

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**
DLGA PAC

ADDRESS (number and street) **1090 Vermont Avenue, NW**
Suite 750
 Check if different than previously reported. (ACC) **Washington DC 20005**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00685719 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on **11** / **06** / **2018** in the State of

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

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

Signature of Treasurer Patel, Roshan, , , [Electronically Filed] Date **12** / **06** / **2018**

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

DLGA PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<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="74355.60"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="35000.00"/>	<input type="text" value="241000.00"/>
(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="109355.60"/>	<input type="text" value="241000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="66842.25"/>	<input type="text" value="198486.65"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="42513.35"/>	<input type="text" value="42513.35"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="1036.60"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

DLGA PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 18 / 2018 To: M M / D D / Y Y Y Y Y 11 / 26 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	35000.00	241000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	35000.00	241000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	35000.00	241000.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	80.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	80.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	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).....	66842.25	198406.65
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)) ..	66842.25	198486.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	66842.25	198486.65

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	80.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	80.00

**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 6 OF 10
<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

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)
DLGA PAC

A. BioGen Inc.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 225 Binney Street
City Cambridge State MA Zip Code 02142
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 ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 01 / 2018
Transaction ID : SA17.4234
Amount of Each Receipt this Period
10000.00
 Memo Item
IE Account

B. Phrma
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 950 F Street, NW Suite 300
City Washington State DC Zip Code 20004
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 ▼ 25000.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 30 / 2018
Transaction ID : SA17.4233
Amount of Each Receipt this Period
25000.00
 Memo Item
IE Account

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
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	35000.00
TOTAL This Period (last page this line number only).....	35000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DLGA PAC

Full Name (Last, First, Middle Initial) A. Amalgamated Bank		Date of Disbursement MM / DD / YYYY 11 / 16 / 2018
Mailing Address 1825 K Street, NW		FEC Identification Number C [REDACTED] Transaction ID : SB29.4253 Amount of Each Disbursement this Period [REDACTED] 242.25
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Bank Fee	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. A Stronger Ohio		Date of Disbursement MM / DD / YYYY 10 / 18 / 2018
Mailing Address 1225 Eye Street, NW Suite 1100		FEC Identification Number C [REDACTED] Transaction ID : SB29.4237 Amount of Each Disbursement this Period [REDACTED] 20000.00
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Contribution	Category/ Type 011	
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) C. Begich for Alaska		Date of Disbursement MM / DD / YYYY 11 / 01 / 2018
Mailing Address 645 G Street Suite 100-910		FEC Identification Number C [REDACTED] Transaction ID : SB29.4244 Amount of Each Disbursement this Period [REDACTED] 5000.00
City Anchorage	State AK	Zip Code 99501
Purpose of Disbursement Contribution	Category/ Type 011	
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] 25242.25
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)
DLGA PAC

Full Name (Last, First, Middle Initial)
A. Blueprint Interactive

Mailing Address 1730 Rhode Island Ave, NW
Suite 1014

City Washington State DC Zip Code 20036

Purpose of Disbursement Fundraising Web Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 29 / 2018

FEC Identification Number
C

Transaction ID : **SB29.4251**

Amount of Each Disbursement this Period
6500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Forward Florida

Mailing Address 1427 Piedmont Drive E
Suite 2

City Tallahassee State FL Zip Code 32306

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 02 / 2018

FEC Identification Number
C

Transaction ID : **SB29.4246**

Amount of Each Disbursement this Period
20000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Minnesota Victory PAC

Mailing Address 5922 Excelsior Blvd

City Minneapolis State MN Zip Code 55416

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 22 / 2018

FEC Identification Number
C

Transaction ID : **SB29.4238**

Amount of Each Disbursement this Period
10000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 36500.00

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)
DLGA PAC

A. Sutton for South Dakota

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 284

City: Burke State: SD Zip Code: 57523

Purpose of Disbursement: Contribution
Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 29 / 2018

FEC Identification Number: C
Transaction ID : SB29.4240
Amount of Each Disbursement this Period: 5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement
Candidate Name

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

FEC Identification Number: C
Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement
Candidate Name

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

FEC Identification Number: C
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 5000.00

TOTAL This Period (last page this line number only).....▶ 66742.25

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

NAME OF COMMITTEE (In Full)
DLGA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Patel, Roshan, , ,			Nature of Debt (Purpose): Reimbursement: Airfare
Mailing Address 1090 Vermont Avenue, NW Suite 750			
City Washington	State DC	Zip Code 20005	

Outstanding Balance Beginning This Period		Transaction ID : SD10.4160	
1036.60			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1036.60	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	1036.60
2) TOTALS This Period (last page this line number only)..... ▶	1036.60
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) ▶	1036.60