

# 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**  
Vote Tripling PAC

ADDRESS (number and street) 611 Pennsylvania Ave SE  
Num 143  
Washington DC 20003  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00685628 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 [MM] / [DD] / [YYYY] in the State of [ ]  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 02 / 01 / 2020 through [MM] / [DD] / [YYYY] 02 / 29 / 2020

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

Signature of Treasurer Slifka, David, , , [Electronically Filed] Date [MM] / [DD] / [YYYY] 03 / 20 / 2020

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

Vote Tripling 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="2020"/>		65641.35
(b) Cash on Hand at Beginning of Reporting Period.....	69135.66	
(c) Total Receipts (from Line 19) .....	6000.00	11000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	75135.66	76641.35
7. Total Disbursements (from Line 31).....	6380.55	7886.24
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	68755.11	68755.11
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Vote Tripling PAC**

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).....	6000.00	11000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6000.00	11000.00
(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) .....	6000.00	11000.00
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.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	6000.00	11000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6000.00	11000.00

**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 .....	6347.48	7753.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6347.48	7753.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33.07	33.07
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	100.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6380.55	7886.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6380.55	7886.24

**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) .....	6000.00	11000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6000.00	11000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6347.48	7753.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6347.48	7753.17

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 25
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Vote Tripling PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Rockefeller, David, , , Jr.</b>		Date of Receipt MM / DD / YYYY 02 / 21 / 2020 <b>Transaction ID : VVBZQQV5WH2</b>
Mailing Address 1 Rockefeller Plz FI 25		Amount of Each Receipt this Period 5000.00
City New York	State NY	Zip Code 10020-2020
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Philanthropist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Miller, Eric, S., ,</b>		Date of Receipt MM / DD / YYYY 02 / 27 / 2020 <b>Transaction ID : VVBZQQXS7P9</b>
Mailing Address 693 Coleman Rd		Amount of Each Receipt this Period 1000.00
City Mansfield	State OH	Zip Code 44903-1811
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Vote Tripling PAC**

**A. Reynolds, Robert, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 611 Pennsylvania Ave SE  
Num 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement  
Travel & Office Supplies Reimbursement - See Below If Itemized

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 20 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPGG

Amount of Each Disbursement this Period: 604.72

Memo Item

**B. Lyft**

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 20 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ6G

Amount of Each Disbursement this Period: 9.14

Memo Item

**C. Lyft**

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 20 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ6f

Amount of Each Disbursement this Period: 12.96

Memo Item

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

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

604.72

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

Use separate schedule(s) for each category of the Detailed 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)  
**Vote Tripling PAC**

Full Name (Last, First, Middle Initial)

**A. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ71  
Amount of Each Disbursement this Period  
4.09

Memo Item

Full Name (Last, First, Middle Initial)

**B. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ6K  
Amount of Each Disbursement this Period  
7.77

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ6I  
Amount of Each Disbursement this Period  
8.80

Memo Item

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vote Tripling PAC**

Full Name (Last, First, Middle Initial)

**A. The Clarendon Hotel & Spa**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2020

Mailing Address 401 W Clarendon Ave

City  
Phoenix

State  
AZ

Zip Code  
85013-3411

FEC Identification Number

C [REDACTED]

**Transaction ID : VVB0FAPJ74**  
Amount of Each Disbursement this Period

[REDACTED] 22.50

Memo Item

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Lyft**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2020

Mailing Address 185 Berry St  
Ste 5000

City  
San Francisco

State  
CA

Zip Code  
94107-2503

FEC Identification Number

C [REDACTED]

**Transaction ID : VVB0FAPJ6P**  
Amount of Each Disbursement this Period

[REDACTED] 9.13

Memo Item

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Lyft**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2020

Mailing Address 185 Berry St  
Ste 5000

City  
San Francisco

State  
CA

Zip Code  
94107-2503

FEC Identification Number

C [REDACTED]

**Transaction ID : VVB0FAPJ61**  
Amount of Each Disbursement this Period

[REDACTED] 3.44

Memo Item

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

[REDACTED] 0.00

**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)  
**Vote Tripling PAC**

Full Name (Last, First, Middle Initial)

**A. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ73  
Amount of Each Disbursement this Period  
6.75

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4255 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155-2603

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ6H  
Amount of Each Disbursement this Period  
132.70

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ6I  
Amount of Each Disbursement this Period  
7.92

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vote Tripling PAC**

Full Name (Last, First, Middle Initial)

**A. The Clarendon Hotel & Spa**

Mailing Address 401 W Clarendon Ave

City  
Phoenix

State  
AZ

Zip Code  
85013-3411

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	0		2	0		

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VVB0FAPJ6C**  
 Amount of Each Disbursement this Period  
 [Redacted] 207.13

Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 6649

City  
Chicago

State  
IL

Zip Code  
60606-0649

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	0		2	0		

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VVB0FAPJ6S**  
 Amount of Each Disbursement this Period  
 [Redacted] 124.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. Vote Tripling**

Mailing Address 611 Pennsylvania Ave SE  
Num 143

City  
Washington

State  
DC

Zip Code  
20003-4303

Purpose of Disbursement  
Reimbursement for Staff Time

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0		

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VVB0FAPHV**  
 Amount of Each Disbursement this Period  
 [Redacted] 1035.06

Memo Item

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

[Redacted] 1035.06
--------------------

**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)  
**Vote Tripling PAC**

Full Name (Last, First, Middle Initial) <b>A. Cohen, Ryan, Ashley, ,</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2020	
Mailing Address 809 N Las Palmas Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VVB0FAPGE</b> Amount of Each Disbursement this Period [REDACTED] 1995.94	
City Los Angeles	State CA	Zip Code 90038-3515	Category/ Type [REDACTED]
Purpose of Disbursement Travel Reimbursement - See Below If Itemized			
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 Air Lines</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2020	
Mailing Address 1030 Delta Blvd		FEC Identification Number C [REDACTED] <b>Transaction ID : VVB0FAPJ8D</b> Amount of Each Disbursement this Period [REDACTED] 223.63	
City Atlanta	State GA	Zip Code 30354-1989	Category/ Type [REDACTED]
Purpose of Disbursement Travel			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Delta Air Lines</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2020	
Mailing Address 1030 Delta Blvd		FEC Identification Number C [REDACTED] <b>Transaction ID : VVB0FAPJ7I</b> Amount of Each Disbursement this Period [REDACTED] 448.40	
City Atlanta	State GA	Zip Code 30354-1989	Category/ Type [REDACTED]
Purpose of Disbursement Travel			
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).....▶	[REDACTED] 1995.94
<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)  
**Vote Tripling PAC**

Full Name (Last, First, Middle Initial)

**A. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ7E  
Amount of Each Disbursement this Period  
33.35

Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 6649

City Chicago State IL Zip Code 60606-0649

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ7S  
Amount of Each Disbursement this Period  
558.40

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ87  
Amount of Each Disbursement this Period  
2.13

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Vote Tripling PAC**

Full Name (Last, First, Middle Initial)  
**A. The Siren Hotel**

Mailing Address 1509 Broadway St

City Detroit State MI Zip Code 48226-2114

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ81

Amount of Each Disbursement this Period: 137.51

Memo Item

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

Mailing Address 185 Berry St Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ86

Amount of Each Disbursement this Period: 1.85

Memo Item

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

Mailing Address 185 Berry St Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ71

Amount of Each Disbursement this Period: 27.72

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Vote Tripling PAC**

Full Name (Last, First, Middle Initial)

**A. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ7J  
Amount of Each Disbursement this Period  
5.90

Memo Item

Full Name (Last, First, Middle Initial)

**B. The Siren Hotel**

Mailing Address 1509 Broadway St

City Detroit State MI Zip Code 48226-2114

Purpose of Disbursement  
Lodging

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ80  
Amount of Each Disbursement this Period  
165.53

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ81  
Amount of Each Disbursement this Period  
11.48

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Vote Tripling PAC**

**A. Sun Country Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 2005 Cargo Rd

City Minneapolis State MN Zip Code 55450-1131

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ7H

Amount of Each Disbursement this Period: 167.40

Memo Item

**B. Reynolds, Robert, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 611 Pennsylvania Ave SE Num 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement Travel & Office Supplies Reimbursement - See Below If Itemized

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPGE\

Amount of Each Disbursement this Period: 2686.51

Memo Item

**C. Holiday Inn Express & Suites - Madison**

Full Name (Last, First, Middle Initial)

Mailing Address 5150 High Crossing Blvd

City Madison State WI Zip Code 53718-6388

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ6z

Amount of Each Disbursement this Period: 13.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2686.51

**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)  
**Vote Tripling PAC**

Full Name (Last, First, Middle Initial)

**A. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ4V  
Amount of Each Disbursement this Period  
16.27

Memo Item

Full Name (Last, First, Middle Initial)

**B. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ5X  
Amount of Each Disbursement this Period  
5.72

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sun Country Airlines**

Mailing Address 2005 Cargo Rd

City Minneapolis State MN Zip Code 55450-1131

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ5I  
Amount of Each Disbursement this Period  
167.40

Memo Item

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

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

0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Vote Tripling PAC**

Full Name (Last, First, Middle Initial)

### A. Lyft

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ5R  
Amount of Each Disbursement this Period  
19.54

Memo Item

Full Name (Last, First, Middle Initial)

### B. Delta Air Lines

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) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ4V  
Amount of Each Disbursement this Period  
261.95

Memo Item

Full Name (Last, First, Middle Initial)

### C. Lyft

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ5I  
Amount of Each Disbursement this Period  
15.40

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Vote Tripling PAC**

Full Name (Last, First, Middle Initial)

**A. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ54  
Amount of Each Disbursement this Period  
20.99

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mitchell Publishing and Mailers**

Mailing Address 127 S Anderson St

City Los Angeles State CA Zip Code 90033-3219

Purpose of Disbursement  
Printing

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ65  
Amount of Each Disbursement this Period  
93.08

Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 6649

City Chicago State IL Zip Code 60606-0649

Purpose of Disbursement  
Travel

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ5.  
Amount of Each Disbursement this Period  
558.40

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Vote Tripling PAC**

**A. Lyft**

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ5C

Amount of Each Disbursement this Period: 40.53

Memo Item

**B. Lyft**

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ4Z

Amount of Each Disbursement this Period: 13.77

Memo Item

**C. Lyft**

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ5I

Amount of Each Disbursement this Period: 18.99

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Vote Tripling PAC**

Full Name (Last, First, Middle Initial)

**A. Delta Air Lines**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ5H  
Amount of Each Disbursement this Period  
448.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. Lyft**

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ4Y  
Amount of Each Disbursement this Period  
12.85

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mitchell Publishing and Mailers**

Mailing Address 127 S Anderson St

City Los Angeles State CA Zip Code 90033-3219

Purpose of Disbursement  
Printing

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number

C  
Transaction ID : VVB0FAPJ64  
Amount of Each Disbursement this Period  
295.65

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Vote Tripling PAC**

**A. Lyft**

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ52

Amount of Each Disbursement this Period: 24.04

Memo Item

**B. Lyft**

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ5T

Amount of Each Disbursement this Period: 7.12

Memo Item

**C. Lyft**

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ4)

Amount of Each Disbursement this Period: 17.41

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Vote Tripling PAC**

Full Name (Last, First, Middle Initial) <b>A. Holiday Inn Express &amp; Suites - Madison</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2020	
Mailing Address 5150 High Crossing Blvd			
City Madison	State WI	Zip Code 53718-6388	
Purpose of Disbursement Lodging		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number C	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period 295.68		* <input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Lyft</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2020	
Mailing Address 185 Berry St Ste 5000			
City San Francisco	State CA	Zip Code 94107-2503	
Purpose of Disbursement Travel		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number C	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period 33.99		* <input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Lyft</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2020	
Mailing Address 185 Berry St Ste 5000			
City San Francisco	State CA	Zip Code 94107-2503	
Purpose of Disbursement Travel		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number C	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period 24.60		* <input checked="" type="checkbox"/> Memo Item

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Vote Tripling PAC**

**A. Lyft**

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St  
Ste 5000

City San Francisco State CA Zip Code 94107-2503

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 12 / 2020

FEC Identification Number: C

Transaction ID : VVB0FAPJ5S

Amount of Each Disbursement this Period: 13.50

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: MM / DD / YYYY

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: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6322.23



**SCHEDULE B (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)

**Vote Tripling PAC**

Full Name (Last, First, Middle Initial)

**A. Vote Tripling**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2020

Mailing Address 611 Pennsylvania Ave SE  
Num 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement  
In-Kind: Staff Time

FEC Identification Number

C 00710533

Transaction ID : VVB0FAPH9

Amount of Each Disbursement this Period

8.39

Candidate Name

**DePasquale, Eugene, , ,**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: PA District: 10

Memo Item

Full Name (Last, First, Middle Initial)

**B. Vote Tripling**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2020

Mailing Address 611 Pennsylvania Ave SE  
Num 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement  
In-Kind: Staff Time

FEC Identification Number

C 00713792

Transaction ID : VVB0FAPH9

Amount of Each Disbursement this Period

24.68

Candidate Name

**Kunkel, Catherine, , ,**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: WV District: 02

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number

C

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

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

State: District:

Memo Item

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

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

33.07

33.07