

# 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.   
**Hoops PAC**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

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

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

5. Covering Period  /  /  through  /  /

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

Signature of Treasurer Michels, F., Stephen, , [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Hoops 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="30559.80"/>	<input type="text" value="30559.80"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="63503.14"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="102220.00"/>	<input type="text" value="299416.00"/>
(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="165723.14"/>	<input type="text" value="329975.80"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="100985.97"/>	<input type="text" value="265238.63"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="64737.17"/>	<input type="text" value="64737.17"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Hoops PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12500.00	33576.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12500.00	33576.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	77840.00	205840.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	90340.00	239416.00
12. Transfers From Affiliated/Other Party Committees.....	11880.00	60000.00
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)).....▶	102220.00	299416.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	102220.00	299416.00

**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 .....	55985.97	125588.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	55985.97	125588.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35000.00	106150.00
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).....	10000.00	33500.00
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)) ..	100985.97	265238.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	100985.97	265238.63

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	90340.00	239416.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	90340.00	239416.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	55985.97	125588.63
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	55985.97	125588.63

**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 41
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Hoops PAC**

**A. Peterson, Michael, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 712 5Th Ave  
 City New York State NY Zip Code 10019-4108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Peterson Management LLC Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 13 / 2018  
**Transaction ID : VPFBKQNE8W7**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Allen, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 505 5Th Ave S Ste 900  
 City Seattle State WA Zip Code 98104-3821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vulcan Inc Occupation (for Individual) Founder And Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : VPFBKQH5HV8**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Pomper, Brian, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 729 Lawton St  
 City McLean State VA Zip Code 22101-1511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Akin Gump Strauss Hauer & Feld LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 16 / 2018  
**Transaction ID : VPFBKQ509X8**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Hoops PAC**

**A. Actblue**

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2018

**Transaction ID : VPFBKQ509X8E**

Amount of Each Receipt this Period  
2500.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

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

Mailing Address

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

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

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
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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 ▼

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).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	12500.00

**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 41
<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)  
**Hoops PAC**

**A. Nike, Inc. PAC**

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

Mailing Address 1 SW Bowerman Dr

City Beaverton	State OR	Zip Code 97005-0979
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FEC ID number of contributing federal political committee. **C** C00142786

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
08	/	06	/	2018

**Transaction ID : VPFBKQ7RY90**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. California Dairies Federal PAC**

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

Mailing Address 200 N Plaza Dr

City Visalia	State CA	Zip Code 93291-9356
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FEC ID number of contributing federal political committee. **C** C00349746

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2018

**Transaction ID : VPFBKQT2WB0**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. Federation Of American Hospitals PAC**

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

Mailing Address 801 Pennsylvania Ave NW  
Ste 245

City Washington	State DC	Zip Code 20004-2697
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FEC ID number of contributing federal political committee. **C** C00002261

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
09	/	11	/	2018

**Transaction ID : VPFBKQNE7B0**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 41
<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)  
**Hoops PAC**

**A. American Academy Of Dermatology Association PAC (Skin PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1445 New York Ave NW  
 Ste 800  
 City Washington State DC Zip Code 20005-2125  
 FEC ID number of contributing federal political committee. **C** C00359539  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **07 / 20 / 2018**  
**Transaction ID : VPFBKQ49DQ0**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**B. SPACE EXPLORATION TECHNOLOGIES CORP. PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1155 F St NW  
 Ste 475  
 City Washington State DC Zip Code 20004-1343  
 FEC ID number of contributing federal political committee. **C** C00411116  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 24 / 2018**  
**Transaction ID : VPFBKQR1111**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. National Air Traffic Controllers PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1325 Massachusetts Ave NW  
 City Washington State DC Zip Code 20005-4171  
 FEC ID number of contributing federal political committee. **C** C00238725  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 30 / 2018**  
**Transaction ID : VPFBKQT2WF1**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 41
<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)  
**Hoops PAC**

**A. Aetna Inc. PAC**

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

Mailing Address 20 F St NW  
Ste 350

City Washington State DC Zip Code 20001-6706

FEC ID number of contributing federal political committee. **C** C00181826

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2018

**Transaction ID : VPFBKQ509W1**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. Northwestern Mutual Federal PAC**

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

Mailing Address 720 E Wisconsin Ave

City Milwaukee State WI Zip Code 53202-4703

FEC ID number of contributing federal political committee. **C** C00197095

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2018

**Transaction ID : VPFBKQNE7F2**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. Distilled Spirits PAC**

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

Mailing Address 1250 I St NW  
Ste 400

City Washington State DC Zip Code 20005-3998

FEC ID number of contributing federal political committee. **C** C00030734

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
840.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2018

**Transaction ID : VPFBKQ4QGM2**

Amount of Each Receipt this Period  
840.00

Memo Item

\* In-Kind: Beverages for event

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10840.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 41
<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)  
**Hoops PAC**

**A. American Speech-Language-Hearing Association PAC**

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

Mailing Address 2200 Research Blvd

City Rockville	State MD	Zip Code 20850-3289
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FEC ID number of contributing federal political committee. **C** C00210666

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2018

**Transaction ID : VPFBKQ96B93**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. Intel PAC**

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

Mailing Address 1155 F St NW  
Ste 1025

City Washington	State DC	Zip Code 20004-1342
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FEC ID number of contributing federal political committee. **C** C00125641

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2018

**Transaction ID : VPFBKQ6DHK3**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. Medtronic Medical Technology Fund**

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

Mailing Address 950 F St NW  
Ste 500

City Washington	State DC	Zip Code 20004-1478
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FEC ID number of contributing federal political committee. **C** C00311878

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2018

**Transaction ID : VPFBKQRMNS3**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 41
<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)  
**Hoops PAC**

**A. Anthem PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 120 Monument Cir  
City Indianapolis State IN Zip Code 46204-4906  
FEC ID number of contributing federal political committee. **C** C00197228  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 27 / 2018  
**Transaction ID : VPFBKQRMNY3**  
Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. METLIFE Inc. Emp. Political Participation Fund**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1095 Avenue Of The Americas  
City New York State NY Zip Code 10036-6797  
FEC ID number of contributing federal political committee. **C** C00040923  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : VPFBKQRMNR5**  
Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Hewlett-Packard Enterprise Company PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 709 G St NW Ste 300  
City Washington State DC Zip Code 20001-3770  
FEC ID number of contributing federal political committee. **C** C00196725  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 16 / 2018  
**Transaction ID : VPFBKQ96B86**  
Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 41
<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)  
**Hoops PAC**

**A. American Health Care Assn PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1201 L St NW  
City Washington State DC Zip Code 20005-4024  
FEC ID number of contributing federal political committee. **C** C00006080  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2018  
**Transaction ID : VPFBKQT2WD6**  
Amount of Each Receipt this Period 2500.00  
 Memo Item

**B. American Association Of Nurse Practitioners PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 225 Reinekers Ln Ste 525  
City Alexandria State VA Zip Code 22314-2880  
FEC ID number of contributing federal political committee. **C** C00358903  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 21 / 2018  
**Transaction ID : VPFBKQNE7J6**  
Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. American Academy Of Family Physicians PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1133 Connecticut Ave NW Ste 1100  
City Washington State DC Zip Code 20036-4342  
FEC ID number of contributing federal political committee. **C** C00411553  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : VPFBKQ49DS6**  
Amount of Each Receipt this Period 2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 41
<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)  
**Hoops PAC**

**A. SAMSUNG ELECTRONICS AMERICA INC POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 New Hampshire Ave NW  
 Ste 650  
 City Washington State DC Zip Code 20036-6826  
 FEC ID number of contributing federal political committee. **C** C00590315  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 28 / 2018  
**Transaction ID : VPFBKQCF5A7**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Nike, Inc. PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 SW Bowerman Dr  
 City Beaverton State OR Zip Code 97005-0979  
 FEC ID number of contributing federal political committee. **C** C00142786  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2018  
**Transaction ID : VPFBKQT2WH7**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. Emerson Electric Co. Responsible Government Fund**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8000 W Florissant Ave  
 City Saint Louis State MO Zip Code 63136-1415  
 FEC ID number of contributing federal political committee. **C** C00080515  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 25 / 2018  
**Transaction ID : VPFBKQR1129**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 41
<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)  
**Hoops PAC**

**A. National Association Of Health Underwriters PAC**

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

Mailing Address 1212 New York Ave NW  
Ste 1100

City Washington State DC Zip Code 20005-3987

FEC ID number of contributing federal political committee. **C** C00283135

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 25 / 2018

**Transaction ID : VPFBKQ52HS9**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. HotelPAC**

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

Mailing Address 1250 I St NW  
Ste 1100

City Washington State DC Zip Code 20005-5904

FEC ID number of contributing federal political committee. **C** C00001198

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2018

**Transaction ID : VPFBKQRMNV9**

Amount of Each Receipt this Period  
2500.00

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  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	77840.00

**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 16 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Hoops PAC**

**A. Wyden For Oregon**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 3271

City Portland	State OR	Zip Code 97208-3271
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00436998

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
39500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2018

**Transaction ID : VPFBKQ4ZET7**

Amount of Each Receipt this Period  
11880.00

Memo Item

**B. Frew, Lance, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 6967 Saint Regis Blvd

City Hudson	State OH	Zip Code 44236-3224
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
MCPC Inc. President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2018

**Transaction ID : VPFBKQVXF0**

Amount of Each Receipt this Period  
2700.00

Memo Item

\* 09/30/18 Wyden for Oregon Transfer

**C. Groth, Suzanne, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1090 Darms Ln

City Napa	State CA	Zip Code 94558-1011
--------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
Groth Vineyards Winery President & CEO

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2018

**Transaction ID : VPFBKQRMNH0**

Amount of Each Receipt this Period  
500.00

Memo Item

\* 09/30/18 Wyden for Oregon Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11880.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Hoops PAC**

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

Mailing Address PO Box 892

City Los Gatos	State CA	Zip Code 95031-0892
-------------------	-------------	------------------------

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

Name of Employer (for Individual) J. Lohr Vineyards & Wines	Occupation (for Individual) Vinter
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2018

**Transaction ID : VPFBKQRMKMO**

Amount of Each Receipt this Period  
500.00

Memo Item

\* 09/30/18 Wyden for Oregon Transfer

**B. Mastercard International Inc. Employees' PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2000 Purchase St

City Purchase	State NY	Zip Code 10577-2509
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00410274

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2018

**Transaction ID : VPFBKQRMNPO**

Amount of Each Receipt this Period  
2500.00

Memo Item

\* 09/30/18 Wyden for Oregon Transfer

**C. International Dairy Foods Association (IDFA) PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 H St NW  
Ste 900

City Washington	State DC	Zip Code 20005-5902
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00128231

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2018

**Transaction ID : VPFBKQ51GY0**

Amount of Each Receipt this Period  
1000.00

Memo Item

\* 09/30/18 Wyden for Oregon Transfer

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Hoops PAC**

**A. Indelicato Family Farms**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 12001 S Highway 99

City Manteca	State CA	Zip Code 95336-8499
-----------------	-------------	------------------------

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 ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2018

**Transaction ID : VPFBKQRMM11**

Amount of Each Receipt this Period  
1000.00

Memo Item

\*LLC - Members below if itemized. Permissible funds.

**B. Indelicato, Chris, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 12001 S Highway 99

City Manteca	State CA	Zip Code 95336-8499
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
Indelicato Family Farms CEO/Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2018

**Transaction ID : VPFBKQRMM29**

Amount of Each Receipt this Period  
1000.00

Memo Item

**c. Dunkin' Brands Inc. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 130 Royall St

City Canton	State MA	Zip Code 02021-1010
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00431544

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2018

**Transaction ID : VPFBKQ51H21**

Amount of Each Receipt this Period  
2500.00

Memo Item

\* 09/30/18 Wyden for Oregon Transfer

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Hoops PAC**

**A. Robert, Antonin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7956 Butterfly St  
 City Painesville State OH Zip Code 44077-8513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 GBX Group President Of Community Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 30 / 2018  
**Transaction ID : VPFBKQVXZ51**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item  
 \* 09/30/18 Wyden for Oregon Transfer

**B. Thrivent Financial For Lutherans Employee PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1892  
 City Appleton State WI Zip Code 54912-1892  
 FEC ID number of contributing federal political committee. **C** C00121319  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 24 / 2018  
**Transaction ID : VPFBKQRMJW1**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 \* 09/30/18 Wyden for Oregon Transfer

**C. Swentor, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43 Church St  
 City Chagrin Falls State OH Zip Code 44022-3144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 GBX Group President Of Real Estate  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 30 / 2018  
**Transaction ID : VPFBKQVXZ35**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item  
 \* 09/30/18 Wyden for Oregon Transfer

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Hoops PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Healy, Margie, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 03 / 2018
Mailing Address 8533 Zinfandel Dr		<b>Transaction ID : VPFBKQRMKV5</b>
City Windsor	State CA	Zip Code 95492-6666
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) F. Korbel And Bros.	Occupation (for Individual) Vice President	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	* 09/30/18 Wyden for Oregon Transfer

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Wentz, Eric, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 03 / 2018
Mailing Address 5565 Tesla Rd		<b>Transaction ID : VPFBKQRMKH6</b>
City Livermore	State CA	Zip Code 94550-9149
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Wentz Family Estates	Occupation (for Individual) Winegrower/Chairman Of The Board	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	* 09/30/18 Wyden for Oregon Transfer

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Sparacia, Andrew, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2018
Mailing Address 7955 Fieldstone Ct		<b>Transaction ID : VPFBKQVXZ77</b>
City Mentor	State OH	Zip Code 44060-6859
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) GBX Group	Occupation (for Individual) Founder And CEO	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	* 09/30/18 Wyden for Oregon Transfer

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Hoops PAC**

**A. Hoy, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 308 Fox Way  
 City Chagrin Falls State OH Zip Code 44022-4183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GBX Group Occupation (for Individual) Chief Legal Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 30 / 2018  
**Transaction ID : VPFBKQVXZ28**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item  
 \* 09/30/18 Wyden for Oregon Transfer

**B. Micali, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3037 N Quincy St  
 City Arlington State VA Zip Code 22207-4139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 28 / 2018  
**Transaction ID : VPFBKQRMJX8**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 \* 09/30/18 Wyden for Oregon Transfer

**C. The Wine Group, L.L.C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 90  
 City Tracy State CA Zip Code 95378-0090  
 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 ▼ 500.00

Date of Receipt 07 / 03 / 2018  
**Transaction ID : VPFBKQ4ZES9**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 \*LLC - Members below if itemized. Permissible funds.

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Hoops PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wyden For Oregon - Unitemized

Mailing Address PO Box 3271

City Portland	State OR	Zip Code 97208-3271
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00436998

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		30		2018

**Transaction ID : VPFBKQ4ZET7J**

Amount of Each Receipt this Period  
30.00

Memo Item

**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).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11880.00

**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)  
**Hoops PAC**

Full Name (Last, First, Middle Initial) <b>A. NGP Van, Inc.</b>			Date of Disbursement MM / DD / YYYY 07 / 30 / 2018	
Mailing Address 1101 15Th St NW Ste 500			FEC Identification Number C [REDACTED]	
City Washington	State DC	Zip Code 20005-5006	Transaction ID : <b>VPECBA83G</b>	
Purpose of Disbursement Database		Category/ Type 001	Amount of Each Disbursement this Period 300.00	
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. ADP</b>			Date of Disbursement MM / DD / YYYY 07 / 30 / 2018	
Mailing Address 4099 SE International Way Ste 203			FEC Identification Number C [REDACTED]	
City Milwaukie	State OR	Zip Code 97222-8853	Transaction ID : <b>VPECBA84VC</b>	
Purpose of Disbursement Payroll Fees		Category/ Type 001	Amount of Each Disbursement this Period 7.80	
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. ADP</b>			Date of Disbursement MM / DD / YYYY 07 / 06 / 2018	
Mailing Address 4099 SE International Way Ste 203			FEC Identification Number C [REDACTED]	
City Milwaukie	State OR	Zip Code 97222-8853	Transaction ID : <b>VPECBA845</b>	
Purpose of Disbursement Payroll Processing		Category/ Type 001	Amount of Each Disbursement this Period 153.50	
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)..... ▶

461.30

**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)

**Hoops PAC**

Full Name (Last, First, Middle Initial)

**A. Van Buren, Emily, , ,**

Mailing Address 4273 SW Council Crest Dr

City  
Portland

State  
OR

Zip Code  
97239-1530

Purpose of Disbursement  
Salary

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 : VPECBA84A**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 4099 SE International Way  
Ste 203

City  
Milwaukie

State  
OR

Zip Code  
97222-8853

Purpose of Disbursement  
Payroll Taxes

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 : VPECBA85Z5**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Actblue**

Mailing Address PO Box 382110

City  
Cambridge

State  
MA

Zip Code  
02238-2110

Purpose of Disbursement  
Credit Card Processing Fee

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 : VPECBA7VR**  
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)  
**Hoops PAC**

Full Name (Last, First, Middle Initial) <b>A. Tyree, Jocelyn, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2018
Mailing Address 8935 SW Bellflower St		FEC Identification Number C <b>Transaction ID : VPECBA849Z</b> Amount of Each Disbursement this Period 831.28
City Tigard	State OR	
Zip Code 97224-5213	Purpose of Disbursement Salary	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. Kruger, Sandra, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 19 / 2018
Mailing Address 17100 NW Sauvie Island Rd		FEC Identification Number C <b>Transaction ID : VPECBA85Z9</b> Amount of Each Disbursement this Period 503.00
City Portland	State OR	
Zip Code 97231-1352	Purpose of Disbursement Wine	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input 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. ADP</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2018
Mailing Address 4099 SE International Way Ste 203		FEC Identification Number C <b>Transaction ID : VPECBA84V</b> Amount of Each Disbursement this Period 7.80
City Milwaukie	State OR	
Zip Code 97222-8853	Purpose of Disbursement Payroll Fees	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)..... ▶

1342.08

**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)  
**Hoops PAC**

**A. Jake's Catering At Sentinel**

Full Name (Last, First, Middle Initial)

Mailing Address 614 SW 11Th Ave

City Portland State OR Zip Code 97205-2624

Purpose of Disbursement Catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 11 / 2018

FEC Identification Number: C

Transaction ID : VPECBA83G

Amount of Each Disbursement this Period: 1255.50

Memo Item

**B. Distilled Spirits PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 1250 I St NW Ste 400

City Washington State DC Zip Code 20005-3998

Purpose of Disbursement Beverages for event

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2018

FEC Identification Number: C C00030734

Transaction ID : VPFBKQ4QG

Amount of Each Disbursement this Period: 840.00

\* In-Kind Received

Memo Item

**C. Van Buren, Emily, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4273 SW Council Crest Dr

City Portland State OR Zip Code 97239-1530

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2018

FEC Identification Number: C

Transaction ID : VPECBA84A

Amount of Each Disbursement this Period: 430.80

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2526.30

**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)  
**Hoops PAC**

**A. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 4099 SE International Way  
Ste 203

City Milwaukie State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Processing

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number: C

Transaction ID : VPECBA85Z4

Amount of Each Disbursement this Period: 153.50

Memo Item

**B. The Ashmead Group**

Full Name (Last, First, Middle Initial)

Mailing Address 3612 Newark St NW

City Washington State DC Zip Code 20016-3180

Purpose of Disbursement Fundraising Consultant

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 16 / 2018

FEC Identification Number: C

Transaction ID : VPECBA83Gf

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Van Buren, Emily, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4273 SW Council Crest Dr

City Portland State OR Zip Code 97239-1530

Purpose of Disbursement Mileage Reimbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 11 / 2018

FEC Identification Number: C

Transaction ID : VPECBA83G

Amount of Each Disbursement this Period: 28.72

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5182.22

**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)

**Hoops PAC**

Full Name (Last, First, Middle Initial)

**A. AT&T Mobility**

Mailing Address PO Box 6463

City  
Carol Stream

State  
IL

Zip Code  
60197-6463

Purpose of Disbursement  
Telephone Service

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2018

FEC Identification Number

C  
Transaction ID : VPECBA849C  
Amount of Each Disbursement this Period  
126.71

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bank Of America**

Mailing Address PO Box 15731

City  
Wilmington

State  
DE

Zip Code  
19886-5731

Purpose of Disbursement  
Credit Card Payment

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2018

FEC Identification Number

C  
Transaction ID : VPECBA7T9I  
Amount of Each Disbursement this Period  
11857.55

Memo Item

Full Name (Last, First, Middle Initial)

**C. Carroll Travel**

Mailing Address 201 Massachusetts Ave NE

City  
Washington

State  
DC

Zip Code  
20002-4988

Purpose of Disbursement  
Agent Fees

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2018

FEC Identification Number

C  
Transaction ID : VPECBA7ZY  
Amount of Each Disbursement this Period  
40.00

\* 07/16/18 Credit Card Payment  
 Memo Item

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

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

11984.26

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Hoops PAC**

Full Name (Last, First, Middle Initial)

**A. Alaska Air**

Mailing Address PO Box 24948

City: Seattle State: WA Zip Code: 98124-0948

Purpose of Disbursement: Airfare

002  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2018

FEC Identification Number

C  
Transaction ID : VPECBA7ZY1  
Amount of Each Disbursement this Period  
403.20

\* 07/16/18 Credit Card Payment  
 Memo Item

Full Name (Last, First, Middle Initial)

**B. Alaska Air**

Mailing Address PO Box 24948

City: Seattle State: WA Zip Code: 98124-0948

Purpose of Disbursement: Airfare

002  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2018

FEC Identification Number

C  
Transaction ID : VPECBA7ZY1  
Amount of Each Disbursement this Period  
798.20

\* 07/16/18 Credit Card Payment  
 Memo Item

Full Name (Last, First, Middle Initial)

**C. Carroll Travel**

Mailing Address 201 Massachusetts Ave NE

City: Washington State: DC Zip Code: 20002-4988

Purpose of Disbursement: Agent Fees

002  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2018

FEC Identification Number

C  
Transaction ID : VPECBA7ZY1  
Amount of Each Disbursement this Period  
40.00

\* 07/16/18 Credit Card Payment  
 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)

**Hoops PAC**

Full Name (Last, First, Middle Initial)

**A. Alaska Air**

Mailing Address PO Box 24948

City  
Seattle

State  
WA

Zip Code  
98124-0948

Purpose of Disbursement  
Airfare

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 : VPECBA7ZYI

Amount of Each Disbursement this Period

\* 07/16/18 Credit Card Payment

Memo Item

Full Name (Last, First, Middle Initial)

**B. Carroll Travel**

Mailing Address 201 Massachusetts Ave NE

City  
Washington

State  
DC

Zip Code  
20002-4988

Purpose of Disbursement  
Agent Fees

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 : VPECBA7ZY4

Amount of Each Disbursement this Period

\* 07/16/18 Credit Card Payment

Memo Item

Full Name (Last, First, Middle Initial)

**C. Alaska Air**

Mailing Address PO Box 24948

City  
Seattle

State  
WA

Zip Code  
98124-0948

Purpose of Disbursement  
Airfare

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 : VPECBA7ZX

Amount of Each Disbursement this Period

\* 07/16/18 Credit Card Payment

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)  
**Hoops PAC**

**A. Carroll Travel**

Full Name (Last, First, Middle Initial)

Mailing Address 201 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4988

Purpose of Disbursement Agent Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 16 / 2018

FEC Identification Number C

Transaction ID : VPECBA7ZY7

Amount of Each Disbursement this Period 40.00

\* 07/16/18 Credit Card Payment

Memo Item

**B. Jake's Catering At Sentinel**

Full Name (Last, First, Middle Initial)

Mailing Address 614 SW 11Th Ave

City Portland State OR Zip Code 97205-2624

Purpose of Disbursement Catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 16 / 2018

FEC Identification Number C

Transaction ID : VPECBA7ZY7

Amount of Each Disbursement this Period 6865.60

\* 07/16/18 Credit Card Payment

Memo Item

**C. Bank Of America**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15731

City Wilmington State DE Zip Code 19886-5731

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 08 / 15 / 2018

FEC Identification Number C

Transaction ID : VPECBA7Z6

Amount of Each Disbursement this Period 4631.60

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4631.60

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Hoops PAC**

Full Name (Last, First, Middle Initial)

**A. Jake's Catering At Sentinel**

Mailing Address 614 SW 11Th Ave

City  
Portland

State  
OR

Zip Code  
97205-2624

Purpose of Disbursement  
Catering

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VPECBA7Z6)**

Amount of Each Disbursement this Period

\* 08/15/18 Credit Card Payment

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bank Of America**

Mailing Address PO Box 15731

City  
Wilmington

State  
DE

Zip Code  
19886-5731

Purpose of Disbursement  
Credit Card Payment

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 : VPECBA8220**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Grape Escape Winery**

Mailing Address 77 NE Holland St

City  
Portland

State  
OR

Zip Code  
97211-2209

Purpose of Disbursement  
Event Tickets

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VPECBA83G**

Amount of Each Disbursement this Period

\* 09/19/18 Credit Card Payment

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)

**Hoops PAC**

Full Name (Last, First, Middle Initial)

**A. Van Buren, Emily, , ,**

Mailing Address 4273 SW Council Crest Dr

City  
Portland

State  
OR

Zip Code  
97239-1530

Purpose of Disbursement  
Salary

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	Y
0	7				3	1		2	0	1	8		

FEC Identification Number

C [REDACTED]

**Transaction ID : VPECBA84A**  
Amount of Each Disbursement this Period

[REDACTED] 430.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 4099 SE International Way  
Ste 203

City  
Milwaukie

State  
OR

Zip Code  
97222-8853

Purpose of Disbursement  
Payroll Taxes

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	Y
	0	9			2	7		2	0	1	8		

FEC Identification Number

C [REDACTED]

**Transaction ID : VPECBA85Z3**  
Amount of Each Disbursement this Period

[REDACTED] 370.07

Memo Item

Full Name (Last, First, Middle Initial)

**C. Blue Heron Consulting LLC**

Mailing Address PO Box 284

City  
Annandale

State  
VA

Zip Code  
22003-0284

Purpose of Disbursement  
Strategy/Communications

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	Y
	0	7			1	9		2	0	1	8		

FEC Identification Number

C [REDACTED]

**Transaction ID : VPECBA83G**  
Amount of Each Disbursement this Period

[REDACTED] 12000.00

Memo Item

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

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

[REDACTED]	12800.87
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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)  
**Hoops PAC**

**A. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 4099 SE International Way  
Ste 203

City Milwaukee State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2018

FEC Identification Number: C

Transaction ID : VPECBA85Z

Amount of Each Disbursement this Period: 33.92

Memo Item

**B. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 4099 SE International Way  
Ste 203

City Milwaukee State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 27 / 2018

FEC Identification Number: C

Transaction ID : VPECBA84V

Amount of Each Disbursement this Period: 7.80

Memo Item

**C. AT&T Mobility**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6463

City Carol Stream State IL Zip Code 60197-6463

Purpose of Disbursement Telephone Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 01 / 2018

FEC Identification Number: C

Transaction ID : VPECBA849I

Amount of Each Disbursement this Period: 126.71

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 168.43

**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)

**Hoops PAC**

Full Name (Last, First, Middle Initial)

**A. Kruger's Farm Market**

Mailing Address 17100 NW Sauvie Island Rd

City  
Portland

State  
OR

Zip Code  
97231-1352

Purpose of Disbursement  
Catering

**003**  
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 : VPECBA83G**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Tyree, Jocelyn, , ,**

Mailing Address 8935 SW Bellflower St

City  
Tigard

State  
OR

Zip Code  
97224-5213

Purpose of Disbursement  
Salary

**001**  
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 : VPECBA84A1**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. The Ashmead Group**

Mailing Address 3612 Newark St NW

City  
Washington

State  
DC

Zip Code  
20016-3180

Purpose of Disbursement  
Fundraising Consultant

**003**  
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 : VPECBA83G**  
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)  
**Hoops PAC**

**A. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 4099 SE International Way  
Ste 203

City Milwaukee State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Processing

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 10 / 2018

FEC Identification Number: C

Transaction ID : VPECBA85Z7

Amount of Each Disbursement this Period: 153.50

Memo Item

**B. The Ashmead Group**

Full Name (Last, First, Middle Initial)

Mailing Address 3612 Newark St NW

City Washington State DC Zip Code 20016-3180

Purpose of Disbursement Fundraising Consultant

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 13 / 2018

FEC Identification Number: C

Transaction ID : VPECBA83G

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. AT&T Mobility**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6463

City Carol Stream State IL Zip Code 60197-6463

Purpose of Disbursement Telephone Service

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 03 / 2018

FEC Identification Number: C

Transaction ID : VPECBA849I

Amount of Each Disbursement this Period: 126.76

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5280.26

**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)  
**Hoops PAC**

Full Name (Last, First, Middle Initial) <b>A. Tyree, Jocelyn, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2018
Mailing Address 8935 SW Bellflower St		FEC Identification Number C [ ] <b>Transaction ID : VPECBA84A</b> Amount of Each Disbursement this Period [ ] 831.28 <input type="checkbox"/> Memo Item
City Tigard	State OR	
Zip Code 97224-5213	Purpose of Disbursement Salary	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ADP</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2018
Mailing Address 4099 SE International Way Ste 203		FEC Identification Number C [ ] <b>Transaction ID : VPECBA85Z6</b> Amount of Each Disbursement this Period [ ] 376.07 <input type="checkbox"/> Memo Item
City Milwaukie	State OR	
Zip Code 97222-8853	Purpose of Disbursement Payroll Taxes	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY [ ] / [ ] / [ ]
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ] <input type="checkbox"/> Memo Item
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1207.35
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 55985.97

**SCHEDULE B (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)

**Hoops PAC**

Full Name (Last, First, Middle Initial)

**A. BREDESEN FOR SENATE**

Mailing Address 4560 Trousdale Dr  
Ste 100

City Nashville State TN Zip Code 37204-4538

Purpose of Disbursement  
Political Contribution

011

Category/  
Type

Candidate Name  
**BREDESEN, PHILIP, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: TN District: 00

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C C00663658

Transaction ID : VPECBA83G

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY**

Mailing Address 255 Plato Blvd E

City Saint Paul State MN Zip Code 55107-1623

Purpose of Disbursement  
Political Contribution

011

Category/  
Type

Candidate Name  
**MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY**

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 09 / 2018

FEC Identification Number

C C00025254

Transaction ID : VPECBA83G.

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE ESPY FOR SENATE CAMPAIGN COMMITTEE**

Mailing Address 4450 Old Canton Rd  
Ste 205

City Jackson State MS Zip Code 39211-5994

Purpose of Disbursement  
Political Contribution

011

Category/  
Type

Candidate Name  
**ESPY, ALPHONSO MICHAEL, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MS District: 00

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2018

FEC Identification Number

C C00675884

Transaction ID : VPECBA83G

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Hoops PAC**

**A. MCLEOD-SKINNER FOR OREGON**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 1894

M M M	/	D D D	/	Y Y Y Y Y
08		22		2018

City Redmond State OR Zip Code 97756-0545

FEC Identification Number

Purpose of Disbursement  
Political Contribution

011
Category/ Type

**C** C00649004

**Transaction ID : VPECBA83G!**

Amount of Each Disbursement this Period

5000.00
---------

Candidate Name  
**MCLEOD-SKINNER, JAMIE, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

Memo Item

State: OR District: 02

**B. HEIDI VICTORY FUND**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 918 Pennsylvania Ave SE

M M M	/	D D D	/	Y Y Y Y Y
09		24		2018

City Washington State DC Zip Code 20003-2140

FEC Identification Number

Purpose of Disbursement

Category/ Type

**C** C00629253

**Transaction ID : VPECBA87WI**

Amount of Each Disbursement this Period

5000.00
---------

Candidate Name  
**HEIDI VICTORY FUND**

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

Memo Item

State: District:

**C. KATHY MANNING FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 41197

M M M	/	D D D	/	Y Y Y Y Y
08		01		2018

City Greensboro State NC Zip Code 27404-1197

FEC Identification Number

Purpose of Disbursement  
Political Contribution

011
Category/ Type

**C** C00662577

**Transaction ID : VPECBA83G**

Amount of Each Disbursement this Period

5000.00
---------

Candidate Name  
**MANNING, KATHY, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

Memo Item

State: NC District: 13

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

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

15000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

**Hoops PAC**

Full Name (Last, First, Middle Initial)

**A. CAROLYN FOR CONGRESS**

Mailing Address PO Box 301

City  
Suwanee

State  
GA

Zip Code  
30024-0301

Purpose of Disbursement  
Political Contribution

011

Category/  
Type

Candidate Name

**BOURDEAUX, CAROLYN, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: GA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2018

FEC Identification Number

C 00649376

**Transaction ID : VPECBA83G**

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

--

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

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)..... ▶

35000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Hoops PAC**

**A. Senate Democratic Leadership Fund**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5271

City Portland State OR Zip Code 97208-5271

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2018

FEC Identification Number: C

Transaction ID : VPECBA83GI

Amount of Each Disbursement this Period: 10000.00

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10000.00