

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Democratic State Central Committee of Maryland

ADDRESS (number and street) 33 West Street, Suite 200 Annapolis MD 21401 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00141812 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 10 / 01 / 2015 through 10 / 31 / 2015

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

Type or Print Name of Treasurer Robert J. Kresslein

Signature of Treasurer Robert J. Kresslein [Electronically Filed] Date 11 / 24 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Democratic State Central Committee of Maryland**

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="2015"/>	<input type="text" value="65335.66"/>	<input type="text" value="65335.66"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="142191.66"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="180322.56"/>	<input type="text" value="867562.92"/>
(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="322514.22"/>	<input type="text" value="932898.58"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="106968.78"/>	<input type="text" value="717353.14"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="215545.44"/>	<input type="text" value="215545.44"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Democratic State Central Committee of Maryland**

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).....	71195.00	183295.00
(ii) Unitemized .....	26125.63	51734.79
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	97320.63	235029.79
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	21000.00	66500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	118320.63	301529.79
12. Transfers From Affiliated/Other Party Committees.....	11522.04	115050.77
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	48.61
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	7750.00	107154.18
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	42729.89	343779.57
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	42729.89	343779.57
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	180322.56	867562.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	137592.67	523783.35

**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 .....	15717.07	191047.39
(ii) Non-Federal Share.....	27939.75	334187.33
(b) Other Federal Operating Expenditures .....	60041.96	157218.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	103698.78	682453.14
22. Transfers to Affiliated/Other Party Committees.....	3220.00	34700.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	50.00	200.00
(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)).....	50.00	200.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	106968.78	717353.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	79029.03	383165.81

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	118320.63	301529.79
34. Total Contribution Refunds (from Line 28(d)) .....	50.00	200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	118270.63	301329.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	75759.03	348265.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	48.61
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	75759.03	348217.20

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

We are amending the November Monthly report, (Oct 1- 31, 2015) to correct expenditure transaction type on October 15, 2015 for Jay Baker Photographer in the amount of \$450.00. The original transaction was enter as an allocable expense on line 21A. However it has been corrected and has been place on 21b to report the expense as paid for with 100% federal dollars.

Form/Schedule:  
Transaction ID:

**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 57
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

**A. Anne Abramson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1700 K St NW  
Ste 300

City Washington State DC Zip Code 20006-3807

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

Name of Employer Self Occupation Art Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 16 / 2015  
Transaction ID : **C9701523**

Amount of Each Receipt this Period  
5000.00

**B. John D Barnes**  
Full Name (Last, First, Middle Initial)

Mailing Address 7710 Chatham Rd

City Chevy Chase State MD Zip Code 20815-5057

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

Name of Employer retired Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
237.50

Date of Receipt  
10 / 01 / 2015  
Transaction ID : **C9715790**

Amount of Each Receipt this Period  
237.50

**[MEMO ITEM]**  
\* DNC Party Victory Fund

**C. Ellen N. Bernard**  
Full Name (Last, First, Middle Initial)

Mailing Address 7712 Ruxwood Rd

City Baltimore State MD Zip Code 21204-3537

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

Name of Employer none Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 26 / 2015  
Transaction ID : **C9705361**

Amount of Each Receipt this Period  
5000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 57
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial) <b>A. Benjamin R Brooks</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2015 <b>Transaction ID : C9707828</b>
Mailing Address 9999 Village Green Dr		Amount of Each Receipt this Period 500.00
City Woodstock	State MD	Zip Code 21163
FEC ID number of contributing federal political committee. C		
Name of Employer B&R Brooks Professional Tax Service	Occupation Accountant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Thomas Francis Colbert Sr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2015 <b>Transaction ID : C9705340</b>
Mailing Address 10211 Menlo Ave		Amount of Each Receipt this Period 100.00
City Silver Spring	State MD	Zip Code 20910-1057
FEC ID number of contributing federal political committee. C		
Name of Employer Prince George's County Health Departme	Occupation Behavioral Health Counselor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C. Curtis Decker</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 16 / 2015 <b>Transaction ID : C9701508</b>
Mailing Address 8 W Read St Apt 2		Amount of Each Receipt this Period 1000.00
City Baltimore	State MD	Zip Code 21201-5314
FEC ID number of contributing federal political committee. C		
Name of Employer National Disability Rights Network	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 57
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)  
**A. Teresa Ebersole**

Mailing Address 133 Oakdale Ave

City Catonsville State MD Zip Code 21228

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

Name of Employer Community College of Baltimore County Occupation Professor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 27 / 2015**

**Transaction ID : C9707732**

Amount of Each Receipt this Period  
**350.00**

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

Mailing Address 1805 Bolton St Apt 1

City Baltimore State MD Zip Code 21217-4923

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

Name of Employer Notre Dame Mission Volunteers Occupation Site Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 13 / 2015**

**Transaction ID : C9673345**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 1805 Bolton St Apt 1

City Baltimore State MD Zip Code 21217-4923

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

Name of Employer Notre Dame Mission Volunteers Occupation Site Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 14 / 2015**

**Transaction ID : C9701477**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>470.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 57
	(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

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)  
**A. Shelly Hettleman**

Mailing Address 3500 Overbrook Rd

City Pikesville State MD Zip Code 21208-4317

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

Name of Employer State of Maryland Occupation Legislator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 26 / 2015**

**Transaction ID : C9705192**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**B. Nina R. Houghton**

Mailing Address PO Box 6

City Queenstown State MD Zip Code 21658-0006

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

Name of Employer Retired Occupation Retired

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 / 20 / 2015**

**Transaction ID : C9704280**

Amount of Each Receipt this Period  
**5000.00**

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

Mailing Address 10111 Norton Rd

City Potomac State MD Zip Code 20854

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

Name of Employer FI Investment Group Occupation CEO

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 / 16 / 2015**

**Transaction ID : C9701507**

Amount of Each Receipt this Period  
**5000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>10050.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 57
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

**A. Kevin F. Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 7819 Montvale Way

City McLean State VA Zip Code 22102-2029

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

Name of Employer Van Scoyoc Associates Occupation Lawyer/Lobbyist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **7500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 13 / 2015**

**Transaction ID : C9673075**

Amount of Each Receipt this Period  
**5000.00**

**B. Belkis Leong-Hong**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Bayswater Ct

City Gaithersburg State MD Zip Code 20878-2083

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

Name of Employer Knowledge Advantage Inc Occupation President

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 / 26 / 2015**

**Transaction ID : C9706121**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address 1719 Lancaster St

City Baltimore State MD Zip Code 21231-3412

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

Name of Employer Brown Goldstein Levy LLP/State of MD Occupation Lawyer/Delegate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 05 / 2015**

**Transaction ID : C9671086**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **7600.00**

**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:	PAGE 12 OF 57
	(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

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial) <b>A. Brooke Lierman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2015 <b>Transaction ID : C9707834</b>
Mailing Address 1719 Lancaster St		Amount of Each Receipt this Period 100.00
City Baltimore	State MD	Zip Code 21231-3412
FEC ID number of contributing federal political committee. C		
Name of Employer Brown Goldstein Levy LLP/State of MD	Occupation Lawyer/Delegate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) <b>B. Padmaja Mantena</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : C9704294</b>
Mailing Address 214 Bears Club Drive		Amount of Each Receipt this Period 10000.00
City Jupiter	State FL	Zip Code 33477
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) <b>C. Rama R. Mantena</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : C9704295</b>
Mailing Address 214 Bears Club Dr.		Amount of Each Receipt this Period 10000.00
City Jupiter	State FL	Zip Code 33477
FEC ID number of contributing federal political committee. C		
Name of Employer P4 Healthcare	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	20100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 57
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)  
**A. Michael A Marshall**

Mailing Address 501 E Campus Ave Ofc

City Chestertown State MD Zip Code 21620-1600

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

Name of Employer retired Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **612.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 01 / 2015**

**Transaction ID : C9715786**

Amount of Each Receipt this Period  
**356.25**

**[MEMO ITEM]**  
 \* DNC Party Victory Fund

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

Mailing Address 8324 Governor Grayson Way

City Ellicott City State MD Zip Code 21043-3450

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

Name of Employer Medinger Media, LLC Occupation Owner and President

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 / 09 / 2015**

**Transaction ID : C9672673**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1025 Cranbrook Rd

City Cocksylvie State MD Zip Code 21030-1465

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

Name of Employer Hendersen-Webb, Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 27 / 2015**

**Transaction ID : C9707851**

Amount of Each Receipt this Period  
**5000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>5500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 57
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

**A. Robert Meyerhoff**  
Full Name (Last, First, Middle Initial)

Mailing Address 1025 Cranbrook Rd

City Cockeyville State MD Zip Code 21030-1465

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

Name of Employer Hendersen-Webb, Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2015

**Transaction ID : C9707852**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 24 Birch Bark Ct

City Owings Mills State MD Zip Code 21117-1319

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

Name of Employer Correct Rx Pharmacy Occupation Pharmacist/Owner

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 / 29 / 2015

**Transaction ID : C9707010**

Amount of Each Receipt this Period  
2500.00

**C. Patrick H Murray**  
Full Name (Last, First, Middle Initial)

Mailing Address 522 S. Clinton St

City Baltimore State MD Zip Code 21224

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

Name of Employer Maryland Democratic Party Occupation Executive Director

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 / 23 / 2015

**Transaction ID : C9704912**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 57
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial) <b>A. Esther Obioha</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2015 <b>Transaction ID : C9703251</b>
Mailing Address 20016 Frederick Rd		Amount of Each Receipt this Period 50.00
City Germantown	State MD	Zip Code 20876-4077
FEC ID number of contributing federal political committee. C		
Name of Employer Golden Touch Health Care	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>B. David S. Oros</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2015 <b>Transaction ID : C9705355</b>
Mailing Address 702 W Lake Ave		Amount of Each Receipt this Period 1000.00
City Baltimore	State MD	Zip Code 21210-1308
FEC ID number of contributing federal political committee. C		
Name of Employer Gamma3 LLC	Occupation Managing Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>c. John G Pare Jr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 30 / 2015 <b>Transaction ID : C9708171</b>
Mailing Address 1746 Webster St		Amount of Each Receipt this Period 200.00
City Baltimore	State MD	Zip Code 21230-4747
FEC ID number of contributing federal political committee. C		
Name of Employer National Federation of the Blind	Occupation Executive Director of Advocacy and Pol	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 57
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)  
**A. Allison Pendell-Jones**

Mailing Address 672 Washington Blvd

City	State	Zip Code
Baltimore	MD	21230-2216

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

Name of Employer	Occupation
GBAHC, Inc	Resident Services Assistant Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		27		2015

**Transaction ID : C9707832**

Amount of Each Receipt this Period  

300.00
--------

Full Name (Last, First, Middle Initial)  
**B. Peter Perini Sr.**

Mailing Address 19610 Cresap Drive

City	State	Zip Code
Hagerstown	MD	21740-6924

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

Name of Employer	Occupation
Perini Health Care Group	Business Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		02		2015

**Transaction ID : C9670956**

Amount of Each Receipt this Period  

50.00
-------

Full Name (Last, First, Middle Initial)  
**C. Gregory S Proctor II**

Mailing Address 11402 Rhodenda Ave

City	State	Zip Code
Upper Marlboro	MD	20772-4738

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

Name of Employer	Occupation
G.S. Proctor & Associates	President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		27		2015

**Transaction ID : C9707850**

Amount of Each Receipt this Period  

5000.00
---------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>5350.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 57
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)  
**A. Everett J Santos**

Mailing Address 576 Laurel Rd

City State Zip Code  
Riva MD 21140-1014

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

Name of Employer Occupation  
N/A Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2015  
**Transaction ID : C9706017**

Amount of Each Receipt this Period  
550.00

Full Name (Last, First, Middle Initial)  
**B. Harriet S. Shapiro**

Mailing Address 701 King Farm Blvd Apt 325

City State Zip Code  
Rockville MD 20850-6174

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

Name of Employer Occupation  
retired retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
475.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 01 / 2015  
**Transaction ID : C9715780**

Amount of Each Receipt this Period  
475.00

**[MEMO ITEM]**  
\* DNC Party Victory Fund

Full Name (Last, First, Middle Initial)  
**C. Brian R. Shepter**

Mailing Address 19 S Curley St

City State Zip Code  
Baltimore MD 21224-2234

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

Name of Employer Occupation  
City of Baltimore Special Assistant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015  
**Transaction ID : C9707847**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 57
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

**A. Tracy Ann Terrell**  
Full Name (Last, First, Middle Initial)

Mailing Address 3908 Cotton Tree Ln

City State Zip Code  
Burtonsville MD 20866-3103

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

Name of Employer Occupation  
DDC Advocacy, LLC Associate Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2015  
**Transaction ID : C9673076**

Amount of Each Receipt this Period  
250.00

**B. Mary L. Washington**  
Full Name (Last, First, Middle Initial)

Mailing Address 217 Robert St

City State Zip Code  
Baltimore MD 21217

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

Name of Employer Occupation  
State of Maryland Legislator

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 / 23 / 2015  
**Transaction ID : C9704903**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 623 Nanticoke Ct

City State Zip Code  
Abingdon MD 21009-2929

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

Name of Employer Occupation  
Retired retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 12 / 2015  
**Transaction ID : C9728050**

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	675.00
<b>TOTAL</b> This Period (last page this line number only).....▶	71195.00

**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 19 OF 57
<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)  
**Democratic State Central Committee of Maryland**

**A. Ana Sol-Gutierrez For Congress**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3317 TURNER LANE  
 City CHEVY CHASE State MD Zip Code 20815  
 FEC ID number of contributing federal political committee. **C** C00577650  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2015  
**Transaction ID : C9701471**  
 Amount of Each Receipt this Period  
 4500.00  
 Transfer

**B. ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1125 17TH ST, NW  
 City WASHINGTON State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C** C00029504  
 Name of Employer Occupation  
 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 / 27 / 2015  
**Transaction ID : C9707854**  
 Amount of Each Receipt this Period  
 5000.00

**C. Friends of John Delaney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 60320  
 City POTOMAC State MD Zip Code 20859  
 FEC ID number of contributing federal political committee. **C** C00508416  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2015  
**Transaction ID : C9708160**  
 Amount of Each Receipt this Period  
 2000.00  
 Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 57
<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)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)  
**A. Seafarers Political Activity Donation-seafarers In**

Mailing Address 5201 AUTH WAY

City State Zip Code  
CAMP SPRINGS MD 20746

FEC ID number of contributing federal political committee. **C** C00004325

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2015

**Transaction ID : C9701476**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. WILL JAWANDO FOR CONGRESS**

Mailing Address PO BOX 10598

City State Zip Code  
SILVER SPRING MD 20914

FEC ID number of contributing federal political committee. **C** C00576850

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2015

**Transaction ID : C9707855**

Amount of Each Receipt this Period  
4500.00

Transfer

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	21000.00

**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 21 OF 57
<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)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial) <b>A. DEMOCRATIC NATIONAL COMMITTEE</b>		Date of Receipt
Mailing Address 430 S Capitol St SE		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>
City State Zip Code Washington DC 20003-4024		<b>Transaction ID : C9715793</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00010603"/>		Amount of Each Receipt this Period <input type="text" value="8254.84"/>
Name of Employer	Occupation	<b>[MEMO ITEM]</b> * DNC party Victory Fund unitemized
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="0.00"/>	

Full Name (Last, First, Middle Initial) <b>B. DEMOCRATIC NATIONAL COMMITTEE</b>		Date of Receipt
Mailing Address 430 S Capitol St SE		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City State Zip Code Washington DC 20003-4024		<b>Transaction ID : C9672485</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00010603"/>		Amount of Each Receipt this Period <input type="text" value="302.04"/>
Name of Employer	Occupation	DNC State Party Victory Fund proceeds
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="114550.77"/>	

Full Name (Last, First, Middle Initial) <b>C. DEMOCRATIC NATIONAL COMMITTEE</b>		Date of Receipt
Mailing Address 430 S Capitol St SE		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City State Zip Code Washington DC 20003-4024		<b>Transaction ID : C9704283</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00010603"/>		Amount of Each Receipt this Period <input type="text" value="7500.00"/>
Name of Employer	Occupation	Transfer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="114550.77"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="7802.04"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA12

Transaction ID : C9672485

This transfer in from the DNC is for our portion of the proceeds from the State Party Victory Fund, and relate to the memo Schedule A entries for DNC Party Victory Fund reported in this report.

Form/Schedule:

Transaction ID:

**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 23 OF 57
<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)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)  
**A. DEMOCRATIC NATIONAL COMMITTEE**

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
114550.77

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2015  
**Transaction ID : C9775537**

Amount of Each Receipt this Period  
 3220.00

\* In-Kind: On-Line Voter file Access

Full Name (Last, First, Middle Initial)  
**B. Montgomery County Democratic Central Committee**

Mailing Address 3720 Farragut Ave

City Kensington State MD Zip Code 20895-2110

FEC ID number of contributing federal political committee. **C** C00009845

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2015  
**Transaction ID : C9707849**

Amount of Each Receipt this Period  
 500.00

Transfer

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3720.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11522.04

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

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

FOR LINE NUMBER: PAGE 24 OF 57  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)  
**A. Committee to Elect Catherine E. Pugh**  
 Mailing Address 3603 Dennlyn Rd.  
 City Baltimore State MD Zip Code 21215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 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 / 27 / 2015  
**Transaction ID : C9707856**  
 Amount of Each Receipt this Period  
 1000.00  
 Purchased MD Voterfile Fair Market Value

Full Name (Last, First, Middle Initial)  
**B. Committee to Elect David M. Smallwood**  
 Mailing Address 104 Hillvale Rd  
 City Baltimore State MD Zip Code 21229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2015  
**Transaction ID : C9672502**  
 Amount of Each Receipt this Period  
 650.00  
 Purchased MD Voterfile Fair Market Value

Full Name (Last, First, Middle Initial)  
**C. Committee To Elect Derrick Lennon**  
 Mailing Address 3928 Rosecrest Ave.  
 City Baltimore State MD Zip Code 21215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2015  
**Transaction ID : C9672482**  
 Amount of Each Receipt this Period  
 650.00  
 Purchased MD Voterfile Fair Market Value

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER: PAGE 25 OF 57  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)  
**A. Friends for Sheila Dixon**

Mailing Address PO Box 67023

City State Zip Code  
Baltimore MD 21215-0005

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015  
**Transaction ID : C9672483**

Amount of Each Receipt this Period  
4500.00

Purchased MD Voterfile Fair Market Value

Full Name (Last, First, Middle Initial)  
**B. Friends of Curtis Johnson**

Mailing Address 1421 Madison Avenue

City State Zip Code  
Baltimore MD 21217

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015  
**Transaction ID : C9704281**

Amount of Each Receipt this Period  
650.00

Purchased MD Voterfile Fair Market Value

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7450.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)

**A. American Visionary Art Museum**

Mailing Address 800 Key Hwy

City Baltimore State MD Zip Code 21230-3940

Purpose of Disbursement  
Fundraising Venue Cost

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : **D690527**

Amount of Each Disbursement this Period

3285.00

Full Name (Last, First, Middle Initial)

**B. CareFirst Blue Cross Shield of MD**

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279

Purpose of Disbursement  
employee health insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : **D690494**

Amount of Each Disbursement this Period

518.33

Full Name (Last, First, Middle Initial)

**C. Tyler Carr**

Mailing Address 239 Prince George St #3F

City Annapolis State MD Zip Code 21401

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : **D690645**

Amount of Each Disbursement this Period

1343.89

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

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

5147.22

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)

**A. City National Bank**

Mailing Address 2029 Century Park E  
B LEVEL

City Los Angeles State CA Zip Code 90067-2901

Purpose of Disbursement  
bank service fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2015

Transaction ID : D690535

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**B. City National Bank**

Mailing Address 2029 Century Park E  
B LEVEL

City Los Angeles State CA Zip Code 90067-2901

Purpose of Disbursement  
merchant service fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2015

Transaction ID : D690536

Amount of Each Disbursement this Period

69.94

Full Name (Last, First, Middle Initial)

**C. Erie Insurance**

Mailing Address 100 Erie Insurance Pl

City Erie State PA Zip Code 16530-9000

Purpose of Disbursement  
property liability insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : D690488

Amount of Each Disbursement this Period

941.00

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

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

1030.94

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)

**A. Erie Insurance**

Mailing Address 100 Erie Insurance Pl

City Erie State PA Zip Code 16530-9000

Purpose of Disbursement  
workers compensation insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

**Transaction ID : D690489**

Amount of Each Disbursement this Period

1611.00

Full Name (Last, First, Middle Initial)

**B. Jamiere Folmar**

Mailing Address 1301 U St NW  
Apt 802

City Washington State DC Zip Code 20009-7557

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

**Transaction ID : D690642**

Amount of Each Disbursement this Period

1629.55

Full Name (Last, First, Middle Initial)

**C. Jamiere Folmar**

Mailing Address 1301 U St NW  
Apt 802

City Washington State DC Zip Code 20009-7557

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

**Transaction ID : D690643**

Amount of Each Disbursement this Period

1629.55

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

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

4870.10

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)

**A. Frederick Douglass High School**

Mailing Address 2301 Gwynns Falls Pkwy

City Baltimore State MD Zip Code 21217

Purpose of Disbursement  
Drumline for Fundraiser

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : **D690532**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. H & W Printing**

Mailing Address 3616 Oak Ln

City Mount Rainier State MD Zip Code 20712-2128

Purpose of Disbursement  
printing tickets for fundraiser

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : **D690482**

Amount of Each Disbursement this Period

442.70

Full Name (Last, First, Middle Initial)

**C. Jay L. Baker Photography**

Mailing Address 3413 Dennlyn Rd

City Baltimore State MD Zip Code 21215

Purpose of Disbursement  
photographer for Fundraiser

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : **D690483**

Amount of Each Disbursement this Period

450.00

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

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

1142.70

**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"/> 24	<input type="checkbox"/> 25	<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)

**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)

**A. Martin's West**

Mailing Address 6821 Dogwood Rd

City Baltimore State MD Zip Code 21244-2608

Purpose of Disbursement  
Fundraiser catering service and food

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

**Transaction ID : D690528**

Amount of Each Disbursement this Period

24061.29

Full Name (Last, First, Middle Initial)

**B. Martin-Lauer Associates, LLC**

Mailing Address 1215 E. Fort Avenue, Suite 303

City Baltimore State MD Zip Code 21230

Purpose of Disbursement  
fundraising planning logistics consultant fees and expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

**Transaction ID : D690534**

Amount of Each Disbursement this Period

7633.26

Full Name (Last, First, Middle Initial)

**C. Maryland State Board of Elections**

Mailing Address 151 West St  
Ste 200

City Annapolis State MD Zip Code 21401-2852

Purpose of Disbursement  
voter file data update

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 28 / 2015

**Transaction ID : D690504**

Amount of Each Disbursement this Period

125.00

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

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

31819.55

**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"/> 24	<input type="checkbox"/> 25	<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)

**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)

**A. McKenna Pihlaja**

Mailing Address 1777 Church St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Video production for fundraiser

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

**Transaction ID : D690529**

Amount of Each Disbursement this Period

10000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Merchant Services / First Data**

Mailing Address PO Box 40766

City Fort Lauderdale State FL Zip Code 33340

Purpose of Disbursement  
merchant service fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2015

**Transaction ID : D690468**

Amount of Each Disbursement this Period

689.03

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Noel Isama - DJ Service**

Mailing Address 12803 Hawkshead Ter

City Silver Spring State MD Zip Code 20904-7152

Purpose of Disbursement  
DJ Service for Fundraiser

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 28 / 2015

**Transaction ID : D690503**

Amount of Each Disbursement this Period

800.00

Category/  
Type

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

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

11489.03

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)

**A. Paychex Inc**

Mailing Address 700 Red Brook Blvd  
Ste 200

City Owings Mills State MD Zip Code 21117-5185

Purpose of Disbursement  
payroll taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : D690650

Amount of Each Disbursement this Period

1273.23

Full Name (Last, First, Middle Initial)

**B. Paychex Inc**

Mailing Address 700 Red Brook Blvd  
Ste 200

City Owings Mills State MD Zip Code 21117-5185

Purpose of Disbursement  
payroll taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : D690651

Amount of Each Disbursement this Period

891.40

Full Name (Last, First, Middle Initial)

**C. Paychex Inc**

Mailing Address 700 Red Brook Blvd  
Ste 200

City Owings Mills State MD Zip Code 21117-5185

Purpose of Disbursement  
employer 401 K contributions

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : D690654

Amount of Each Disbursement this Period

336.46

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

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

2501.09



**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"/> 24	<input type="checkbox"/> 25	<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)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)

**A. Paychex Inc**

Mailing Address 700 Red Brook Blvd  
Ste 200

City Owings Mills State MD Zip Code 21117-5185

Purpose of Disbursement  
employer 401 K contributions

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

**Transaction ID : D690655**

Amount of Each Disbursement this Period

382.46

Full Name (Last, First, Middle Initial)

**B. Amanda E Pleasant**

Mailing Address 8010 Blair Mill Way, Apt. 205E

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

**Transaction ID : D690644**

Amount of Each Disbursement this Period

749.85

Full Name (Last, First, Middle Initial)

**C. PW Feats**

Mailing Address 3 E Read St

City Baltimore State MD Zip Code 21202-2567

Purpose of Disbursement  
podium and drape for Fundraiser

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 26 / 2015

**Transaction ID : D690501**

Amount of Each Disbursement this Period

414.00

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

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

1546.31

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)

**A. Patrick H Murray**

Mailing Address 522 S. Clinton St

City Baltimore State MD Zip Code 21224

Purpose of Disbursement  
Van Rental reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : D690517

Amount of Each Disbursement this Period

272.84

Full Name (Last, First, Middle Initial)

**B. Enterprise Rent-A-Car**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076

Purpose of Disbursement  
van rental to transport band for Fundraiser

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 26 / 2015

Transaction ID : D690518

Amount of Each Disbursement this Period

272.84

[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) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

272.84

59819.78

**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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

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)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC NATIONAL COMMITTEE**

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement  
on-line voter file access in kind offset

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 31 / 2015

**Transaction ID : D690656**

Amount of Each Disbursement this Period

3220.00

\* In-Kind

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) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

3220.00

3220.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Democratic State Central Committee of Maryland**

Full Name (Last, First, Middle Initial)

**A. Mr. Robert Meyerhoff**

Mailing Address 1025 Cranbrook Rd

City State Zip Code  
Cockeysville MD 21030-1465

Purpose of Disbursement  
refund excess contribution, exceeding 10K limit by \$50 on 10/27/15

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

**Transaction ID : D690533**

Amount of Each Disbursement this Period

50.00
-------

Refund excess contrib.

**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

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

Amount of Each Disbursement this Period

--

**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

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

Amount of Each Disbursement this Period

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

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

50.00
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50.00
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**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

NAME OF ACCOUNT Non Federal Account	DATE OF RECEIPT MM / DD / YYYY 10 / 19 / 2015	TOTAL AMOUNT TRANSFERRED 18040.33
--	---	--------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

i) <b>Total Administrative</b> .....	18040.33
<b>Transaction ID : T1060</b>	
ii) <b>Generic Voter Drive</b> .....	
iii) <b>Exempt Activities</b> .....	
iv) <b>Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
v) <b>Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) <b>Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Account	MM / DD / YYYY 10 / 30 / 2015	24689.56

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	24689.56
<b>Transaction ID : T1062</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	42729.89
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	42729.89

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

A. Full Name (Last, First, Middle Initial) <b>Advance Business Systems</b>		Transaction ID : <b>D690485</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 759319			Allocated Activity or Event Year-To-Date 458000.76	
City Baltimore	State MD	Zip Code 21275	Date 10 / 15 / 2015	
Purpose of Disbursement: office copier		Category/ Type	Date 10 / 15 / 2015	
Activity or Event Identifier: <b>Administrative</b>			Date 10 / 15 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
248.36			441.53	689.89

B. Full Name (Last, First, Middle Initial) <b>AT&amp;T Mobility</b>		Transaction ID : <b>D690479</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 6463			Allocated Activity or Event Year-To-Date 458000.76	
City Carol Stream	State IL	Zip Code 60197-6463	Date 10 / 15 / 2015	
Purpose of Disbursement: cell phone service employees		Category/ Type	Date 10 / 15 / 2015	
Activity or Event Identifier: Administrative			Date 10 / 15 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
85.72			152.39	238.11

C. Full Name (Last, First, Middle Initial) <b>BG&amp;E</b>		Transaction ID : <b>D690520</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 13070			Allocated Activity or Event Year-To-Date 458000.76	
City Philadelphia	State PA	Zip Code 19101-3070	Date 10 / 30 / 2015	
Purpose of Disbursement: electricity for office		Category/ Type	Date 10 / 30 / 2015	
Activity or Event Identifier: Administrative			Date 10 / 30 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
129.14			229.57	358.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
463.22		823.49		1286.71

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Democratic State Central Committee of Maryland**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D690470</b> <b>Blue Host</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1958 south 950 East		Allocated Activity or Event Year-To-Date 458000.76	
City Provo State UT Zip Code 84606	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: website service	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="61.83"/>		<input type="text" value="109.92"/>	<input type="text" value="171.75"/>

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D690495</b> <b>CareFirst Blue Cross Shield of MD</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 79749		Allocated Activity or Event Year-To-Date 458000.76	
City Baltimore State MD Zip Code 21279	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: employee health insurance under 25% FEA	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="652.46"/>		<input type="text" value="1159.93"/>	<input type="text" value="1812.39"/>

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D690476</b> <b>Charles R. Cook</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 208 W London Ave		Allocated Activity or Event Year-To-Date 458000.76	
City Salisbury State MD Zip Code 21801-3628	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: mileage reimbursement	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="112.68"/>		<input type="text" value="200.32"/>	<input type="text" value="313.00"/>

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="826.97"/>		<input type="text" value="1470.17"/>		<input type="text" value="2297.14"/>

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>



**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Democratic State Central Committee of Maryland**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D690640</b> <b>Charles R. Cook</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 208 W London Ave		Allocated Activity or Event Year-To-Date 458000.76	
City Salisbury State MD Zip Code 21801-3628	Purpose of Disbursement: payroll employee under 25% FEA	Category/ Type	Date 10 / 15 / 2015
Activity or Event Identifier: <b>Administrative</b>	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 852.49 + 1515.54 = 2368.03		

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D690506</b> <b>Charles R. Cook</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 208 W London Ave		Allocated Activity or Event Year-To-Date 458000.76	
City Salisbury State MD Zip Code 21801-3628	Purpose of Disbursement: mileage reimbursement	Category/ Type	Date 10 / 30 / 2015
Activity or Event Identifier: Administrative	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 67.32 + 119.68 = 187.00		

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D690641</b> <b>Charles R. Cook</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 208 W London Ave		Allocated Activity or Event Year-To-Date 458000.76	
City Salisbury State MD Zip Code 21801-3628	Purpose of Disbursement: payroll employee under 25% FEA	Category/ Type	Date 10 / 30 / 2015
Activity or Event Identifier: Administrative	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 852.50 + 1515.55 = 2368.05		

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1772.31		3150.77		4923.08

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D690474</b> <b>Chuck's Printing &amp; Blueline Service</b> Mailing Address 1110 Crain Highway SW		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code Glen Burnie MD 21061	<input type="text"/> Category/ Type	Allocated Activity or Event Year-To-Date <input type="text"/> 458000.76
Purpose of Disbursement: business card printing Activity or Event Identifier: <b>Administrative</b>		Date <input type="text"/> 10 / <input type="text"/> 15 / <input type="text"/> 2015
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 30.54 <input type="text"/> 54.28 <input type="text"/> 84.82		

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D690478</b> <b>Comcast Cable</b> Mailing Address PO Box 7691		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code Baltimore MD 21207-0691	<input type="text"/> Category/ Type	Allocated Activity or Event Year-To-Date <input type="text"/> 458000.76
Purpose of Disbursement: cable internet service for office Activity or Event Identifier: Administrative		Date <input type="text"/> 10 / <input type="text"/> 15 / <input type="text"/> 2015
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 98.08 <input type="text"/> 174.37 <input type="text"/> 272.45		

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D690519</b> <b>CubSMART 65413 Annapolis Storage</b> Mailing Address 1990 Moreland Parkway		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code Annapolis MD 21401	<input type="text"/> Category/ Type	Allocated Activity or Event Year-To-Date <input type="text"/> 458000.76
Purpose of Disbursement: storage unit rent Activity or Event Identifier: Administrative		Date <input type="text"/> 10 / <input type="text"/> 30 / <input type="text"/> 2015
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 103.32 <input type="text"/> 183.68 <input type="text"/> 287.00		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 231.94		<input type="text"/> 412.33		<input type="text"/> 644.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

A. Full Name (Last, First, Middle Initial) <b>Dunkin Donuts</b>		Transaction ID : <b>D690496</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 38 West Street			Allocated Activity or Event Year-To-Date 458000.76	
City Annapolis	State MD	Zip Code 21401	Date 10 / 15 / 2015	
Purpose of Disbursement: coffee for meeting		Category/ Type	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT	
Activity or Event Identifier: <b>Administrative</b>			32.38	57.56

B. Full Name (Last, First, Middle Initial) <b>High's</b>		Transaction ID : <b>D690497</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 708 Lison Center Dr			Allocated Activity or Event Year-To-Date 458000.76	
City Lisbon	State MD	Zip Code 21765	Date 10 / 15 / 2015	
Purpose of Disbursement: water for meeting		Category/ Type	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT	
Activity or Event Identifier: Administrative			4.57	8.13

C. Full Name (Last, First, Middle Initial) <b>Lexis-Nexis</b>		Transaction ID : <b>D690484</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1150 18th St NW Ste 600			Allocated Activity or Event Year-To-Date 458000.76	
City Washington	State DC	Zip Code 20036-3843	Date 10 / 15 / 2015	
Purpose of Disbursement: internet research service		Category/ Type	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT	
Activity or Event Identifier: Administrative			190.08	337.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
227.03		403.61		630.64

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Democratic State Central Committee of Maryland**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D690525</b> <b>MegaPath</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address DEPT 0324 PO Box 120324		Allocated Activity or Event Year-To-Date 458000.76	
City Dallas State TX Zip Code 75312	Date <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: office phones	Category/Type <input type="text"/>		
Activity or Event Identifier: <b>Administrative</b>			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="284.50"/>		<input type="text" value="505.78"/>	<input type="text" value="790.28"/>

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D690639</b> <b>Ms. Meredith F. Bowman</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1040 Sithean Way		Allocated Activity or Event Year-To-Date 458000.76	
City Glen Burnie State MD Zip Code 21060-8391	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: payroll employee under 25% FEA	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="969.42"/>		<input type="text" value="1723.42"/>	<input type="text" value="2692.84"/>

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D690514</b> <b>Ms. Meredith F. Bowman</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1040 Sithean Way		Allocated Activity or Event Year-To-Date 458000.76	
City Glen Burnie State MD Zip Code 21060-8391	Date <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: mileage reimbursement	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="27.94"/>		<input type="text" value="49.66"/>	<input type="text" value="77.60"/>

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1281.86"/>		<input type="text" value="2278.86"/>		<input type="text" value="3560.72"/>

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Democratic State Central Committee of Maryland**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D690638</b> <b>Ms. Meredith F. Bowman</b> Mailing Address 1040 Sithean Way City State Zip Code Glen Burnie MD 21060-8391 Purpose of Disbursement: payroll employee under 25% FEA Activity or Event Identifier: <b>Administrative</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 458000.76 Date <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 969.42 _____ 1723.42 _____ 2692.84	Category/ Type	

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D690500</b> <b>Microsoft Online</b> Mailing Address 1 Microsoft Way City State Zip Code Redmond WA 98052 Purpose of Disbursement: online internet cloud service Activity or Event Identifier: Administrative		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 458000.76 Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 21.60 _____ 38.40 _____ 60.00	Category/ Type	

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D690647</b> <b>Patrick H Murray</b> Mailing Address 522 S. Clinton St City State Zip Code Baltimore MD 21224 Purpose of Disbursement: payroll employee under 25% FEA Activity or Event Identifier: Administrative		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 458000.76 Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 1164.10 _____ 2069.51 _____ 3233.61	Category/ Type	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 2155.12		_____ 3831.33		_____ 5986.45

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D690646 Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC [ ] Mailing Address 522 S. Clinton St City Baltimore State MD Zip Code 21224 Purpose of Disbursement: payroll employee under 25% FEA Activity or Event Identifier: Administrative Date 10/30/2015 FEDERAL SHARE 1164.10 NONFEDERAL SHARE 2069.51 TOTAL AMOUNT 3233.61

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D690648 Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC [ ] Mailing Address 700 Red Brook Blvd Ste 200 City Owings Mills State MD Zip Code 21117-5185 Purpose of Disbursement: payroll service fee Activity or Event Identifier: Administrative Date 10/15/2015 FEDERAL SHARE 144.22 NONFEDERAL SHARE 256.38 TOTAL AMOUNT 400.60

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D690652 Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC [ ] Mailing Address 700 Red Brook Blvd Ste 200 City Owings Mills State MD Zip Code 21117-5185 Purpose of Disbursement: payroll taxes employee under 25% FEA Activity or Event Identifier: Administrative Date 10/15/2015 FEDERAL SHARE 1513.64 NONFEDERAL SHARE 2690.91 TOTAL AMOUNT 4204.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 2821.96, 5016.80, 7838.76

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [ ], [ ], [ ]

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Democratic State Central Committee of Maryland**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D690649</b> <b>Paychex Inc</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 700 Red Brook Blvd Ste 200		Allocated Activity or Event Year-To-Date 458000.76	
City Owings Mills State MD Zip Code 21117-5185	Purpose of Disbursement: payroll service fee		Date 10 / 30 / 2015
Activity or Event Identifier: <b>Administrative</b>		Category/Type	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
132.34 + 235.26 = 367.60			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D690653</b> <b>Paychex Inc</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 700 Red Brook Blvd Ste 200		Allocated Activity or Event Year-To-Date 458000.76	
City Owings Mills State MD Zip Code 21117-5185	Purpose of Disbursement: payroll taxes employee under 25% FEA		Date 10 / 30 / 2015
Activity or Event Identifier: Administrative		Category/Type	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
1562.04 + 2776.97 = 4339.01			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D690522</b> <b>Pitney Bowes Global Financial Service</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 371887		Allocated Activity or Event Year-To-Date 458000.76	
City Pittsburgh State PA Zip Code 15250	Purpose of Disbursement: postage meter lease		Date 10 / 30 / 2015
Activity or Event Identifier: Administrative		Category/Type	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
232.39 + 413.15 = 645.54			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1926.77		3425.38		5352.15

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

A. Full Name (Last, First, Middle Initial) <b>Qualitax</b>		Transaction ID : <b>D690531</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1450 Ritchie Hwy, #101			Allocated Activity or Event Year-To-Date 458000.76	
City Arnold	State MD	Zip Code 21012	Date 10 / 30 / 2015	
Purpose of Disbursement: accounting service		Category/ Type	Date	
Activity or Event Identifier: <b>Administrative</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
75.60			134.40	210.00

B. Full Name (Last, First, Middle Initial) <b>Ready Fresh</b>		Transaction ID : <b>D690473</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 856192			Allocated Activity or Event Year-To-Date 458000.76	
City Louisville	State KY	Zip Code 40285	Date 10 / 15 / 2015	
Purpose of Disbursement: water cooler		Category/ Type	Date	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
27.46			48.81	76.27

C. Full Name (Last, First, Middle Initial) <b>Salsa Labs</b>		Transaction ID : <b>D690481</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 674533			Allocated Activity or Event Year-To-Date 458000.76	
City Detroit	State MI	Zip Code 48267	Date 10 / 15 / 2015	
Purpose of Disbursement: website service		Category/ Type	Date	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
114.48			203.52	318.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.54		386.73		604.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

Form A: Sandler Reiff Lamb Rosenstein & Birkenstock. Transaction ID: D690521. Allocated Activity or Event: Administrative. Date: 10/30/2015. Total Amount: 400.00.

Form B: Shred-it USA LLC. Transaction ID: D690472. Allocated Activity or Event: Administrative. Date: 10/15/2015. Total Amount: 57.48.

Form C: Sidus Group. Transaction ID: D690475. Allocated Activity or Event: Administrative. Date: 10/15/2015. Total Amount: 200.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 236.69, 420.79, 657.48.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [blank], [blank], [blank].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

Form A: Smart Computing Solutions, Transaction ID: D690477. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form B: Smart Computing Solutions, Transaction ID: D690526. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form C: Staples Inc., Transaction ID: D690486. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 652.00, 1159.11, 1811.11.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

A. Full Name (Last, First, Middle Initial) <b>Towne Park</b>		Transaction ID : <b>D690467</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 275 West St			Allocated Activity or Event Year-To-Date 458000.76	
City Annapolis	State MD	Zip Code 21401-3400	Date 10 / 02 / 2015	
Purpose of Disbursement: monthly parking passes				
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
199.08			353.91	552.99

B. Full Name (Last, First, Middle Initial) <b>Tyler Carr</b>		Transaction ID : <b>D690509</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 239 Prince George St #3F			Allocated Activity or Event Year-To-Date 458000.76	
City Annapolis	State MD	Zip Code 21401	Date 10 / 30 / 2015	
Purpose of Disbursement: mileage reimbursement				
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
24.23			43.07	67.30

C. Full Name (Last, First, Middle Initial) <b>US Postal Service</b>		Transaction ID : <b>D690469</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1 Church Cir			Allocated Activity or Event Year-To-Date 458000.76	
City Annapolis	State MD	Zip Code 21401-1903	Date 10 / 12 / 2015	
Purpose of Disbursement: postage				
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
11.49			18.75	30.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
234.80		415.73		650.53

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

Form A: Verizon Wireless, Transaction ID: D690505. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form B: Verizon, Transaction ID: D690471. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form C: W&P LLC, Transaction ID: D690530. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 1996.63, NONFEDERAL SHARE 3549.56, TOTAL AMOUNT 5546.19

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

Form A: Ms. Meredith F. Bowman, Transaction ID: D690490. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

Form B: Magnolia Hotel, Transaction ID: D690493. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

Form C: Super Shuttle, Transaction ID: D690491. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for SUBTOTAL: FEDERAL SHARE (372.36), NONFEDERAL SHARE (661.98), TOTAL AMOUNT (1034.34).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for TOTAL: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Democratic State Central Committee of Maryland**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D690492</b> <b>Venice Ristorante</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1700 Wynkoop		Allocated Activity or Event Year-To-Date 458000.76	
City State Zip Code Denver CO 80202	Category/ Type	Date <input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: Meal expense			
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="19.57"/> + <input type="text" value="34.79"/> = <input type="text" value="54.36"/>			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D690507</b> <b>Charles R. Cook</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 208 W London Ave		Allocated Activity or Event Year-To-Date 458000.76	
City State Zip Code Salisbury MD 21801-3628	Category/ Type	Date <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: cell phone reimbursement see memo			
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="33.23"/> + <input type="text" value="59.08"/> = <input type="text" value="92.31"/>			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D690508</b> <b>Verizon Wireless</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 25505		Allocated Activity or Event Year-To-Date 458000.76	
City State Zip Code Lehigh Valley PA 18002	Category/ Type	Date <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: cell phone service C Cook			
Activity or Event Identifier: Administrative [MEMO ITEM]			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="33.23"/> + <input type="text" value="59.08"/> = <input type="text" value="92.31"/>			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="33.23"/>		<input type="text" value="59.08"/>		<input type="text" value="92.31"/>

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

A. Full Name (Last, First, Middle Initial) <b>Tyler Carr</b>		Transaction ID : <b>D690510</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 239 Prince George St #3F			Allocated Activity or Event Year-To-Date 458000.76	
City Annapolis	State MD	Zip Code 21401	Date 10 / 30 / 2015	
Purpose of Disbursement: Reimburse for power Cord - Walmart		Category/ Type	Date 10 / 30 / 2015	
Activity or Event Identifier: <b>Administrative</b>			Date 10 / 30 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
7.62			13.55	21.17

B. Full Name (Last, First, Middle Initial) <b>Walmart</b>		Transaction ID : <b>D690512</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2701 Port Covington Dr			Allocated Activity or Event Year-To-Date 458000.76	
City Baltimore	State MD	Zip Code 21230	Date 10 / 26 / 2015	
Purpose of Disbursement: power cord		Category/ Type	Date 10 / 26 / 2015	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Date 10 / 26 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
7.62			13.55	21.17

C. Full Name (Last, First, Middle Initial) <b>Tyler Carr</b>		Transaction ID : <b>D690511</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 239 Prince George St #3F			Allocated Activity or Event Year-To-Date 458000.76	
City Annapolis	State MD	Zip Code 21401	Date 10 / 30 / 2015	
Purpose of Disbursement: parking Reimbursement		Category/ Type	Date 10 / 30 / 2015	
Activity or Event Identifier: Administrative			Date 10 / 30 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
2.88			5.12	8.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.50		18.67		29.17

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

**A. Full Name (Last, First, Middle Initial) Transaction ID : D690513**  
**OmPark**  
Mailing Address 402 key Highway

City Baltimore State MD Zip Code 21230

Purpose of Disbursement: parking Reimbursement

Activity or Event Identifier: **Administrative**  
**[MEMO ITEM]**

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 458000.76

Date: 10 / 26 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.88		5.12		8.00

**B. Full Name (Last, First, Middle Initial) Transaction ID : D690515**  
**Ms. Meredith F. Bowman**  
Mailing Address 1040 Sithean Way

City Glen Burnie State MD Zip Code 21060-8391

Purpose of Disbursement: parking Reimbursement

Activity or Event Identifier: Administrative

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 458000.76

Date: 10 / 30 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.84		12.16		19.00

**C. Full Name (Last, First, Middle Initial) Transaction ID : D690516**  
**OmPark**  
Mailing Address 402 key Highway

City Baltimore State MD Zip Code 21230

Purpose of Disbursement: parking Reimbursement

Activity or Event Identifier: Administrative  
**[MEMO ITEM]**

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 458000.76

Date: 10 / 26 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.84		12.16		19.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.84		12.16		19.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



# SCHEDULE H4 (FEC Form 3X)

## DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

**Democratic State Central Committee of Maryland**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Patrick H Murray</b> Mailing Address 522 S. Clinton St City Baltimore State MD Zip Code 21224 Purpose of Disbursement: Hotel accommodations reimbursement Activity or Event Identifier: <b>Administrative</b>		<b>Transaction ID : D690523</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date: 458000.76 Date: 10 / 30 / 2015 Category/Type:
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 249.30 + 443.20 = 692.50		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Sheraton Philadelphia</b> Mailing Address 201 North 17th St City Philadelphia State PA Zip Code 19103 Purpose of Disbursement: Hotel accommodations reimbursement Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>		<b>Transaction ID : D690524</b> Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date: 458000.76 Date: 10 / 15 / 2015 Category/Type:
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 249.30 + 443.20 = 692.50		

<b>C. Full Name (Last, First, Middle Initial)</b> Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier:		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date: Date: / / Category/Type:
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT + + =		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
249.30		443.20		692.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
15717.07	27939.75	43656.82