

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

The Niki Tsongas Committee

ADDRESS (number and street)

PO Box 1454

Check if different than previously reported. (ACC)

Lowell

MA

01853

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00433136

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

MA

03

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)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2017

through

M M /

D D /

Y Y Y Y 2017

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

Gomez, Zoila, , ,

Type or Print Name of Treasurer

Gomez, Zoila, , ,

Signature of Treasurer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2017

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

Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**The Niki Tsongas Committee**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	279278.45
(b) Total Contribution Refunds (from Line 20(d)) .....	15650.00	216350.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 15650.00	62928.45
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	19728.52	266016.19
(b) Total Offsets to Operating Expenditures (from Line 14).....	109.74	633.58
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	19618.78	265382.61
8. Cash on Hand at Close of Reporting Period (from Line 27).....	269578.90	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

The Niki Tsongas Committee

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	152151.00
(ii) Unitemized.....	0.00	32627.45
(iii) TOTAL of contributions from individuals ▶	0.00	184778.45
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	94500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	279278.45
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	55225.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	109.74	633.58
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	109.74	335137.03

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 29

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	19728.52	266016.19
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	15650.00	186850.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	29500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	15650.00	216350.00
21. OTHER DISBURSEMENTS .....	30850.00	89150.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	66228.52	571516.19

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	335697.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	109.74
25. SUBTOTAL (add Line 23 and Line 24).....	335807.42
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	66228.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	269578.90

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Arbella Mutual Insurance Co</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2017
Mailing Address 1100 Crown Colony Dr P.O. Box 699103		FEC Identification Number C
City Quincy	State MA	Zip Code 02169-0957
Purpose of Disbursement Car Insurance		Amount of Each Disbursement this Period 105.00
Candidate Name		Transaction ID : VNTPA9W7B02
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Arbella Mutual Insurance Co</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2017
Mailing Address 1100 Crown Colony Dr P.O. Box 699103		FEC Identification Number C
City Quincy	State MA	Zip Code 02169-0957
Purpose of Disbursement Car Insurance		Amount of Each Disbursement this Period 105.00
Candidate Name		Transaction ID : VNTPA9W7B10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Arbella Mutual Insurance Co</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2017
Mailing Address 1100 Crown Colony Dr P.O. Box 699103		FEC Identification Number C
City Quincy	State MA	Zip Code 02169-0957
Purpose of Disbursement Car Insurance		Amount of Each Disbursement this Period 105.00
Candidate Name		Transaction ID : VNTPA9W7B28
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	315.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. First National Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address PO Box 2818			FEC Identification Number C	
City Omaha	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 473.81	
Purpose of Disbursement Credit Card		Category/Type	Transaction ID : VNTPA9W8ZP8	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. A Value Self Storage Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address 20 Duren Ave			FEC Identification Number C	
City Lowell	State MA	Zip Code 01851-1615	Amount of Each Disbursement this Period 179.00	
Purpose of Disbursement Space Rent		Category/Type	Transaction ID : VNTPA9W8ZS1	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Adobe Systems, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address 345 Park Ave			FEC Identification Number C	
City San Jose	State CA	Zip Code 95110-2704	Amount of Each Disbursement this Period 79.68	
Purpose of Disbursement Internet Fee		Category/Type	Transaction ID : VNTPA9W8ZQ5	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	473.81
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. MailChimp.com</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address 512 Means St NW			FEC Identification Number C	
City Atlanta	State GA	Zip Code 30318-5798	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement Internet Service		Category/ Type	Transaction ID : VNTPA9W8ZR3	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. UberConference</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address 100 California St			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94111-4505	Amount of Each Disbursement this Period 16.99	
Purpose of Disbursement Phone		Category/ Type	Transaction ID : VNTPA9W8ZV7	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address PO Box 9622 800-922-0204			FEC Identification Number C	
City Mission Hills	State CA	Zip Code 91346-9622	Amount of Each Disbursement this Period 118.14	
Purpose of Disbursement Phone		Category/ Type	Transaction ID : VNTPA9W8ZT9	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. First National Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017		
Mailing Address PO Box 2818			FEC Identification Number C		
City Omaha	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 810.25		
Purpose of Disbursement Credit Card		Category/Type	Transaction ID : VNTPA9W8ZX1		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. A Value Self Storage Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017		
Mailing Address 20 Duren Ave			FEC Identification Number C		
City Lowell	State MA	Zip Code 01851-1615	Amount of Each Disbursement this Period 179.00		
Purpose of Disbursement Space Rent		Category/Type	Transaction ID : VNTPA9W9005		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Adobe Systems, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017		
Mailing Address 345 Park Ave			FEC Identification Number C		
City San Jose	State CA	Zip Code 95110-2704	Amount of Each Disbursement this Period 79.68		
Purpose of Disbursement Internet Fee		Category/Type	Transaction ID : VNTPA9W8ZY9		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	810.25
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
Mailing Address PO Box 1577		FEC Identification Number C
City Newark	State NJ	Zip Code 07101-1577
Purpose of Disbursement Internet/Phone		Amount of Each Disbursement this Period 138.35
Candidate Name		Transaction ID : VNTPA9W8ZZ7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Junk King</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
Mailing Address 216 Tyngsboro Rd		FEC Identification Number C
City North Chelmsford	State MA	Zip Code 01863-1107
Purpose of Disbursement Trash Removal		Amount of Each Disbursement this Period 228.00
Candidate Name		Transaction ID : VNTPA9W9038
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. MailChimp.com</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
Mailing Address 512 Means St NW		FEC Identification Number C
City Atlanta	State GA	Zip Code 30318-5798
Purpose of Disbursement Internet Fee		Amount of Each Disbursement this Period 50.00
Candidate Name		Transaction ID : VNTPA9W9012
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. UberConference</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 100 California St			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94111-4505	Amount of Each Disbursement this Period 17.08	
Purpose of Disbursement Phone		Category/Type	Transaction ID : VNTPA9W9046	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Memo Item *	
State: District:		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. First National Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2017	
Mailing Address PO Box 2818			FEC Identification Number C	
City Omaha	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 444.00	
Purpose of Disbursement Credit Card		Category/Type	Transaction ID : VNTPA9W9054	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item	
State: District:		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>c. A Value Self Storage Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2017	
Mailing Address 20 Duren Ave			FEC Identification Number C	
City Lowell	State MA	Zip Code 01851-1615	Amount of Each Disbursement this Period 179.00	
Purpose of Disbursement Space Rent		Category/Type	Transaction ID : VNTPA9W9070	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Memo Item *	
State: District:		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	444.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Adobe Systems, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2017	
Mailing Address 345 Park Ave			FEC Identification Number C	
City San Jose	State CA	Zip Code 95110-2704	Amount of Each Disbursement this Period 79.68	
Purpose of Disbursement Internet Fee		Category/ Type	Transaction ID : VNTPA9W9062	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MailChimp.com</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2017	
Mailing Address 512 Means St NW			FEC Identification Number C	
City Atlanta	State GA	Zip Code 30318-5798	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement Internet Fee		Category/ Type	Transaction ID : VNTPA9W9088	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. UberConference</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2017	
Mailing Address 100 California St			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94111-4505	Amount of Each Disbursement this Period 17.08	
Purpose of Disbursement Phone		Category/ Type	Transaction ID : VNTPA9W90A4	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2017
Mailing Address PO Box 9622 800-922-0204		FEC Identification Number C
City Mission Hills	State CA	Zip Code 91346-9622
Purpose of Disbursement Phone		Amount of Each Disbursement this Period 118.24
Candidate Name	Category/ Type	Transaction ID : VNTPA9W9096
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2017
Mailing Address 9009 Carothers Pkwy Ste 101		FEC Identification Number C
City Franklin	State TN	Zip Code 37067-1703
Purpose of Disbursement Car Lease		Amount of Each Disbursement this Period 981.39
Candidate Name	Category/ Type	Transaction ID : VNTPA9W7B93
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Fox Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2017
Mailing Address PO Box 377		FEC Identification Number C
City Foxboro	State MA	Zip Code 02035-0377
Purpose of Disbursement Payroll Service Fee		Amount of Each Disbursement this Period 32.80
Candidate Name	Category/ Type	Transaction ID : VNTPA9W7BA1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1014.19
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Fox Payroll Service</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2017	
Mailing Address PO Box 377			FEC Identification Number C	
City Foxboro	State MA	Zip Code 02035-0377	Amount of Each Disbursement this Period 32.80	
Purpose of Disbursement Payroll Service Fee		Category/ Type	Transaction ID : VNTPA9W7BB9	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Fox Payroll Service</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2017	
Mailing Address PO Box 377			FEC Identification Number C	
City Foxboro	State MA	Zip Code 02035-0377	Amount of Each Disbursement this Period 31.15	
Purpose of Disbursement Payroll Service Fee		Category/ Type	Transaction ID : VNTPA9W9W79	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Geoffroy, Phil, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2017	
Mailing Address 18 Colonial Dr			FEC Identification Number C	
City Chelmsford	State MA	Zip Code 01824-1660	Amount of Each Disbursement this Period 848.02	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : VNTPA9W7BV5	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	911.97
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Geoffroy, Phil, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2017	
Mailing Address 18 Colonial Dr			FEC Identification Number C	
City Chelmsford	State MA	Zip Code 01824-1660	Amount of Each Disbursement this Period 848.02	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : VNTPA9W7BW3	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. IRS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address Fox Payroll Services			FEC Identification Number C	
City Foxboro	State MA	Zip Code 02035	Amount of Each Disbursement this Period 1925.34	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : VNTPA9W7BD5	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. IRS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2017	
Mailing Address Fox Payroll Services			FEC Identification Number C	
City Foxboro	State MA	Zip Code 02035	Amount of Each Disbursement this Period 1538.48	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : VNTPA9W7BE3	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4311.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. IRS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2017
Mailing Address Fox Payroll Services		FEC Identification Number C
City Foxboro	State MA	Zip Code 02035
Purpose of Disbursement Payroll Taxes		Amount of Each Disbursement this Period 1538.48
Candidate Name	Category/ Type	Transaction ID : VNTPA9W90B1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Martello, Benjamin, J, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2017
Mailing Address 59B Kenmere Rd		FEC Identification Number C
City Medford	State MA	Zip Code 02155-4117
Purpose of Disbursement Cell Phone		Amount of Each Disbursement this Period 283.64
Candidate Name	Category/ Type	Transaction ID : VNTPA9W7B36
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2017
Mailing Address PO Box 526216		FEC Identification Number C
City Atlanta	State GA	Zip Code 30353
Purpose of Disbursement Cell Phone		Amount of Each Disbursement this Period 283.64
Candidate Name	Category/ Type	Transaction ID : VNTPA9W7B44
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1822.12
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Martello, Benjamin, J, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2017	
Mailing Address 59B Kenmere Rd		FEC Identification Number C	
City Medford	State MA	Zip Code 02155-4117	Amount of Each Disbursement this Period 141.96
Purpose of Disbursement Cell Phone		Category/ Type	Transaction ID : VNTPA9W9W46
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2017	
Mailing Address PO Box 526216		FEC Identification Number C	
City Atlanta	State GA	Zip Code 30353	Amount of Each Disbursement this Period 141.96
Purpose of Disbursement Cell Phone		Category/ Type	Transaction ID : VNTPA9W9W53
Candidate Name		<input checked="" type="checkbox"/> Memo Item *	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Mass Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2017	
Mailing Address Massachusetts Dept of Revenue Fox Payroll Service		FEC Identification Number C	
City Foxboro	State MA	Zip Code 02035	Amount of Each Disbursement this Period 482.41
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : VNTPA9W7BP6
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	624.37
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Mass Department of Revenue</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2017	
Mailing Address Massachusetts Dept of Revenue Fox Payroll Service			FEC Identification Number C	
City Foxboro	State MA	Zip Code 02035	Amount of Each Disbursement this Period 296.41	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : VNTPA9W7BQ4	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Mass Department of Revenue</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2017	
Mailing Address Massachusetts Dept of Revenue Fox Payroll Service			FEC Identification Number C	
City Foxboro	State MA	Zip Code 02035	Amount of Each Disbursement this Period 422.60	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : VNTPA9W7BR2	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Mass Department of Revenue</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2017	
Mailing Address Massachusetts Dept of Revenue Fox Payroll Service			FEC Identification Number C	
City Foxboro	State MA	Zip Code 02035	Amount of Each Disbursement this Period 427.89	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : VNTPA9W90C9	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1146.90
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2017
Mailing Address 1101 15th St NW Ste 500		FEC Identification Number C
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Software Rent	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 2850.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNTPA9W7BS0
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. NGP VAN Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2017
Mailing Address 1101 15th St NW Ste 500		FEC Identification Number C
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Software Rent	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNTPA9W7BT8
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Traver, Jennifer, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2017
Mailing Address 1160 First St NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Car Repair & Maintenance	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 305.02	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNTPA9W7BF1
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4655.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. C&amp;G Specialty Auto Repair</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2017	
Mailing Address 3912 5th Rd N			FEC Identification Number C	
City Arlington	State VA	Zip Code 22203-2132	Amount of Each Disbursement this Period 305.02	
Purpose of Disbursement Car Repair		Category/ Type	Transaction ID : VNTPA9W7C05	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Tufts Health Plan</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2017	
Mailing Address PO Box 9224			FEC Identification Number C	
City Chelsea	State MA	Zip Code 02150-9224	Amount of Each Disbursement this Period 639.19	
Purpose of Disbursement Health Insurance		Category/ Type	Transaction ID : VNTPA9W7BX1	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Tufts Health Plan</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2017	
Mailing Address PO Box 9224			FEC Identification Number C	
City Chelsea	State MA	Zip Code 02150-9224	Amount of Each Disbursement this Period 639.19	
Purpose of Disbursement Health Insurance		Category/ Type	Transaction ID : VNTPA9W7BY9	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1278.38
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Tufts Health Plan</b>		Date of Disbursement
Mailing Address PO Box 9224		M M / D D / Y Y Y Y 12 / 01 / 2017
City Chelsea	State MA	Zip Code 02150-9224
Purpose of Disbursement Health Insurance	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 639.19	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNTPA9W7BZ7
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Wong, Mary, , ,</b>		Date of Disbursement
Mailing Address 122 Stedman St		M M / D D / Y Y Y Y 10 / 31 / 2017
City Brookline	State MA	Zip Code 02446-6069
Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 420.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNTPA9W7BK2
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Wong, Mary, , ,</b>		Date of Disbursement
Mailing Address 122 Stedman St		M M / D D / Y Y Y Y 11 / 30 / 2017
City Brookline	State MA	Zip Code 02446-6069
Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 415.11	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNTPA9W7BM0
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1474.70
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 29		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Wong, Mary, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2017		
Mailing Address 122 Stedman St			FEC Identification Number C		
City Brookline	State MA	Zip Code 02446-6069	Amount of Each Disbursement this Period 412.60		
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : VNTPA9W9W87		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	412.60
<b>TOTAL</b> This Period (last page this line number only).....▶	19695.15

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 29			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Beeuwkes, Nancy, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2017		
Mailing Address 1360 Monument St			FEC Identification Number <b>C</b>		
City Concord	State MA	Zip Code 01742-5322			
Purpose of Disbursement Refund			Transaction ID : <b>VNTPA9W7AR9</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Beeuwkes, Reinier, , , III</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2017		
Mailing Address 1360 Monument St			FEC Identification Number <b>C</b>		
City Concord	State MA	Zip Code 01742-5322			
Purpose of Disbursement Refund			Transaction ID : <b>VNTPA9W7AS7</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Bushari, Elad, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2017		
Mailing Address 29 Adams St			FEC Identification Number <b>C</b>		
City Brookline	State MA	Zip Code 02446-6715			
Purpose of Disbursement Refund			Transaction ID : <b>VNTPA9W7AX8</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 29			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Chemaly, John, P., ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2017
Mailing Address 2 Douglas Rd		FEC Identification Number C
City Chelmsford	State MA	Zip Code 01824-3813
Purpose of Disbursement Refund		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : VNTPA9W7BG9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cherry, Elyse, D., ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2017
Mailing Address 46 Cotswold Rd		FEC Identification Number C
City Brookline	State MA	Zip Code 02445-5837
Purpose of Disbursement Refund		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : VNTPA9W7AW1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Dinarello, Joseph, A., ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2017
Mailing Address 132 Youle St		FEC Identification Number C
City Melrose	State MA	Zip Code 02176-2619
Purpose of Disbursement Refund		Amount of Each Disbursement this Period 1500.00
Candidate Name		Transaction ID : VNTPA9W7BH6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 29			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Donohue, Fay, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2017		
Mailing Address 11 Adams St			FEC Identification Number C		
City Charlestown	State MA	Zip Code 02129-3433	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Refund		Category/ Type	Transaction ID : VNTPA9W7AN7		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Freeman, Joseph, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2017		
Mailing Address 39 Church St			FEC Identification Number C		
City Boston	State MA	Zip Code 02116-5311	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement Refund		Category/ Type	Transaction ID : VNTPA9W7AQ3		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Haffner, Kate, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2017		
Mailing Address 74 Fenway 6th Floor, Apt. 31			FEC Identification Number C		
City Boston	State MA	Zip Code 02115-3744	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Refund		Category/ Type	Transaction ID : VNTPA9W7AT5		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 29			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Jameson, Paul, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2017		
Mailing Address 419 College Rd					
City Concord	State MA	Zip Code 01742-5418	FEC Identification Number C		
Purpose of Disbursement Refund			Amount of Each Disbursement this Period 300.00		
Candidate Name		Category/ Type	Transaction ID : VNTPA9W7AP5		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Kramarsky, Werner, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2017		
Mailing Address 33 E 70th St					
City New York	State NY	Zip Code 10021-4985	FEC Identification Number C		
Purpose of Disbursement Refund			Amount of Each Disbursement this Period 1000.00		
Candidate Name		Category/ Type	Transaction ID : VNTPA9W7AV3		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Sprogis, Bradford, A., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2017		
Mailing Address 184 W Brookline St					
City Boston	State MA	Zip Code 02118-1280	FEC Identification Number C		
Purpose of Disbursement Refund			Amount of Each Disbursement this Period 500.00		
Candidate Name		Category/ Type	Transaction ID : VNTPA9W7AY6		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 29			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Stone, Cathleen, D., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2017		
Mailing Address 12 Lime St			FEC Identification Number C		
City Boston	State MA	Zip Code 02108-1103	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund		Category/ Type	Transaction ID : VNTPA9W5T40		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 29	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2017
Mailing Address 430 S Capitol St SE FI 2		FEC Identification Number C C00000935
City Washington	State DC	Zip Code 20003-4024
Purpose of Disbursement Unlimited Transfer		Amount of Each Disbursement this Period 15000.00
Candidate Name <b>Democratic Congressional Campaign Committee</b>	Category/Type	Transaction ID : VNTPA9W7B52
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2017
Mailing Address 430 S Capitol St SE FI 2		FEC Identification Number C C00000935
City Washington	State DC	Zip Code 20003-4024
Purpose of Disbursement Unlimited Transfer		Amount of Each Disbursement this Period 7500.00
Candidate Name <b>Democratic Congressional Campaign Committee</b>	Category/Type	Transaction ID : VNTPA9W9W61
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Emerge Massachusetts</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2017
Mailing Address 15 Court Sq Ste 900		FEC Identification Number C
City Boston	State MA	Zip Code 02108-2524
Purpose of Disbursement Donation		Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	Transaction ID : VNTPA9W7B60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	23500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 29	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Greater Lowell Area Democrats</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2017
Mailing Address 51 Fiske St 51 Fiske St		FEC Identification Number C
City Tewksbury	State MA	Zip Code 01876-1115
Purpose of Disbursement Donation		Amount of Each Disbursement this Period 350.00
Candidate Name	Category/ Type	Transaction ID : VNTPA9W7BC7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUN</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2017
Mailing Address 11 Beacon St Fl 4		FEC Identification Number C C00089243
City Boston	State MA	Zip Code 02108-3017
Purpose of Disbursement Donation		Amount of Each Disbursement this Period 2000.00
Candidate Name MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUN	Category/ Type	Transaction ID : VNTPA9W7BN8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUN</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2017
Mailing Address 11 Beacon St Fl 4		FEC Identification Number C C00089243
City Boston	State MA	Zip Code 02108-3017
Purpose of Disbursement Unlimited Transfer		Amount of Each Disbursement this Period 2500.00
Candidate Name MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUN	Category/ Type	Transaction ID : VNTPA9W9W95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 29	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Massachusetts Womens Political Caucus</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2017	
Mailing Address 9 Hamilton Pl Ste 9B			FEC Identification Number C	
City Boston	State MA	Zip Code 02108-4715	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Donation		Candidate Name	Transaction ID : VNTPA9W7BJ4	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: District:				

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		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.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	30850.00