

FEC FORM 3P

REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

ADDRESS (number and street)

Check if different than previously reported. (ACC)

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

3. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1) October 15 (Q3)
- July 15 (Q2) January 31 Year-End Report (YE)
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11)
- Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12)
- Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

12-Day Pre-Election Report for the Election on in the State of

30-Day Post-Election Report for the General Election on

4. IS THIS REPORT AN AMENDMENT?

yes no

5. COVERING PERIOD

10 / 01 / 2019 THROUGH 12 / 31 / 2019

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

Signature of Treasurer [Electronically Filed] Date 01 / 31 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109. All previous versions of this form are obsolete and should no longer be used.

Office Use Only

Write or Type Committee Name

Bernie 2016

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

SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	<input type="text" value="72829.06"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	<input type="text" value="17603.13"/>
8. SUBTOTAL (Lines 6 and 7)	<input type="text" value="90432.19"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 4)	<input type="text" value="11290.83"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8).....	<input type="text" value="79141.36"/>
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
13. EXPENDITURES SUBJECT TO LIMITATION (Use the worksheet on Page 8 to calculate this amount.).....	<input type="text" value="0.00"/>

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B on Page 4 from 17e, Column B on Page 3).....	<input type="text" value="- 21618.19"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B on Page 3 from 23, Column B on Page 4).....	<input type="text" value="107916.50"/>

DETAILED SUMMARY PAGE
of Receipts

NAME OF COMMITTEE (in Full)

Bernie 2016

Report Covering the Period: From:

/ /

To:

/ /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	0.00	0.00
(ii) unitemized	0.00	0.00
(iii) Total contributions	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	0.00	0.00
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	17600.00	880146.19
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	17600.00	880146.19
21. OTHER RECEIPTS (Dividends, Interest, etc.)	3.13	128053.48
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	17603.13	1008199.67

DETAILED SUMMARY PAGE
of Disbursements and Contributed Items

NAME OF COMMITTEE (in Full)

Bernie 2016

Report Covering the Period: From:

M M / D D / Y Y Y Y
10 / 01 / 2019

To:

M M / D D / Y Y Y Y
12 / 31 / 2019

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
23. OPERATING EXPENDITURES.....	11290.83	988062.69
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	4601500.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	21618.19
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	0.00	21618.19
29. OTHER DISBURSEMENTS	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	11290.83	5611180.88

III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	
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FEC Form 3P (Rev. 05/2016)
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00577130

Bernie 2016

ADDRESS (number and street)

PO Box 905

Burlington

CITY

VT

STATE

05402

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

NAME OF COMMITTEE (In Full)
Bernie 2016

A. Full Name (Last, First, Middle Initial)
NGP VAN, Inc.

Mailing Address PO Box 392264

City
Pittsburgh

State
PA

Zip Code
15251-9264

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

17600.00

Transaction ID : 16488242

Date of Receipt

M M / D D / Y Y Y Y
10 / 28 / 2019

Amount of Each Receipt this Period

17600.00

Memo Item
Refund of Overpayment

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

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) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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) ▼

Election Cycle-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).....

17600.00

Total This Period (last page this line number only).....

17600.00

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bernie 2016

A. Full Name (Last, First, Middle Initial)
People's United Bank

Mailing Address 1 Burlington Sq

City
Burlington

State
VT

Zip Code
05401-4413

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

38470.45

Transaction ID : 16488243

Date of Receipt

M M / D D / Y Y Y Y
12 / 31 / 2019

Amount of Each Receipt this Period

3.13

Memo Item
Interest

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

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) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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) ▼

Election Cycle-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).....

3.13

Total This Period (last page this line number only).....

3.13

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bernie 2016

Full Name (Last, First, Middle Initial) A. Authorize.Net			Date of Disbursement MM / DD / YYYY 10 / 02 / 2019		
Mailing Address 808 E Utah Valley Dr			FEC Identification Number C		
City American Fork	State UT	Zip Code 84003-9707	Transaction ID : 500132159		
Purpose of Disbursement Merchant Fees		Category/ Type	Amount of Each Disbursement this Period 198.00		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) B. Authorize.Net			Date of Disbursement MM / DD / YYYY 11 / 02 / 2019		
Mailing Address 808 E Utah Valley Dr			FEC Identification Number C		
City American Fork	State UT	Zip Code 84003-9707	Transaction ID : 500132160		
Purpose of Disbursement Merchant Fees		Category/ Type	Amount of Each Disbursement this Period 198.00		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) c. Authorize.Net			Date of Disbursement MM / DD / YYYY 12 / 02 / 2019		
Mailing Address 808 E Utah Valley Dr			FEC Identification Number C		
City American Fork	State UT	Zip Code 84003-9707	Transaction ID : 500132161		
Purpose of Disbursement Merchant Fees		Category/ Type	Amount of Each Disbursement this Period 198.00		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Subtotal Of Receipts This Page (optional)..... 594.00

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bernie 2016

Full Name (Last, First, Middle Initial) A. Blue Wave Political Partners			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019		
Mailing Address 119 1St Ave S # S320			FEC Identification Number C		
City Seattle	State WA	Zip Code 98104-3416	Transaction ID : 500132142 Amount of Each Disbursement this Period 547.52		
Purpose of Disbursement Compliance/Accounting		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) B. Blue Wave Political Partners			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019		
Mailing Address 119 1St Ave S # S320			FEC Identification Number C		
City Seattle	State WA	Zip Code 98104-3416	Transaction ID : 500132143 Amount of Each Disbursement this Period 1508.93		
Purpose of Disbursement Compliance/Accounting		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) c. Blue Wave Political Partners			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2019		
Mailing Address 119 1St Ave S # S320			FEC Identification Number C		
City Seattle	State WA	Zip Code 98104-3416	Transaction ID : 500132144 Amount of Each Disbursement this Period 1217.35		
Purpose of Disbursement Compliance/Accounting		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Subtotal Of Receipts This Page (optional)..... 3273.80

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bernie 2016

Full Name (Last, First, Middle Initial) A. Burlington Self Storage			Date of Disbursement MM / DD / YYYY 11 / 25 / 2019		
Mailing Address 1825 Shelburne Rd			FEC Identification Number C		
City South Burlington	State VT	Zip Code 05403-7719	Transaction ID : 500132147		
Purpose of Disbursement Rent		Category/ Type	Amount of Each Disbursement this Period 146.00		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) B. Burlington Self Storage			Date of Disbursement MM / DD / YYYY 12 / 23 / 2019		
Mailing Address 1825 Shelburne Rd			FEC Identification Number C		
City South Burlington	State VT	Zip Code 05403-7719	Transaction ID : 500132153		
Purpose of Disbursement Rent		Category/ Type	Amount of Each Disbursement this Period 119.00		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) c. Foster Garvey			Date of Disbursement MM / DD / YYYY 10 / 31 / 2019		
Mailing Address 1111 3Rd Ave Ste 3000			FEC Identification Number C		
City Seattle	State WA	Zip Code 98101-3296	Transaction ID : 500132145		
Purpose of Disbursement Legal Fees		Category/ Type	Amount of Each Disbursement this Period 3157.80		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Subtotal Of Receipts This Page (optional)..... 3422.80

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bernie 2016

Full Name (Last, First, Middle Initial) A. Foster Garvey			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019		
Mailing Address 1111 3Rd Ave Ste 3000			FEC Identification Number C		
City Seattle	State WA	Zip Code 98101-3296	Transaction ID : 500132148 Amount of Each Disbursement this Period 624.00		
Purpose of Disbursement Legal Fees		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Internal Revenue Service			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019		
Mailing Address PO Box 804522			FEC Identification Number C		
City Cincinnati	State OH	Zip Code 45280-4522	Transaction ID : 500132149 Amount of Each Disbursement this Period 589.30		
Purpose of Disbursement Taxes		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2019		
Mailing Address PO Box 392264			FEC Identification Number C		
City Pittsburgh	State PA	Zip Code 15251-9264	Transaction ID : 500132146 Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Software		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Subtotal Of Receipts This Page (optional)..... 1513.30

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bernie 2016

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc.			Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2019		
Mailing Address PO Box 392264			FEC Identification Number C		
City Pittsburgh	State PA	Zip Code 15251-9264	Transaction ID : 500132152 Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Software		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) B. NYS Workers Compensation Board			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019		
Mailing Address 328 State St Rm 331			FEC Identification Number C		
City Schenectady	State NY	Zip Code 12305-3201	Transaction ID : 500132150 Amount of Each Disbursement this Period 704.00		
Purpose of Disbursement Workers Comp		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) c. People's United Bank			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2019		
Mailing Address 1 Burlington Sq			FEC Identification Number C		
City Burlington	State VT	Zip Code 05401-4413	Transaction ID : 500132158 Amount of Each Disbursement this Period 241.60		
Purpose of Disbursement Bank Service Charges		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Subtotal Of Receipts This Page (optional)..... 1245.60

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bernie 2016

Full Name (Last, First, Middle Initial) A. People's United Bank			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2019		
Mailing Address 1 Burlington Sq			FEC Identification Number C		
City Burlington	State VT	Zip Code 05401-4413	Transaction ID : 500132157		
Purpose of Disbursement Bank Service Charges		Category/ Type	Amount of Each Disbursement this Period 234.90		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) B. People's United Bank			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2019		
Mailing Address 1 Burlington Sq			FEC Identification Number C		
City Burlington	State VT	Zip Code 05401-4413	Transaction ID : 500132156		
Purpose of Disbursement Bank Service Charges		Category/ Type	Amount of Each Disbursement this Period 239.40		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) c. Vermont Department Of Taxes			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2019		
Mailing Address 109 State St			FEC Identification Number C		
City Montpelier	State VT	Zip Code 05609-0002	Transaction ID : 500132151		
Purpose of Disbursement Income Taxes		Category/ Type	Amount of Each Disbursement this Period 402.74		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

Subtotal Of Receipts This Page (optional)..... 877.04

Total This Period (last page this line number only).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bernie 2016

Full Name (Last, First, Middle Initial) A. Vermont Department Of Taxes			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2019
Mailing Address 109 State St			FEC Identification Number C
City Montpelier	State VT	Zip Code 05609-0002	Transaction ID : 500132154 Amount of Each Disbursement this Period 364.29
Purpose of Disbursement Income Taxes		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y
Mailing Address			FEC Identification Number C
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item
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.			Date of Disbursement M M / D D / Y Y Y Y
Mailing Address			FEC Identification Number C
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item
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 Receipts This Page (optional)..... 364.29

Total This Period (last page this line number only)..... 11290.83