

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

At The Table!

ADDRESS (number and street) PO Box 650496

Check if different than previously reported. (ACC) Fresh Meadows NY 11365

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00552489 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y in the State of NY

5. Covering Period M M / D D / Y Y Y Y Y Y 10 / 20 / 2016 through M M / D D / Y Y Y Y Y Y 11 / 28 / 2016

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

Kye, Sammy, J, ,

Type or Print Name of Treasurer

Signature of Treasurer Kye, Sammy, J, , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

At The Table!

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="2016"/>	<input type="text" value="20909.78"/>	<input type="text" value="20909.78"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="19698.87"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="29950.00"/>	<input type="text" value="53576.28"/>
(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="49648.87"/>	<input type="text" value="74486.06"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="16448.03"/>	<input type="text" value="41285.22"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="33200.84"/>	<input type="text" value="33200.84"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

At The Table!

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).....	29900.00	41480.00
(ii) Unitemized	50.00	2096.28
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	29950.00	43576.28
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	29950.00	53576.28
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	29950.00	53576.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	29950.00	53576.28

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1448.03	15785.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1448.03	15785.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	25000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	16448.03	41285.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16448.03	41285.22

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	29950.00	53576.28
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29950.00	53576.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1448.03	15785.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1448.03	15785.22

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 19
	<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	

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)
At The Table!

A. Tu, John, , ,

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

Mailing Address P.O. Box 8505

City Fountain Vly	State CA	Zip Code 92728-8505
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Kingston Technology	Occupation (for Individual) Businessman
--	--

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		25		2016

Transaction ID : C10708188

Amount of Each Receipt this Period
5000.00

Memo Item

B. Tu, Mary, , ,

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

Mailing Address P.O. Box 8505

City Fountain Vly	State CA	Zip Code 92728-8505
----------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Homemaker
--	--

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		25		2016

Transaction ID : C10708187

Amount of Each Receipt this Period
5000.00

Memo Item

C. Chan, Kenneth, , ,

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

Mailing Address 200 West 67th Street Apt #29G

City New York	State NY	Zip Code 10023
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) self	Occupation (for Individual) attorney; real estate investor
---	---

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		25		2016

Transaction ID : C10710031A

Amount of Each Receipt this Period
5000.00

Memo Item

* Earmarked Contribution: See Below

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 19
<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)
At The Table!

A. ActBlue

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
19950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : C10710031AB

Amount of Each Receipt this Period
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Cho, James, , ,

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

Mailing Address 236 East 47th Street

City New York	State NY	Zip Code 10017
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US Attorney's Office	Occupation (for Individual) attorney
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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	/	26	/	2016

Transaction ID : C10710032A

Amount of Each Receipt this Period
1000.00

Memo Item

* Earmarked Contribution: See Below

C. ActBlue

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
19950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2016

Transaction ID : C10710032AB

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
	<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)
At The Table!

A. Fang, Chien Hui, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 Beechwood Court
 City Warren State NJ Zip Code 07059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 08 / 2016
Transaction ID : C10715216A
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 19950.00

Date of Receipt 11 / 14 / 2016
Transaction ID : C10715216AB
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Jho, Harry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 Rector Street Suite 1050
 City New York State NY Zip Code 10006-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Harry Jho LLC Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 31 / 2016
Transaction ID : C10710030A
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
	<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)
At The Table!

A. ActBlue

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 19950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : C10710030AB

Amount of Each Receipt this Period
 5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Kim, Kevin, , ,

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

Mailing Address 60 Riverside Blvd
Apt 307

City New York	State NY	Zip Code 10069
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Not employed
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016

Transaction ID : C10713966A

Amount of Each Receipt this Period
 1300.00

Memo Item

* Earmarked Contribution: See Below

C. ActBlue

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 19950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2016

Transaction ID : C10713966AB

Amount of Each Receipt this Period
 1300.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1300.00
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 10 OF 19
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
At The Table!

A. Park, Jeannie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 Downing St
 Apt 4C
 City New York State NY Zip Code 10014-4331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : C10713968A
 Amount of Each Receipt this Period 1300.00
 Memo Item
 * Earmarked Contribution: See Below

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 19950.00

Date of Receipt 11 / 08 / 2016
Transaction ID : C10713968AB
 Amount of Each Receipt this Period 1300.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Sriratana, preeti, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Spruce St
 City New York State NY Zip Code 10038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) sas studios Occupation (for Individual) architect
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : C10713967A
 Amount of Each Receipt this Period 1300.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
At The Table!

A. ActBlue

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
19950.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2016

Transaction ID : C10713967AB

Amount of Each Receipt this Period
1300.00

Memo Item

Note: Above Contribution earmarked through this organization.

B.

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

Mailing Address

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	29900.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
At The Table!

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 14 Arrow St			FEC Identification Number C [] Transaction ID : D542374 Amount of Each Disbursement this Period [] 237.99	
City Cambridge	State MA	Zip Code 02138-5106	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type []		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 14 Arrow St			FEC Identification Number C [] Transaction ID : D542375 Amount of Each Disbursement this Period [] 197.50	
City Cambridge	State MA	Zip Code 02138-5106	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type []		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services			Date of Disbursement MM / DD / YYYY 11 / 08 / 2016	
Mailing Address 14 Arrow St			FEC Identification Number C [] Transaction ID : D542566 Amount of Each Disbursement this Period [] 154.05	
City Cambridge	State MA	Zip Code 02138-5106	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type []		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

589.54

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
At The Table!

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 11 / 14 / 2016
Mailing Address 14 Arrow St		FEC Identification Number C [] Transaction ID : D542600 Amount of Each Disbursement this Period [] 197.50
City Cambridge	State MA	Zip Code 02138-5106
Purpose of Disbursement Credit Card Processing Fee		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 11 / 28 / 2016
Mailing Address 14 Arrow St		FEC Identification Number C [] Transaction ID : D542938 Amount of Each Disbursement this Period [] 0.99
City Cambridge	State MA	Zip Code 02138-5106
Purpose of Disbursement Credit card processing fee		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Mehran Property Management		Date of Disbursement MM / DD / YYYY 11 / 02 / 2016
Mailing Address 33 E Carver St Ste 5		FEC Identification Number C [] Transaction ID : D542677 Amount of Each Disbursement this Period [] 110.00
City Huntington	State NY	Zip Code 11743-7600
Purpose of Disbursement PAC Office Rent		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

308.49

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
At The Table!

A. NGP VAN

Full Name (Last, First, Middle Initial)

Mailing Address 1101 15th St NW

City Washington State DC Zip Code 20005-5002

Purpose of Disbursement PAC Software License Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2016

FEC Identification Number: C

Transaction ID : D542673

Amount of Each Disbursement this Period: 300.00

Memo Item

B. The Frost Group

Full Name (Last, First, Middle Initial)

Mailing Address 3422 Porter St NW

City Washington State DC Zip Code 20016-3126

Purpose of Disbursement PAC Fundraising Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2016

FEC Identification Number: C

Transaction ID : D542676

Amount of Each Disbursement this Period: 250.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	1448.03

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

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NAME OF COMMITTEE (In Full)
At The Table!

Full Name (Last, First, Middle Initial) A. AMI BERA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 25 / 2016
Mailing Address PO Box 582496		FEC Identification Number C00461061 Transaction ID : D542668
City Elk Grove	State CA	Zip Code 95758-0042
Purpose of Disbursement Contribution		Category/Type
Candidate Name BERA, AMERISH, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 07	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANGIE CRAIG FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 25 / 2016
Mailing Address PO BOX 22116		FEC Identification Number C00575209 Transaction ID : D542659
City EAGAN	State MN	Zip Code 55122
Purpose of Disbursement Contribution		Category/Type
Candidate Name CRAIG, ANGELA DAWN, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 02	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FRIENDS OF ANNA THRONE-HOLST		Date of Disbursement MM / DD / YYYY 10 / 25 / 2016
Mailing Address PO BOX 6		FEC Identification Number C00578401 Transaction ID : D542665
City SOUTHAMPTON	State NY	Zip Code 11969
Purpose of Disbursement Contribution		Category/Type
Candidate Name THRONE-HOLST, ANNA, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 01	<input type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
At The Table!

Full Name (Last, First, Middle Initial) A. FRIENDS OF CHRISTINA M. HARTMAN			Date of Disbursement MM / DD / YYYY 10 / 25 / 2016	
Mailing Address PO Box 1576			FEC Identification Number C00580316 Transaction ID : D542670	
City Lancaster	State PA	Zip Code 17608-1576	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name HARTMAN, CHRISTINA MARIE MS., , ,				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: PA	District: 16			

Full Name (Last, First, Middle Initial) B. FRIENDS OF JANE DITTMAR			Date of Disbursement MM / DD / YYYY 10 / 25 / 2016	
Mailing Address PO Box 974			FEC Identification Number C00585976 Transaction ID : D542667	
City Charlottesville	State VA	Zip Code 22902-0974	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name DITTMAR, JANE DESIMONE, , ,				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: VA	District: 05			

Full Name (Last, First, Middle Initial) C. GREGORY FOR CONGRESS			Date of Disbursement MM / DD / YYYY 10 / 28 / 2016	
Mailing Address PO Box 478			FEC Identification Number C00578260 Transaction ID : D542675	
City Amityville	State NY	Zip Code 11701-0478	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name GREGORY, DUWAYNE, , ,				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY	District: 02			

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
At The Table!

Full Name (Last, First, Middle Initial) A. KIM MYERS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 25 / 2016
Mailing Address PO BOX 1255		FEC Identification Number C 000610642 Transaction ID : D542664
City VESTAL	State NY	Zip Code 13850
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name MYERS, KIM, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 22	

Full Name (Last, First, Middle Initial) B. KIRKPATRICK FOR SENATE		Date of Disbursement MM / DD / YYYY 10 / 25 / 2016
Mailing Address PO Box 34421		FEC Identification Number C 000578484 Transaction ID : D542672
City Phoenix	State AZ	Zip Code 85067-4421
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name KIRKPATRICK, ANN LEILA, , ,		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AZ	District: 00	

Full Name (Last, First, Middle Initial) C. KYRSTEN SINEMA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 28 / 2016
Mailing Address PO Box 25879		FEC Identification Number C 000508804 Transaction ID : D542674
City Tempe	State AZ	Zip Code 85285-5879
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name SINEMA, KYRSTEN, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AZ	District: 09	

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
At The Table!

Full Name (Last, First, Middle Initial) A. Mike Honda for Congress		Date of Disbursement MM / DD / YYYY 10 / 25 / 2016
Mailing Address 123 E San Carlos St C/O CONTRIBUTION SOLUTIONS, LLC		FEC Identification Number C 000351379 Transaction ID : D542669
City San Jose	State CA	Zip Code 95112-3680
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name HONDA, MIKE, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 17	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. MONICA VERNON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 25 / 2016
Mailing Address PO Box 1635		FEC Identification Number C 000571562 Transaction ID : D542662
City Cedar Rapids	State IA	Zip Code 52406-1635
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name VERNON, MONICA W, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 01	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. PRAMILA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 25 / 2016
Mailing Address PO Box 20753		FEC Identification Number C 000605592 Transaction ID : D542663
City Seattle	State WA	Zip Code 98102-1753
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name JAYAPAL, PRAMILA, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA	District: 07	<input type="checkbox"/> Memo Item

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
At The Table!

Full Name (Last, First, Middle Initial)

A. Rosen for Nevada

Mailing Address 1000 N GREEN VALLEY PKWY
#440-177

City Henderson State NV Zip Code 89074

Purpose of Disbursement
Contribution

Candidate Name
Rosen, Jacky, , ,

Office Sought: House Senate President
State: NV District: 03
Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			25			2016					

FEC Identification Number

C C00606939

Transaction ID : D542658

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address PO Box 10793

City Chicago State IL Zip Code 60610-0793

Purpose of Disbursement
Contribution

Candidate Name
DUCKWORTH, L TAMMY, , ,

Office Sought: House Senate President
State: IL District: 00
Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			25			2016					

FEC Identification Number

C C00574889

Transaction ID : D542666

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ZEPHYR TEACHOUT FOR CONGRESS

Mailing Address PO Box 491

City Rosendale State NY Zip Code 12472-0491

Purpose of Disbursement
Contribution

Candidate Name
TEACHOUT, ZEPHYR, , ,

Office Sought: House Senate President
State: NY District: 19
Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			25			2016					

FEC Identification Number

C C00608174

Transaction ID : D542671

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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

15000.00