

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

DNC 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="11651.29"/>	<input type="text" value="11651.29"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2001.51"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="23187.32"/>	<input type="text" value="163205.72"/>
(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="25188.83"/>	<input type="text" value="174857.01"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20284.68"/>	<input type="text" value="169952.86"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4904.15"/>	<input type="text" value="4904.15"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

DNC 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).....	7000.00	111200.00
(ii) Unitemized	51.35	296.35
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7051.35	111496.35
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	16000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	12051.35	127496.35
12. Transfers From Affiliated/Other Party Committees.....	11135.97	35709.37
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)).....▶	23187.32	163205.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	23187.32	163205.72

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	284.68	13452.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	284.68	13452.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	2500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	153000.00
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).....	0.00	1000.00
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)) ..	20284.68	169952.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20284.68	169952.86

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12051.35	127496.35
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12051.35	127496.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	284.68	13452.86
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	284.68	13452.86

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

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

A. Cashdan, Eric, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 Schooner Lane

City Port Washington	State NY	Zip Code 11050
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) GUMERSELL CASHDAN, INC.	Occupation (for Individual) ENGINEERING SALES
--	--

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
10		24		2018

Transaction ID : SA11AI.4918

Amount of Each Receipt this Period
500.00

Memo Item

B. Greenberg, Lawrence, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 Nottingham Ln

City Weston	State MA	Zip Code 02493
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Money Manager	Occupation (for Individual) ENGINEERING SALES
--	--

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
10		31		2018

Transaction ID : SA11AI.4921

Amount of Each Receipt this Period
5000.00

Memo Item

C. Rustermier, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 146 carr street

City Providence	State RI	Zip Code 02905
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) roger williams university	Occupation (for Individual) teacher
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2018

Transaction ID : SA11AI.4931

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	7000.00

**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 7 OF 17
<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)
DNC PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

Mailing Address 900 SEVENTH ST, NW

City WASHINGTON	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00027342

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	/	D D	/	Y Y Y Y
11		01		2018

Transaction ID : SA11C.4936

Amount of Each Receipt this Period
5000.00

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

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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 17
<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)
DNC PAC

A. Cicilline Victory Fund
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address One Park Row, 5th Fl

City Providence	State RI	Zip Code 02903
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FEC ID number of contributing federal political committee. **C** C00656611

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28073.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2018

Transaction ID : SA12.4937

Amount of Each Receipt this Period
3500.00

Memo Item

B. Weiss, Alan, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 85 Brisas Cir

City East Greenwich	State RI	Zip Code 02818
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Summit Consulting Group President

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
10	/	18	/	2018

Transaction ID : SA12.4937.0

Amount of Each Receipt this Period
2500.00

Memo Item

C. Hurley, James, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 465 Pratt St

City Providence	State RI	Zip Code 02906
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
IGT Senior VP

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
10	/	18	/	2018

Transaction ID : SA12.4937.1

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3500.00
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 9 OF 17
<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)
DNC PAC

A. Cicilline Victory Fund
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address One Park Row, 5th Fl
City Providence State RI Zip Code 02903
FEC ID number of contributing federal political committee. **C** C00656611
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 35709.37

Date of Receipt 10 / 18 / 2018
Transaction ID : SA12.4938
Amount of Each Receipt this Period 7635.97
 Memo Item

B. Lund, Cathey, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 225 Adelaide Ave
City Providence State RI Zip Code 02907
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual)
City Kitty Veterinary Care for veterinarian
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA12.4938.0
Amount of Each Receipt this Period 1000.00
 Memo Item

C. Battista, Lisa, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9369 Lloydcrest Drive
City Beverly Hills State CA Zip Code 90210
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual)
Red Light Mangement Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 3950.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA12.4938.1
Amount of Each Receipt this Period 3950.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	7635.97
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 10 OF 17
<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)
DNC PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Curtis, Warren, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2018
Mailing Address 10 lloyd Ave		Transaction ID : SA12.4938.2
City Providence	State RI	Zip Code 02906
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	<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	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Barnacle, Ian, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2018
Mailing Address 18 Dove Street		Transaction ID : SA12.4938.3
City Providence	State RI	Zip Code 02906
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Residential Properties	Occupation (for Individual) Realtor	<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	

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

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	11135.97

**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 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)
DNC PAC

Full Name (Last, First, Middle Initial)

A. Actblue

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : **SB21B.4920**
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Actblue

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : **SB21B.4925**
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Actblue

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : **SB21B.4933**
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)
DNC PAC

Full Name (Last, First, Middle Initial)
A. Actblue

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
11 / 06 / 2018

FEC Identification Number
C

Transaction ID : SB21B.4935

Amount of Each Disbursement this Period
0.36

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.36

TOTAL This Period (last page this line number only)..... ▶ 284.68

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
DNC PAC

Full Name (Last, First, Middle Initial) A. AMMAR CAMPA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 23 / 2018
Mailing Address P.O. BOX 610, 13961 CAMPO RD.		FEC Identification Number C 000635888 Transaction ID : SB23.4912 Amount of Each Disbursement this Period 2500.00
City JAMUL	State CA	Zip Code 91935
Purpose of Disbursement Contribution		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 50	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. ANDY LEVIN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018
Mailing Address PO BOX 380381		FEC Identification Number C 000662619 Transaction ID : SB23.4910 Amount of Each Disbursement this Period 1000.00
City CLINTON TOWNSHIP	State MI	Zip Code 48038
Purpose of Disbursement Contribution		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District: 09	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. BETSY DIRKSEN LONDRIGAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 23 / 2018
Mailing Address PO BOX 275		FEC Identification Number C 000649483 Transaction ID : SB23.4909 Amount of Each Disbursement this Period 1000.00
City SPRINGFIELD	State IL	Zip Code 62705
Purpose of Disbursement Contribution		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 13	<input type="checkbox"/> Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DNC PAC

Full Name (Last, First, Middle Initial) A. DEBBIE FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y Y 10 / 23 / 2018	
Mailing Address PO BOX 566442			
City MIAMI	State FL	Zip Code 33256	
Purpose of Disbursement Contribution		FEC Identification Number C 006652065 Transaction ID : SB23.4905	
Candidate Name		Amount of Each Disbursement this Period 2500.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: FL District: 26	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. DONNA SHALALA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y Y 10 / 23 / 2018	
Mailing Address PO BOX 330602			
City MIAMI	State FL	Zip Code 33233	
Purpose of Disbursement Contribution		FEC Identification Number C 00672311 Transaction ID : SB23.4903	
Candidate Name		Amount of Each Disbursement this Period 2500.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: FL District: 27	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. ELECT CAROLYN LONG		Date of Disbursement M M / D D / Y Y Y Y Y 10 / 29 / 2018	
Mailing Address PO BOX 821288			
City VANCOUVER	State WA	Zip Code 98682	
Purpose of Disbursement Contribution		FEC Identification Number C 00660472 Transaction ID : SB23.4901	
Candidate Name		Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WA District: 03	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	6000.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
DNC PAC

Full Name (Last, First, Middle Initial)
A. KOHL FOR CONGRESS

Mailing Address PO BOX 1073

City GRAFTON State WI Zip Code 53024

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: WI District: 06

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2018

FEC Identification Number

C C00647164

Transaction ID : SB23.4907

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. LAUREN BAER FOR CONGRESS

Mailing Address 6231 PGA BLVD.
PMB 104-211

City PALM BEACH GARDENS State FL Zip Code 33418

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: FL District: 18

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2018

FEC Identification Number

C C00652594

Transaction ID : SB23.4899

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. LOEBSACK FOR CONGRESS

Mailing Address PO BOX 3013

City IOWA CITY State IA Zip Code 52244

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: IA District: 02

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2018

FEC Identification Number

C C00414318

Transaction ID : SB23.4898

Amount of Each Disbursement this Period

2500.00

Memo Item

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

4500.00

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

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

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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)
DNC PAC

A. SHARICE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 13851 W. 63RD ST.
NUM 303

City SHAWNEE State KS Zip Code 66216

Purpose of Disbursement
Contributions

Candidate Name

Office Sought: House
 Senate
 President
State: KS District: 03

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 02 / 2018

FEC Identification Number

C C00670034

Transaction ID : SB23.4896

Amount of Each Disbursement this Period

2000.00

Memo Item

B. TJ COX FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 804

City SELMA State CA Zip Code 93662

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: CA District: 21

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 23 / 2018

FEC Identification Number

C C00648956

Transaction ID : SB23.4893

Amount of Each Disbursement this Period

1000.00

Memo Item

C. TOM MALINOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 58

City MARTINSVILLE State NJ Zip Code 08836

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: NJ District: 07

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 29 / 2018

FEC Identification Number

C C00656686

Transaction ID : SB23.4891

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

4000.00

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

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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)
DNC PAC

A. XOCHITL FOR NEW MEXICO

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2250

City LAS CRUCES State NM Zip Code 88004

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NM District: 02

Date of Disbursement: 10 / 29 / 2018

FEC Identification Number: C 00666149

Transaction ID : SB23.4889

Amount of Each Disbursement this Period: 1000.00

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

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	20000.00