016
Mailing Address 888 16Th St NW Ste 650		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">16115.44</div>
City Washington	State DC	
Zip Code 20006-4112	Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; margin-left: 20px;">2304901.02</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>For Our Future Action Fund</b> *		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016
Mailing Address 888 16Th St NW Ste 650		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">16115.44</div>
City Washington	State DC	
Zip Code 20006-4112	Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; margin-left: 20px;">2304901.02</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
--	--

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>For Our Future Action Fund</b> *			Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016
Mailing Address 888 16Th St NW Ste 650			
City Washington	State DC	Zip Code 20006-4112	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: STRICKLAND, TED, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <u>OH</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">79725.16</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>For Our Future Action Fund</b> *			Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016
Mailing Address 888 16Th St NW Ste 650			
City Washington	State DC	Zip Code 20006-4112	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: PORTMAN, ROB, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <u>OH</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">79725.16</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Payment for Canvassing Services from 9/19-9/25
Category/Type 004
Date of Public Distribution/Dissemination 09/19/2016
Amount 6038.88
Transaction ID : VSG8M9TR0C4
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, ,
Support Oppose
Office Sought: House Senate State: PA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Payment for Canvassing Services from 9/19-9/25
Category/Type 004
Date of Public Distribution/Dissemination 09/19/2016
Amount 6038.88
Transaction ID : VSG8M9TR0D2
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: McGinty, Kathleen Alana, ,
Support Oppose
Office Sought: House Senate State: PA
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 12077.76
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date 01/27/2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      09 / 19 / 2016                 </div>
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      1641.00                 </div> Transaction ID : <b>VSG8M9TR0E0</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      10 / 06 / 2016                 </div>
City Washington State DC Zip Code 20006-4112	
Purpose of Expenditure Payment for Canvassing Services from 9/19-9/25 Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: STRICKLAND, TED, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">79725.16</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      09 / 19 / 2016                 </div>
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      11756.12                 </div> Transaction ID : <b>VSG8M9TR0F8</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      10 / 06 / 2016                 </div>
City Washington State DC Zip Code 20006-4112	
Purpose of Expenditure Payment for Canvassing Services from 9/19-9/25 Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: MURPHY, PATRICK E, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">295213.94</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      13397.12                 </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      _____                 </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      _____                 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Payment for Canvassing Services from 9/19-9/25
Category/Type 004
Date of Public Distribution/Dissemination 09/19/2016
Amount 3918.71
Transaction ID : VSG8M9TR0G6
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: Rubio, Marco, , ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
2016 Other (specify)

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Payment for Canvassing Services from 9/19-9/25
Category/Type 004
Date of Public Distribution/Dissemination 09/19/2016
Amount 39029.54
Transaction ID : VSG8M9TR0H3
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: TRUMP, DONALD J., , ,
Support Oppose
Office Sought: President Senate
Disbursement For: Primary General
2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 42948.25
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , , [Electronically Filed] Date 01/27/2017
Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; display: inline-block; width: 15px; height: 15px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>		Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> 09 / 19 / 2016	
Mailing Address 888 16Th St NW Ste 650		Amount <span style="font-size: 0.8em;">M M M M / Y Y Y Y Y Y</span> 39029.54	
City Washington	State DC	Zip Code 20006-4112	<b>Transaction ID : VSG8M9TR0J1</b> Date of Disbursement or Obligation <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016
Purpose of Expenditure Payment for Canvassing Services from 9/19-9/25		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2304901.02</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>		Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> 09 / 19 / 2016	
Mailing Address 888 16Th St NW Ste 650		Amount <span style="font-size: 0.8em;">M M M M / Y Y Y Y Y Y</span> 1641.00	
City Washington	State DC	Zip Code 20006-4112	<b>Transaction ID : VSG8M9TR0K9</b> Date of Disbursement or Obligation <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016
Purpose of Expenditure Payment for Canvassing Services from 9/19-9/25		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: PORTMAN, ROB, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">79725.16</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M M M / Y Y Y Y Y Y</span> 40670.54
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M M M / Y Y Y Y Y Y</span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M M M / Y Y Y Y Y Y</span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 01 / 27 / 2017  
 Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 09 / 26 / 2016	
Mailing Address 888 16Th St NW Ste 650		Amount <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 1378.44	
City Washington	State DC	Zip Code 20006-4112	<b>Transaction ID : VSG8M9TR0M7</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: PORTMAN, ROB, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 79725.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 09 / 26 / 2016	
Mailing Address 888 16Th St NW Ste 650		Amount <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 16068.67	
City Washington	State DC	Zip Code 20006-4112	<b>Transaction ID : VSG8M9TR0N5</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: MURPHY, PATRICK E, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 295213.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 17447.11
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 01 / 27 / 2017  
 Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 888 16Th St NW Ste 650		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20006-4112	Transaction ID : <b>VSG8M9TR0R9</b>
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: McGinty, Kathleen Alana, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 888 16Th St NW Ste 650		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20006-4112	Transaction ID : <b>VSG8M9TR0S7</b>
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: STRICKLAND, TED, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
--	--

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 09 / 26 / 2016
Mailing Address 888 16Th St NW Ste 650		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">48823.03</div>
City Washington State DC Zip Code 20006-4112		
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30		Transaction ID : <b>VSG8M9TR0T5</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016
Name of Federal Candidate: TRUMP, DONALD J., , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">2304901.02</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 09 / 26 / 2016
Mailing Address 888 16Th St NW Ste 650		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">48823.03</div>
City Washington State DC Zip Code 20006-4112		
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30		Transaction ID : <b>VSG8M9TR0V2</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">2304901.02</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">97646.06</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services from 10/1-10/2
Category/Type 004
Date of Public Distribution/Dissemination 10/01/2016
Amount 918.00
Transaction ID : VSG8M9VJSZ3
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: MURPHY, PATRICK E, ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services from 10/1-10/2
Category/Type 004
Date of Public Distribution/Dissemination 10/01/2016
Amount 306.00
Transaction ID : VSG8M9VJT01
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: Rubio, Marco, ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1224.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date 01/27/2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2016	
Mailing Address 888 16Th St NW Ste 650		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5172.06</div>	
City Washington	State DC	Zip Code 20006-4112	Transaction ID : <b>VSG8M9VJT18</b>
Purpose of Expenditure Actual Cost for Canvassing Services from 10/1-10/2		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2016	
Mailing Address 888 16Th St NW Ste 650		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5172.06</div>	
City Washington	State DC	Zip Code 20006-4112	Transaction ID : <b>VSG8M9VJT26</b>
Purpose of Expenditure Actual Cost for Canvassing Services from 10/1-10/2		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016
Name of Federal Candidate: TRUMP, DONALD J., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">10344.12</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 888 16Th St NW Ste 650		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20006-4112	Transaction ID : <b>VSG8M9VJT34</b>
Purpose of Expenditure Actual Cost for Canvassing Services from 10/1-10/2		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: McGinty, Kathleen Alana, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>For Our Future Action Fund</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 888 16Th St NW Ste 650		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20006-4112	Transaction ID : <b>VSG8M9VJT42</b>
Purpose of Expenditure Actual Cost for Canvassing Services from 10/1-10/2		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services from 10/1-10/2
Category/Type 004
Date of Public Distribution/Dissemination 10/01/2016
Amount 426.66
Transaction ID : VSG8M9VJT50
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: PORTMAN, ROB, ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services from 10/1-10/2
Category/Type 004
Date of Public Distribution/Dissemination 10/01/2016
Amount 426.66
Transaction ID : VSG8M9VJT68
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: Johnson, Ronald Harold, ,
Support Oppose
Office Sought: House Senate State: WI
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 853.32
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01 / 27 / 2017

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>For Our Future Action Fund</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016						
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15443.16</div> Transaction ID : <b>VSG8M9TB7T6</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20006-4112</td> </tr> </table>		City	State	Zip Code	Washington	DC	20006-4112
City		State	Zip Code				
Washington	DC	20006-4112					
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16							
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> State: _____						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ <div style="border: 1px solid black; padding: 2px; text-align: right; width: 200px; margin: 0 auto;">2304901.02</div>						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>For Our Future Action Fund</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016						
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15443.16</div> Transaction ID : <b>VSG8M9TB7V4</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20006-4112</td> </tr> </table>		City	State	Zip Code	Washington	DC	20006-4112
City		State	Zip Code				
Washington	DC	20006-4112					
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16							
Name of Federal Candidate: TRUMP, DONALD J., , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> State: _____						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ <div style="border: 1px solid black; padding: 2px; text-align: right; width: 200px; margin: 0 auto;">2304901.02</div>						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16
Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 7187.58
Transaction ID: VSG8M9TB7W2
Date of Disbursement or Obligation

Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, ,
Support Oppose
Office Sought: House Senate State: PA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16
Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 7187.58
Transaction ID: VSG8M9TB7X0
Date of Disbursement or Obligation

Name of Federal Candidate: McGinty, Kathleen Alana, ,
Support Oppose
Office Sought: House Senate State: PA
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>For Our Future Action Fund</b> *	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">10 / 10 / 2016</span>
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">623.58</div> Transaction ID : <b>VSG8M9TB7Y8</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>
City Washington State DC Zip Code 20006-4112	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16 Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: STRICKLAND, TED, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">79725.16</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>For Our Future Action Fund</b> *	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">10 / 10 / 2016</span>
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2862.00</div> Transaction ID : <b>VSG8M9TB7Z6</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>
City Washington State DC Zip Code 20006-4112	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16 Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: MURPHY, PATRICK E, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">295213.94</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16
Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 954.00
Transaction ID : VSG8M9TB804
Date of Disbursement or Obligation

Name of Federal Candidate: Rubio, Marco, , ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 295213.94

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16
Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 623.58
Transaction ID : VSG8M9TRR75
Date of Disbursement or Obligation

Name of Federal Candidate: PORTMAN, ROB, , ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 79725.16

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , ,

[Electronically Filed]

Date 01/27/2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>For Our Future Action Fund</b> * <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 888 16Th St NW Ste 650		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20006-4112	Transaction ID : <b>VSG8M9TFNQ4</b>
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>For Our Future Action Fund</b> * <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 888 16Th St NW Ste 650		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20006-4112	Transaction ID : <b>VSG8M9TFNR2</b>
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: TRUMP, DONALD J., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 1120.50
Transaction ID : VSG8M9TFNS0
Date of Disbursement or Obligation

Name of Federal Candidate: MURPHY, PATRICK E, ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 373.50
Transaction ID : VSG8M9TFNT8
Date of Disbursement or Obligation

Name of Federal Candidate: Rubio, Marco, ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>For Our Future Action Fund</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 17 / 2016
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      393.84                 </div> Transaction ID : <b>VSG8M9TFNV6</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>
City Washington State DC Zip Code 20006-4112	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19 Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: STRICKLAND, TED, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: OH <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">79725.16</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>For Our Future Action Fund</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 17 / 2016
Mailing Address 888 16Th St NW Ste 650	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      3905.58                 </div> Transaction ID : <b>VSG8M9TFNW4</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>
City Washington State DC Zip Code 20006-4112	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19 Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: McGinty, Kathleen Alana, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: PA <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">173622.61</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                  0.00             </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 3905.58
Transaction ID : VSG8M9TFNX2
Date of Disbursement or Obligation

Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, ,
Support Oppose
Office Sought: House Senate State: PA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee For Our Future Action Fund
Mailing Address 888 16Th St NW Ste 650
City Washington State DC Zip Code 20006-4112
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 393.84
Transaction ID : VSG8M9TRRB6
Date of Disbursement or Obligation

Name of Federal Candidate: PORTMAN, ROB, ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date 01/27/2017

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
--	--

Check if  24-hour report  48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016
Mailing Address PO Box 120557		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1890.00</div>
City Boston	State MA	
Zip Code 02112-0557	Transaction ID : <b>VSG8M9T6229</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: MURPHY, PATRICK E, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">295213.94</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016
Mailing Address PO Box 120557		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">630.00</div>
City Boston	State MA	
Zip Code 02112-0557	Transaction ID : <b>VSG8M9T6245</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: Rubio, Marco, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">295213.94</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">2520.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; padding: 0 2px;">C</span> C00620971             </div>
--	---

Check if  24-hour report     48-hour report     New report    Amends report filed on    /    /   

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 0 5px;">10</span> / <span style="border: 1px solid black; padding: 0 5px;">03</span> / <span style="border: 1px solid black; padding: 0 5px;">2016</span>			
Mailing Address PO Box 120557	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5764.96</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black; padding: 2px;">City Boston</td> <td style="width:17%; border-right: 1px solid black; padding: 2px;">State MA</td> <td style="padding: 2px;">Zip Code 02112-0557</td> </tr> </table>		City Boston	State MA	Zip Code 02112-0557
City Boston		State MA	Zip Code 02112-0557	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9				
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
Category/Type <span style="border: 1px solid black; padding: 0 5px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 0 5px;">  </span> / <span style="border: 1px solid black; padding: 0 5px;">  </span> / <span style="border: 1px solid black; padding: 0 5px;">  </span>			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 0 5px;">10</span> / <span style="border: 1px solid black; padding: 0 5px;">03</span> / <span style="border: 1px solid black; padding: 0 5px;">2016</span>			
Mailing Address PO Box 120557	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5764.96</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black; padding: 2px;">City Boston</td> <td style="width:17%; border-right: 1px solid black; padding: 2px;">State MA</td> <td style="padding: 2px;">Zip Code 02112-0557</td> </tr> </table>		City Boston	State MA	Zip Code 02112-0557
City Boston		State MA	Zip Code 02112-0557	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9				
Name of Federal Candidate: TRUMP, DONALD J., , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
Category/Type <span style="border: 1px solid black; padding: 0 5px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 0 5px;">  </span> / <span style="border: 1px solid black; padding: 0 5px;">  </span> / <span style="border: 1px solid black; padding: 0 5px;">  </span>			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 0 5px;">10</span> / <span style="border: 1px solid black; padding: 0 5px;">03</span> / <span style="border: 1px solid black; padding: 0 5px;">2016</span>			
Mailing Address PO Box 120557	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5764.96</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black; padding: 2px;">City Boston</td> <td style="width:17%; border-right: 1px solid black; padding: 2px;">State MA</td> <td style="padding: 2px;">Zip Code 02112-0557</td> </tr> </table>		City Boston	State MA	Zip Code 02112-0557
City Boston		State MA	Zip Code 02112-0557	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9				
Name of Federal Candidate: TRUMP, DONALD J., , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
Category/Type <span style="border: 1px solid black; padding: 0 5px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 0 5px;">  </span> / <span style="border: 1px solid black; padding: 0 5px;">  </span> / <span style="border: 1px solid black; padding: 0 5px;">  </span>			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">11529.92</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Bidel-Niyat, Shirin, , ,    **[Electronically Filed]**    Date 01 / 27 / 2017

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ➤  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016						
Mailing Address PO Box 120557	Amount <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">724.96</span> <b>Transaction ID : VSG8M9TR193</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Boston</td> <td>MA</td> <td>02112-0557</td> </tr> </table>		City	State	Zip Code	Boston	MA	02112-0557
City		State	Zip Code				
Boston	MA	02112-0557					
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose McGinty, Kathleen Alana, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: PA						
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">173622.61</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016						
Mailing Address PO Box 120557	Amount <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">724.96</span> <b>Transaction ID : VSG8M9TR1B9</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Boston</td> <td>MA</td> <td>02112-0557</td> </tr> </table>		City	State	Zip Code	Boston	MA	02112-0557
City		State	Zip Code				
Boston	MA	02112-0557					
Purpose of Expenditure Actual Cost for Canvassing Services for 10/3-10/9							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TOOMEY, PATRICK JOSEPH, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: PA						
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">173622.61</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1449.92</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></span>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016	
Mailing Address <b>PO Box 120557</b>		Amount <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 17044.39	
City Boston	State MA	Zip Code 02112-0557	<b>Transaction ID : VSG8M9TB701</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2304901.02</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016	
Mailing Address <b>PO Box 120557</b>		Amount <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 17044.39	
City Boston	State MA	Zip Code 02112-0557	<b>Transaction ID : VSG8M9TB719</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: TRUMP, DONALD J., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2304901.02</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; font-size: 1.2em;">34088.78</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; font-size: 1.2em;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; font-size: 1.2em;"> </span>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016		
Mailing Address <b>PO Box 120557</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1724.76</div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Boston</td> <td style="width:17%;">State MA</td> <td style="width:50%;">Zip Code 02112-0557</td> </tr> </table>		City Boston	State MA
City Boston	State MA	Zip Code 02112-0557	
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: Rubio, Marco, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">295213.94</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 17 / 2016		
Mailing Address <b>PO Box 120557</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8911.48</div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Boston</td> <td style="width:17%;">State MA</td> <td style="width:50%;">Zip Code 02112-0557</td> </tr> </table>		City Boston	State MA
City Boston	State MA	Zip Code 02112-0557	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">10636.24</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
--	--

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 17 / 2016</div>
Mailing Address <b>PO Box 120557</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">8911.48</div>
City <b>Boston</b> State <b>MA</b> Zip Code <b>02112-0557</b>	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19	
Name of Federal Candidate: <b>TRUMP, DONALD J., , ,</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	District: _____ State: _____
Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 06 / 2016</div>
Transaction ID : <b>VSG8M9TFNZ7</b>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 17 / 2016</div>
Mailing Address <b>PO Box 120557</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">2403.32</div>
City <b>Boston</b> State <b>MA</b> Zip Code <b>02112-0557</b>	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19	
Name of Federal Candidate: <b>MURPHY, PATRICK E., , ,</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate	District: _____ State: <b>FL</b>
Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 06 / 2016</div>
Transaction ID : <b>VSG8M9TFP05</b>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">11314.80</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,* **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address <b>PO Box 120557</b>		Amount <input type="text"/>	
City <b>Boston</b>	State <b>MA</b>	Zip Code <b>02112-0557</b>	<b>Transaction ID : VSG8M9TFP13</b>
Purpose of Expenditure <b>Actual Cost for Canvassing Services from 10/17-10/19</b>		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>McGinty, Kathleen Alana, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>PA</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address <b>PO Box 120557</b>		Amount <input type="text"/>	
City <b>Boston</b>	State <b>MA</b>	Zip Code <b>02112-0557</b>	<b>Transaction ID : VSG8M9TFP21</b>
Purpose of Expenditure <b>Actual Cost for Canvassing Services from 10/17-10/19</b>		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>TOOMEY, PATRICK JOSEPH, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>PA</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
<b>(a) TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address <b>PO Box 120557</b>		Amount <input type="text"/>	
City <b>Boston</b>	State <b>MA</b>	Zip Code <b>02112-0557</b>	<b>Transaction ID : VSG8M9TFP39</b>
Purpose of Expenditure <b>Actual Cost for Canvassing Services from 10/17-10/19</b>		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>Rubio, Marco, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address <b>PO Box 120557</b>		Amount <input type="text"/>	
City <b>Boston</b>	State <b>MA</b>	Zip Code <b>02112-0557</b>	<b>Transaction ID : VSG8M9TFP47</b>
Purpose of Expenditure <b>Actual Cost for Canvassing Services from 10/17-10/19</b>		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>KANDER, JASON, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MO</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
<b>(a) TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,* [Electronically Filed]  
Signature Date  /  /



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Grassroots Campaigns, Inc.
Mailing Address PO Box 120557
City Boston State MA Zip Code 02112-0557
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16
Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 3246.31
Transaction ID : VSG8M9TRPH1
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: McGinty, Kathleen Alana, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 173622.61

Full Name of Payee Grassroots Campaigns, Inc.
Mailing Address PO Box 120557
City Boston State MA Zip Code 02112-0557
Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16
Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 3246.31
Transaction ID : VSG8M9TRPJ9
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 173622.61

(a) SUBTOTAL of Itemized Independent Expenditures 6492.62
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date 01/27/2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016
Mailing Address <b>PO Box 120557</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5174.28</div>
City Boston	State MA	
Zip Code 02112-0557	Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: MURPHY, PATRICK E, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">295213.94</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016
Mailing Address <b>PO Box 120557</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">582.73</div>
City Boston	State MA	
Zip Code 02112-0557	Purpose of Expenditure Actual Cost for Canvassing Services for 10/10-10/16	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: KANDER, JASON, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4844.22</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">5757.01</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*  
 Signature
 

 [Electronically Filed]
 

 Date M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
Mailing Address <b>PO Box 120557</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">2518.84</span> </div>
City <b>Boston</b> State <b>MA</b> Zip Code <b>02112-0557</b>	
Purpose of Expenditure <b>Payment for Canvassing Services from 10/1-10/2</b>	
Name of Federal Candidate: <b>CLINTON, HILLARY RODHAM, , ,</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Other State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
Mailing Address <b>PO Box 120557</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">2518.84</span> </div>
City <b>Boston</b> State <b>MA</b> Zip Code <b>02112-0557</b>	
Purpose of Expenditure <b>Payment for Canvassing Services from 10/1-10/2</b>	
Name of Federal Candidate: <b>TRUMP, DONALD J., , ,</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Other State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">5037.68</span> </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">0.00</span> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">5037.68</span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 120557	Amount <input type="text"/>
City Boston State MA Zip Code 02112-0557	Transaction ID : <b>VSG8M9VK696</b>
Purpose of Expenditure Payment for Canvassing Services from 10/1-10/2	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Category/Type <input type="text"/> 004	

Name of Federal Candidate: MURPHY, PATRICK E, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 295213.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Grassroots Campaigns, Inc.</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 120557	Amount <input type="text"/>
City Boston State MA Zip Code 02112-0557	Transaction ID : <b>VSG8M9VK6A4</b>
Purpose of Expenditure Payment for Canvassing Services from 10/1-10/2	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Category/Type <input type="text"/> 004	

Name of Federal Candidate: Rubio, Marco, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 295213.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 1259.41
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , , **[Electronically Filed]** Date  /  /   
Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>GRSG Company</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1701 Pennsylvania Ave NW Ste 300	Amount <input type="text"/> 7716.00 <b>Transaction ID : VSG8M9TFP63</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Washington State DC Zip Code 20006-5813	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19 Category/Type <input type="text"/> 004	

Name of Federal Candidate: CLINTON, HILLARY RODHAM, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2304901.02	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>GRSG Company</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1701 Pennsylvania Ave NW Ste 300	Amount <input type="text"/> 7716.00 <b>Transaction ID : VSG8M9TFP71</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Washington State DC Zip Code 20006-5813	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19 Category/Type <input type="text"/> 004	

Name of Federal Candidate: TRUMP, DONALD J., , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2304901.02	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 15432.00
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
--	--

Check if  24-hour report     48-hour report     New report    Amends report filed on   /  /  

Full Name of Payee <input type="checkbox"/> Memo Item <b>GRSG Company</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">10 / 17 / 2016</span>
Mailing Address 1701 Pennsylvania Ave NW Ste 300	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2893.50</div> Transaction ID : <b>VSG8M9TFP89</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">10 / 11 / 2016</span>
City Washington    State DC    Zip Code 20006-5813	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19    Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: MURPHY, PATRICK E, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">295213.94</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>GRSG Company</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">10 / 17 / 2016</span>
Mailing Address 1701 Pennsylvania Ave NW Ste 300	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">964.50</div> Transaction ID : <b>VSG8M9TFP96</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">10 / 11 / 2016</span>
City Washington    State DC    Zip Code 20006-5813	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19    Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: Rubio, Marco, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">295213.94</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">3858.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
--	--

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>GRSG Company</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016
Mailing Address 1701 Pennsylvania Ave NW Ste 300	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6882.00</div> Transaction ID : <b>VSG8M9TRQK0</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 11 / 2016
City Washington State DC Zip Code 20006-5813	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16 Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>GRSG Company</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016
Mailing Address 1701 Pennsylvania Ave NW Ste 300	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6882.00</div> Transaction ID : <b>VSG8M9TRQM8</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 11 / 2016
City Washington State DC Zip Code 20006-5813	
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16 Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: TRUMP, DONALD J., , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">13764.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee GRSG Company
Mailing Address 1701 Pennsylvania Ave NW Ste 300
City Washington State DC Zip Code 20006-5813
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16
Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 2580.75
Transaction ID : VSG8M9TRQN5
Date of Disbursement or Obligation 10/11/2016

Name of Federal Candidate: MURPHY, PATRICK E, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 295213.94

Full Name of Payee GRSG Company
Mailing Address 1701 Pennsylvania Ave NW Ste 300
City Washington State DC Zip Code 20006-5813
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16
Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 860.25
Transaction ID : VSG8M9TRQP3
Date of Disbursement or Obligation 10/11/2016

Name of Federal Candidate: Rubio, Marco, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 295213.94

(a) SUBTOTAL of Itemized Independent Expenditures 3441.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date 01/27/2017

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee HSG Campaigns
Mailing Address 1201 W 5Th St Ste F105
City Los Angeles State CA Zip Code 90017-5120
Purpose of Expenditure Advertising Production and Design
Category/Type 004
Date of Public Distribution/Dissemination 10/13/2016
Amount 100.00
Transaction ID: VSG8M9TB7D4
Date of Disbursement or Obligation

Name of Federal Candidate: TRUMP, DONALD J., ,
Support Oppose
Office Sought: President
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought 2304901.02

Full Name of Payee HSG Campaigns
Mailing Address 1201 W 5Th St Ste F105
City Los Angeles State CA Zip Code 90017-5120
Purpose of Expenditure Advertising Production and Design
Category/Type 004
Date of Public Distribution/Dissemination 10/13/2016
Amount 900.00
Transaction ID: VSG8M9TB7E2
Date of Disbursement or Obligation

Name of Federal Candidate: HECK, JOE, ,
Support Oppose
Office Sought: Senate
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought 164632.92

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date 01/27/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Image Plus Graphics, Inc.
Mailing Address 1440 NE 131St St
City North Miami State FL Zip Code 33161-4424
Purpose of Expenditure Printing - Placards Category/Type 004
Date of Public Distribution/Dissemination 09/30/2016
Amount 2344.00
Transaction ID : VSG8M9T4SR5
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: TRUMP, DONALD J., ,
Support Oppose
Office Sought: President
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 2304901.02

Full Name of Payee Image Plus Graphics, Inc.
Mailing Address 1440 NE 131St St
City North Miami State FL Zip Code 33161-4424
Purpose of Expenditure Printing - Placards Category/Type 004
Date of Public Distribution/Dissemination 09/30/2016
Amount 2344.00
Transaction ID : VSG8M9T4SS3
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: Rubio, Marco, ,
Support Oppose
Office Sought: Senate
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought 295213.94

(a) SUBTOTAL of Itemized Independent Expenditures 4688.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date 01/27/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Image Plus Graphics, Inc.
Mailing Address 1440 NE 131St St
City North Miami State FL Zip Code 33161-4424
Purpose of Expenditure Printing - T-Shirts Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 10131.72
Transaction ID : VSG8M9TB768
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: CLINTON, HILLARY RODHAM, ,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Image Plus Graphics, Inc.
Mailing Address 1440 NE 131St St
City North Miami State FL Zip Code 33161-4424
Purpose of Expenditure Printing - Stickers Category/Type 004
Date of Public Distribution/Dissemination 10/11/2016
Amount 1731.00
Transaction ID : VSG8M9TB784
Date of Disbursement or Obligation

Name of Federal Candidate: CLINTON, HILLARY RODHAM, ,
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 10131.72
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date 01/27/2017

Signature

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>Image Plus Graphics, Inc.</b> * <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1440 NE 131St St	Amount <input type="text"/>
City North Miami State FL Zip Code 33161-4424	
Purpose of Expenditure Printing - Stickers	Transaction ID : <b>VSG8M9TB792</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: TRUMP, DONALD J., , ,	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/>

Full Name of Payee <b>Image Plus Graphics, Inc.</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1440 NE 131St St	Amount <input type="text"/>
City North Miami State FL Zip Code 33161-4424	
Purpose of Expenditure Printing - Placards	Transaction ID : <b>VSG8M9TEE18</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: MURPHY, PATRICK E., , ,	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/>

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(a) TOTAL Independent Expenditures .....	<input type="text"/>

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*Bidel-Niyat, Shirin, , ,*  
Signature

*[Electronically Filed]*

Date  /  /

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>JVA Campaigns LLC</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 240 N 5Th St Ste 360		Amount <input type="text"/>	
City Columbus	State OH	Zip Code 43215-2600	Transaction ID : <b>VSG8M9TCNY6</b>
Purpose of Expenditure Printing - Canvassing Literature		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: KANDER, JASON, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MO</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Kennedy Printing Company, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 5534 Baltimore Ave		Amount <input type="text"/>	
City Philadelphia	State PA	Zip Code 19143-3106	Transaction ID : <b>VSG8M9TFPA4</b>
Purpose of Expenditure Printing - Placards		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: TOOMEY, PATRICK JOSEPH, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>PA</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
<b>(a) TOTAL</b> Independent Expenditures .....	<input type="text"/>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00620971             </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Lee, Mark, , ,</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016						
Mailing Address 8253 Rush St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     1000.00                 </div> Transaction ID : <b>VSG8M9T61D3</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Rosemead</td> <td>CA</td> <td>91770-3614</td> </tr> </table>		City	State	Zip Code	Rosemead	CA	91770-3614
City		State	Zip Code				
Rosemead	CA	91770-3614					
Purpose of Expenditure Advertising Production and Design							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>MASTO, CATHERINE CORTEZ, , ,</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>NV</b>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     164632.92                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item <b>Mission Control</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016						
Mailing Address 624 Hebron Ave Ste 200	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     29587.50                 </div> Transaction ID : <b>VSG8M9TB7Q3</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Glastonbury</td> <td>CT</td> <td>06033-5006</td> </tr> </table>		City	State	Zip Code	Glastonbury	CT	06033-5006
City		State	Zip Code				
Glastonbury	CT	06033-5006					
Purpose of Expenditure Printing - Canvassing Literature							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>CLINTON, HILLARY RODHAM, , ,</b>	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     2304901.02                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 29587.50             </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                               </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                               </div>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Mission Control</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016
Mailing Address 624 Hebron Ave Ste 200	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">29587.50</div> Transaction ID : <b>VSG8M9TB7R1</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016
City Glastonbury State CT Zip Code 06033-5006	
Purpose of Expenditure Printing - Canvassing Literature Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: McGinty, Kathleen Alana, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: PA <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">173622.61</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Mission Control</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016
Mailing Address 624 Hebron Ave Ste 200	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1380.00</div> Transaction ID : <b>VSG8M9TFMG8</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>
City Glastonbury State CT Zip Code 06033-5006	
Purpose of Expenditure Estimated Cost for Printing - Canvassing Literature Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">29587.50</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Mission Control</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016
Mailing Address 624 Hebron Ave Ste 200	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1380.00</div> Transaction ID : <b>VSG8M9TFMH6</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>
City Glastonbury State CT Zip Code 06033-5006	
Purpose of Expenditure Estimated Cost for Printing - Canvassing Literature Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: ROSS, DEBORAH, K, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NC</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">2373.85</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 09 / 26 / 2016
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1080.00</div> Transaction ID : <b>VSG8M9TR033</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>
City West Henrietta State NY Zip Code 14586-9102	
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30 Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: Rubio, Marco, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>FL</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">295213.94</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">1080.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      09 / 26 / 2016                 </div>						
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      3240.00                 </div> Transaction ID : <b>VSG8M9TR041</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      10 / 06 / 2016                 </div>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>West Henrietta</td> <td>NY</td> <td>14586-9102</td> </tr> </table>		City	State	Zip Code	West Henrietta	NY	14586-9102
City		State	Zip Code				
West Henrietta	NY	14586-9102					
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MURPHY, PATRICK E, ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>FL</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      295213.94                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      09 / 26 / 2016                 </div>						
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      876.08                 </div> Transaction ID : <b>VSG8M9TR059</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      10 / 06 / 2016                 </div>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>West Henrietta</td> <td>NY</td> <td>14586-9102</td> </tr> </table>		City	State	Zip Code	West Henrietta	NY	14586-9102
City		State	Zip Code				
West Henrietta	NY	14586-9102					
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Gallagher, Michael John, ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <u>08</u> State: <u>WI</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      20282.05                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      4116.08                 </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      _____                 </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      _____                 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>Paychex</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1175 John St	Amount <input type="text"/> 876.08 <b>Transaction ID : VSG8M9TR067</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code West Henrietta NY 14586-9102	
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30	
Name of Federal Candidate: NELSON, TOM, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: WI
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 20282.05	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Paychex</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1175 John St	Amount <input type="text"/> 4660.15 <b>Transaction ID : VSG8M9TR074</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code West Henrietta NY 14586-9102	
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30	
Name of Federal Candidate: Johnson, Ronald Harold, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: WI
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 120395.19	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 5536.23
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30
Category/Type 004
Date of Public Distribution/Dissemination 09/26/2016
Amount 4660.15
Transaction ID : VSG8M9TR082
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, ,
Support Oppose
Office Sought: House Senate WI
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30
Category/Type 004
Date of Public Distribution/Dissemination 09/26/2016
Amount 19049.87
Transaction ID : VSG8M9TR090
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: TRUMP, DONALD J., ,
Support Oppose
Office Sought: President Senate
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 23710.02
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01/27/2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; display: inline-block; width: 15px; height: 15px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> 09 / 26 / 2016						
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">19049.87</div> Transaction ID : <b>VSG8M9TR0A8</b> Date of Disbursement or Obligation <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>West Henrietta</td> <td>NY</td> <td>14586-9102</td> </tr> </table>		City	State	Zip Code	West Henrietta	NY	14586-9102
City		State	Zip Code				
West Henrietta	NY	14586-9102					
Purpose of Expenditure Payment for Canvassing Services from 9/26-9/30							
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____						
2304901.02	2016						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Paychex</b> *	Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016						
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6335.06</div> Transaction ID : <b>VSG8M9TRGR4</b> Date of Disbursement or Obligation <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>West Henrietta</td> <td>NY</td> <td>14586-9102</td> </tr> </table>		City	State	Zip Code	West Henrietta	NY	14586-9102
City		State	Zip Code				
West Henrietta	NY	14586-9102					
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16							
Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>WI</u>						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____						
120395.19	2016						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">19049.87</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Bidel-Niyat, Shirin, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y  
 Signature 01 / 27 / 2017

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Paychex</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016						
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     6335.06                 </div> <b>Transaction ID : VSG8M9TRGS1</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>West Henrietta</td> <td>NY</td> <td>14586-9102</td> </tr> </table>		City	State	Zip Code	West Henrietta	NY	14586-9102
City		State	Zip Code				
West Henrietta	NY	14586-9102					
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16							
Name of Federal Candidate: Johnson, Ronald Harold, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Paychex</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016						
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     1190.95                 </div> <b>Transaction ID : VSG8M9TRGT9</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>West Henrietta</td> <td>NY</td> <td>14586-9102</td> </tr> </table>		City	State	Zip Code	West Henrietta	NY	14586-9102
City		State	Zip Code				
West Henrietta	NY	14586-9102					
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16							
Name of Federal Candidate: NELSON, TOM, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 0.00             </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 0.00             </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 0.00             </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*  
Signature

**[Electronically Filed]**

Date M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00620971</span> </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Paychex</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016						
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1190.95</div> Transaction ID : <b>VSG8M9TRGW5</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>West Henrietta</td> <td>NY</td> <td>14586-9102</td> </tr> </table>		City	State	Zip Code	West Henrietta	NY	14586-9102
City		State	Zip Code				
West Henrietta	NY	14586-9102					
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Gallagher, Michael John, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: WI						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">20282.05</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Paychex</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016						
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9539.03</div> Transaction ID : <b>VSG8M9TRGY1</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>West Henrietta</td> <td>NY</td> <td>14586-9102</td> </tr> </table>		City	State	Zip Code	West Henrietta	NY	14586-9102
City		State	Zip Code				
West Henrietta	NY	14586-9102					
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MURPHY, PATRICK E, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate District: State: FL						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">295213.94</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16
Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 3179.68
Transaction ID : VSG8M9TRH15
Date of Disbursement or Obligation

Name of Federal Candidate: Rubio, Marco, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
2016 Other (specify)

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16
Category/Type 004
Date of Public Distribution/Dissemination 10/10/2016
Amount 12577.50
Transaction ID : VSG8M9TRH23
Date of Disbursement or Obligation

Name of Federal Candidate: STRICKLAND, TED, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Paychex</b> *	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">10 / 10 / 2016</span>						
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12577.50</div> Transaction ID : <b>VSG8M9TRH30</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>West Henrietta</td> <td>NY</td> <td>14586-9102</td> </tr> </table>		City	State	Zip Code	West Henrietta	NY	14586-9102
City		State	Zip Code				
West Henrietta	NY	14586-9102					
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose PORTMAN, ROB, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <u>OH</u>						
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">79725.16</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Paychex</b> *	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">10 / 10 / 2016</span>						
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">52166.22</div> Transaction ID : <b>VSG8M9TRH72</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>West Henrietta</td> <td>NY</td> <td>14586-9102</td> </tr> </table>		City	State	Zip Code	West Henrietta	NY	14586-9102
City		State	Zip Code				
West Henrietta	NY	14586-9102					
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY RODHAM, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> State: _____						
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

01 / 27 / 2017

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00620971             </div>
--	---

Check if  24-hour report  48-hour report  New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Paychex</b> *	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016
Mailing Address 1175 John St	
City State Zip Code West Henrietta NY 14586-9102	Amount <span style="border: 1px solid black; padding: 2px;">52166.22</span>
Purpose of Expenditure Actual Cost for Canvassing Services from 10/10-10/16	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD J., ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016
Mailing Address 1175 John St	
City State Zip Code West Henrietta NY 14586-9102	Amount <span style="border: 1px solid black; padding: 2px;">26605.61</span>
Purpose of Expenditure Payment for Canvassing Services for 10/3-10/9	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY RODHAM, ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">26605.61</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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*Bidel-Niyat, Shirin, ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016			
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     26605.61                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City West Henrietta</td> <td style="width:17%; padding: 2px;">State NY</td> <td style="width:50%; padding: 2px;">Zip Code 14586-9102</td> </tr> </table>		City West Henrietta	State NY	Zip Code 14586-9102
City West Henrietta		State NY	Zip Code 14586-9102	
Purpose of Expenditure Payment for Canvassing Services for 10/3-10/9				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD J., ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     2304901.02                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016			
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     720.00                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City West Henrietta</td> <td style="width:17%; padding: 2px;">State NY</td> <td style="width:50%; padding: 2px;">Zip Code 14586-9102</td> </tr> </table>		City West Henrietta	State NY	Zip Code 14586-9102
City West Henrietta		State NY	Zip Code 14586-9102	
Purpose of Expenditure Payment for Canvassing Services for 10/3-10/9				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose PORTMAN, ROB, ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: OH			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     79725.16                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 27325.61             </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>

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*Bidel-Niyat, Shirin, , ,* **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 01 / 27 / 2017  
 Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1175 John St	Amount <input type="text"/> 720.00 <b>Transaction ID : VSG8M9TR0Y6</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code West Henrietta NY 14586-9102	
Purpose of Expenditure Payment for Canvassing Services for 10/3-10/9	
Category/Type <input type="text"/> 004	

Name of Federal Candidate: STRICKLAND, TED, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: OH
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 79725.16	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1175 John St	Amount <input type="text"/> 4686.70 <b>Transaction ID : VSG8M9TR0Z4</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code West Henrietta NY 14586-9102	
Purpose of Expenditure Payment for Canvassing Services for 10/3-10/9	
Category/Type <input type="text"/> 004	

Name of Federal Candidate: MURPHY, PATRICK E, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 295213.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 5406.70
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">C</span> C00620971                 </div>
--	--

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016			
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     1562.23                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City West Henrietta</td> <td style="width:17%; padding: 2px;">State NY</td> <td style="width:50%; padding: 2px;">Zip Code 14586-9102</td> </tr> </table>		City West Henrietta	State NY	Zip Code 14586-9102
City West Henrietta		State NY	Zip Code 14586-9102	
Purpose of Expenditure Payment for Canvassing Services for 10/3-10/9				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Rubio, Marco, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>FL</u>			
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 100px;">295213.94</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016			
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     5993.24                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City West Henrietta</td> <td style="width:17%; padding: 2px;">State NY</td> <td style="width:50%; padding: 2px;">Zip Code 14586-9102</td> </tr> </table>		City West Henrietta	State NY	Zip Code 14586-9102
City West Henrietta		State NY	Zip Code 14586-9102	
Purpose of Expenditure Payment for Canvassing Services for 10/3-10/9				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose FEINGOLD, RUSSELL DANA, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>WI</u>			
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 100px;">120395.19</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 7555.47             </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; padding: 0 2px;">C</span> C00620971             </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016			
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     5993.24                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City West Henrietta</td> <td style="width:17%; border-bottom: 1px solid black;">State NY</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 14586-9102</td> </tr> </table>		City West Henrietta	State NY	Zip Code 14586-9102
City West Henrietta		State NY	Zip Code 14586-9102	
Purpose of Expenditure Payment for Canvassing Services for 10/3-10/9				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Johnson, Ronald Harold, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: WI			
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 100px;">120395.19</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016			
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     1126.69                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City West Henrietta</td> <td style="width:17%; border-bottom: 1px solid black;">State NY</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 14586-9102</td> </tr> </table>		City West Henrietta	State NY	Zip Code 14586-9102
City West Henrietta		State NY	Zip Code 14586-9102	
Purpose of Expenditure Payment for Canvassing Services for 10/3-10/9				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose NELSON, TOM, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President <input type="checkbox"/> State: WI			
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 100px;">20282.05</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 7119.93             </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>

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Bidel-Niyat, Shirin, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 01 / 27 / 2017  
 Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00620971             </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     1126.69                 </div>
City State Zip Code West Henrietta NY 14586-9102	
Purpose of Expenditure Payment for Canvassing Services for 10/3-10/9	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Gallagher, Michael John, , ,	Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     20282.05                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2016
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     15526.64                 </div>
City State Zip Code West Henrietta NY 14586-9102	
Purpose of Expenditure Payment for Canvassing Services from 10/1-10/2	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY RODHAM, , ,	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     2304901.02                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 16653.33             </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Bidel-Niyat, Shirin, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 01 / 27 / 2017

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1175 John St	Amount <input type="text"/> 15526.64 <b>Transaction ID : VSG8M9VK605</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code West Henrietta NY 14586-9102	
Purpose of Expenditure Payment for Canvassing Services from 10/1-10/2	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD J., ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2304901.02	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1175 John St	Amount <input type="text"/> 1355.89 <b>Transaction ID : VSG8M9VK613</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code West Henrietta NY 14586-9102	
Purpose of Expenditure Payment for Canvassing Services from 10/1-10/2	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose FEINGOLD, RUSSELL DANA, ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 120395.19	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 16882.53
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00620971             </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2016			
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     1355.89                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City West Henrietta</td> <td style="width:17%; padding: 2px;">State NY</td> <td style="width:50%; padding: 2px;">Zip Code 14586-9102</td> </tr> </table>		City West Henrietta	State NY	Zip Code 14586-9102
City West Henrietta		State NY	Zip Code 14586-9102	
Purpose of Expenditure Payment for Canvassing Services from 10/1-10/2				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Johnson, Ronald Harold, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: WI			
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 100px;">120395.19</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Paychex</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2016			
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     254.90                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City West Henrietta</td> <td style="width:17%; padding: 2px;">State NY</td> <td style="width:50%; padding: 2px;">Zip Code 14586-9102</td> </tr> </table>		City West Henrietta	State NY	Zip Code 14586-9102
City West Henrietta		State NY	Zip Code 14586-9102	
Purpose of Expenditure Payment for Canvassing Services from 10/1-10/2				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Gallagher, Michael John, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President State: WI			
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 100px;">20282.05</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 1610.79             </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Bidel-Niyat, Shirin, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 27 / 2017



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>Paychex</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1175 John St	Amount <input type="text"/> 254.90 <b>Transaction ID : VSG8M9VK647</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City West Henrietta State NY Zip Code 14586-9102	
Purpose of Expenditure Payment for Canvassing Services from 10/1-10/2 Category/Type <input type="text"/> 004	

Name of Federal Candidate: NELSON, TOM, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: WI
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 20282.05	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Paychex</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1175 John St	Amount <input type="text"/> 4686.70 <b>Transaction ID : VSG8M9VK655</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City West Henrietta State NY Zip Code 14586-9102	
Purpose of Expenditure Payment for Canvassing Services from 10/1-10/2 Category/Type <input type="text"/> 004	

Name of Federal Candidate: MURPHY, PATRICK E, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 295213.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 4941.60
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date  01 /  27 /  2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Payment for Canvassing Services from 10/1-10/2
Category/Type 004
Date of Public Distribution/Dissemination 10/01/2016
Amount 1562.23
Transaction ID : VSG8M9VK663
Date of Disbursement or Obligation 10/13/2016

Name of Federal Candidate: Rubio, Marco, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 295213.94

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 21836.16
Transaction ID : VSG8M9TFN05
Date of Disbursement or Obligation

Name of Federal Candidate: CLINTON, HILLARY RODHAM, ,
Support Oppose
Office Sought: President Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 2304901.02

(a) SUBTOTAL of Itemized Independent Expenditures 1562.23
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01/27/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 21836.16
Transaction ID : VSG8M9TFN12
Date of Disbursement or Obligation

Name of Federal Candidate: TRUMP, DONALD J., ,
Support Oppose
Office Sought: President
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought 2304901.02

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 3509.35
Transaction ID : VSG8M9TFN20
Date of Disbursement or Obligation

Name of Federal Candidate: Johnson, Ronald Harold, ,
Support Oppose
Office Sought: Senate
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought 120395.19

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 3509.35
Transaction ID: VSG8M9TFN38
Date of Disbursement or Obligation

Name of Federal Candidate: FEINGOLD, RUSSELL DANA, ,
Support Oppose
Office Sought: House Senate WI
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 659.74
Transaction ID: VSG8M9TFN46
Date of Disbursement or Obligation

Name of Federal Candidate: Gallagher, Michael John, ,
Support Oppose
Office Sought: House Senate WI
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 659.74
Transaction ID: VSG8M9TFN54
Date of Disbursement or Obligation

Name of Federal Candidate: NELSON, TOM, ,
Support Oppose
Office Sought: House Senate State: WI
District: 08
Calendar Year-To-Date Per Election for Office Sought 20282.05
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 3190.10
Transaction ID: VSG8M9TFN62
Date of Disbursement or Obligation

Name of Federal Candidate: MURPHY, PATRICK E, ,
Support Oppose
Office Sought: House Senate State: FL
District:
Calendar Year-To-Date Per Election for Office Sought 295213.94
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , [Electronically Filed] Date 01/27/2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 1063.37
Transaction ID : VSG8M9TFN70
Date of Disbursement or Obligation

Name of Federal Candidate: Rubio, Marco, ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Paychex
Mailing Address 1175 John St
City West Henrietta State NY Zip Code 14586-9102
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2016
Amount 5490.00
Transaction ID : VSG8M9TFN88
Date of Disbursement or Obligation

Name of Federal Candidate: STRICKLAND, TED, ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date 01/27/2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Paychex</b> *	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 10 / 17 / 2016						
Mailing Address 1175 John St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5490.00</div> Transaction ID : <b>VSG8M9TRHG3</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>West Henrietta</td> <td>NY</td> <td>14586-9102</td> </tr> </table>		City	State	Zip Code	West Henrietta	NY	14586-9102
City		State	Zip Code				
West Henrietta	NY	14586-9102					
Purpose of Expenditure Actual Cost for Canvassing Services from 10/17-10/19							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose PORTMAN, ROB, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <u>OH</u>						
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">79725.16</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Rising Tide Interactive</b> *	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 10 / 04 / 2016						
Mailing Address 1250 H St NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3000.00</div> Transaction ID : <b>VSG8M9T5PT1</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005-3952</td> </tr> </table>		City	State	Zip Code	Washington	DC	20005-3952
City		State	Zip Code				
Washington	DC	20005-3952					
Purpose of Expenditure Estimated Cost for Digital Advertising Buy							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD J., , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> State: _____						
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Rising Tide Interactive</b> *	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 10 / 04 / 2016
Mailing Address 1250 H St NW	Amount <input type="text"/> 2000.00 <b>Transaction ID : VSG8M9T5PV9</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Washington State DC Zip Code 20005-3952	
Purpose of Expenditure Estimated Cost for Digital Advertising Buy Category/Type 004	
Name of Federal Candidate: Johnson, Ronald Harold, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 120395.19	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Rising Tide Interactive</b> *	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 10 / 04 / 2016
Mailing Address 1250 H St NW	Amount <input type="text"/> 5000.00 <b>Transaction ID : VSG8M9T5PW7</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Washington State DC Zip Code 20005-3952	
Purpose of Expenditure Estimated Cost for Digital Advertising Buy Category/Type 004	
Name of Federal Candidate: TRUMP, DONALD J., , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2304901.02	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 0.00
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /   
01 / 27 / 2017

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Rising Tide Interactive
Mailing Address 1250 H St NW
City Washington State DC Zip Code 20005-3952
Purpose of Expenditure Estimated Cost for Digital Advertising Buy
Name of Federal Candidate: Rubio, Marco, , ,
Calendar Year-To-Date Per Election for Office Sought 295213.94

Full Name of Payee Rising Tide Interactive
Mailing Address 1250 H St NW
City Washington State DC Zip Code 20005-3952
Purpose of Expenditure Estimated Cost for Digital Advertising Buy
Name of Federal Candidate: Johnson, Ronald Harold, , ,
Calendar Year-To-Date Per Election for Office Sought 120395.19

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , ,

[Electronically Filed]

Date 01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Rising Tide Interactive
Mailing Address 1250 H St NW
City Washington State DC Zip Code 20005-3952
Purpose of Expenditure Estimated Cost for Digital Advertising Buy
Category/Type 004
Date of Public Distribution/Dissemination 10/05/2016
Amount 2500.00
Transaction ID : VSG8M9T5BJ5
Date of Disbursement or Obligation

Name of Federal Candidate: TRUMP, DONALD J., ,
Support Oppose
Office Sought: President
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought 2304901.02

Full Name of Payee Rising Tide Interactive
Mailing Address 1250 H St NW
City Washington State DC Zip Code 20005-3952
Purpose of Expenditure Estimated Cost for Digital Advertising Buy
Category/Type 004
Date of Public Distribution/Dissemination 10/05/2016
Amount 5000.00
Transaction ID : VSG8M9T5BK3
Date of Disbursement or Obligation

Name of Federal Candidate: Rubio, Marco, ,
Support Oppose
Office Sought: Senate
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought 295213.94

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report     48-hour report     New report    Amends report filed on   /  /  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Rising Tide Interactive</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">2016</span> </div>						
Mailing Address 1250 H St NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">136000.00</div> Transaction ID : <b>VSG8M9T93Y7</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">05</span> / <span style="font-size: 1.2em;">2016</span> </div>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005-3952</td> </tr> </table>		City	State	Zip Code	Washington	DC	20005-3952
City		State	Zip Code				
Washington	DC	20005-3952					
Purpose of Expenditure Actual Cost for Digital Advertising Buy							
Name of Federal Candidate: <input type="checkbox"/> Support TRUMP, DONALD J., , , <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item <b>Rising Tide Interactive</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">11</span> / <span style="font-size: 1.2em;">2016</span> </div>						
Mailing Address 1250 H St NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">873.52</div> Transaction ID : <b>VSG8M9TB7S8</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">10</span> / <span style="font-size: 1.2em;">05</span> / <span style="font-size: 1.2em;">2016</span> </div>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005-3952</td> </tr> </table>		City	State	Zip Code	Washington	DC	20005-3952
City		State	Zip Code				
Washington	DC	20005-3952					
Purpose of Expenditure Actual Cost for Digital Advertising Buy							
Name of Federal Candidate: <input type="checkbox"/> Support TRUMP, DONALD J., , , <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">136873.52</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

  /  /    
01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
--	--

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Rising Tide Interactive</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 14 / 2016	
Mailing Address 1250 H St NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">157017.33</div>	
City Washington	State DC	Zip Code 20005-3952	Transaction ID : <b>VSG8M9TCP35</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 05 / 2016
Purpose of Expenditure Actual Cost for Digital Advertising Buy		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</div>			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Rising Tide Interactive</b>		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2016	
Mailing Address 1250 H St NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">58119.71</div>	
City Washington	State DC	Zip Code 20005-3952	Transaction ID : <b>VSG8M9TEDY5</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 05 / 2016
Purpose of Expenditure Actual Cost for Digital Advertising Buy		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: TRUMP, DONALD J., , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">2304901.02</div>			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">215137.04</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Rising Tide Interactive
Mailing Address 1250 H St NW
City Washington State DC Zip Code 20005-3952
Purpose of Expenditure Estimated Cost for Digital Advertising Buy
Name of Federal Candidate: Johnson, Ronald Harold, ,
Calendar Year-To-Date Per Election for Office Sought 120395.19
Disbursement For: General 2016

Full Name of Payee RKJ Promotions
Mailing Address 5455 S Fort Apache Rd Ste 108-114
City Las Vegas State NV Zip Code 89148-6408
Purpose of Expenditure Advertising Production and Design
Name of Federal Candidate: TRUMP, DONALD J., ,
Calendar Year-To-Date Per Election for Office Sought 2304901.02
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>RKJ Promotions</b> * <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 10 / 06 / 2016
Mailing Address 5455 S Fort Apache Rd Ste 108-114	Amount <input type="text"/> 500.00
City Las Vegas State NV Zip Code 89148-6408	
Purpose of Expenditure Advertising Production and Design Category/Type 004	Transaction ID : <b>VSG8M9T61A9</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: HECK, JOE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 164632.92	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Walter Haas Graphics, Inc.</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 10 / 17 / 2016
Mailing Address 123 W 23Rd St	Amount <input type="text"/> 214.00
City Hialeah State FL Zip Code 33010-2211	
Purpose of Expenditure Printing - Campaign Signs Category/Type 004	Transaction ID : <b>VSG8M9TCP02</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> 10 / 18 / 2016
Name of Federal Candidate: MURPHY, PATRICK E, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 295213.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/> 214.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(a) TOTAL Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , ,

[Electronically Filed]

Date

/  /   
01 / 27 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Waterfront Strategies</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2016
Mailing Address 3050 K St NW NW Ste. 100	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5156.86</div> Transaction ID : <b>VSG8M9TB7G7</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>
City Washington State DC Zip Code 20007-5108	
Purpose of Expenditure Advertising Production and Design Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: TRUMP, DONALD J., , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Waterfront Strategies</b> *	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 14 / 2016
Mailing Address 3050 K St NW NW Ste. 100	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2000.00</div> Transaction ID : <b>VSG8M9TCP19</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>
City Washington State DC Zip Code 20007-5108	
Purpose of Expenditure Estimated Cost for Advertising Production and Design Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: TRUMP, DONALD J., , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2304901.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Waterfront Strategies
Mailing Address 3050 K St NW NW Ste. 100
City Washington State DC Zip Code 20007-5108
Purpose of Expenditure Estimated Cost for Direct Mail Production
Category/Type 004
Date of Public Distribution/Dissemination 10/14/2016
Amount 32100.87
Transaction ID: VSG8M9TDQW2
Date of Disbursement or Obligation

Name of Federal Candidate: CLINTON, HILLARY RODHAM, ,
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought 2304901.02
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Waterfront Strategies
Mailing Address 3050 K St NW NW Ste. 100
City Washington State DC Zip Code 20007-5108
Purpose of Expenditure Estimated Cost for Direct Mail Production
Category/Type 004
Date of Public Distribution/Dissemination 10/14/2016
Amount 32100.87
Transaction ID: VSG8M9TDQX0
Date of Disbursement or Obligation

Name of Federal Candidate: TRUMP, DONALD J., ,
Support Oppose
Office Sought: House District:
President Senate State:
Calendar Year-To-Date Per Election for Office Sought 2304901.02
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, ,

[Electronically Filed]

Date

01/27/2017

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620971
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>Waterfront Strategies</b> * <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 3050 K St NW NW Ste. 100	Amount <input type="text"/> 5000.00
City Washington State DC Zip Code 20007-5108	
Purpose of Expenditure Estimated Cost for Digital Advertising Production	Transaction ID : <b>VSG8M9TEDZ2</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: TRUMP, DONALD J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2304901.02	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address	Amount <input type="text"/>
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 0.00
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/> 1227268.52

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Bidel-Niyat, Shirin, , ,*

**[Electronically Filed]**

Date

/  /

Signature