

**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

CENTER FORWARD COMMITTEE

ADDRESS (number and street)

555 12th Street, NW

Suite 700

Check if different  
than previously  
reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00568444

3. IS THIS  
REPORTNEW  
(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:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the  
State of

DC

5. Covering Period

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

through

M M / D D / Y Y Y Y Y Y  
11 / 26 / 2018

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

Murray, Jefferies, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Murray, Jefferies, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
12 / 06 / 2018

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**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

CENTER FORWARD COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 18 / 2018 To: M M / D D / Y Y Y Y Y Y  
11 / 26 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2018</span>		<span style="border: 1px solid black; padding: 2px;">2836.40</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">1082756.40</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">59224.52</span>	<span style="border: 1px solid black; padding: 2px;">1305724.52</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">1141980.92</span>	<span style="border: 1px solid black; padding: 2px;">1308560.92</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">1122020.52</span>	<span style="border: 1px solid black; padding: 2px;">1288600.52</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">19960.40</span>	<span style="border: 1px solid black; padding: 2px;">19960.40</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



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. 05/2016)

Page 3

Write or Type Committee Name

CENTER FORWARD COMMITTEE

Report Covering the Period:

From:

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

To:

M M	/	D D	/	Y Y Y Y
11		26		2018

**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).....

0.00

1500.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0.00

1500.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

56724.52

1241724.52

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

56724.52

1243224.52

## 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).....

2500.00

2500.00

## 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

60000.00

## 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)).....▶

59224.52

1305724.52

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

59224.52

1305724.52

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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 .....	15584.52	15664.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	15584.52	15664.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	1078136.00	1213136.00
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).....	28300.00	59800.00
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)) ..	1122020.52	1288600.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1122020.52	1288600.52

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	56724.52	1243224.52
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	56724.52	1243224.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	15584.52	15664.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2500.00	2500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	13084.52	13164.52

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @G 'CF' +H9A-N5HCB  
.

Form/Schedule: F3XN

Transaction ID :

Please note the following variances from items previously reported on 24-hour notices: 24-hour notice (amended) filed 10/30/2018: Dixon/Davis Media for \$6,435.00 was reported on the 24-hour notice in error. That transaction does not and should not appear on this report. 24-hour notice filed on 11/2/2018: BaughmanMerrill for \$57,500.00. This expenditure was a duplicate expenditure of an earlier noticed payment to the same vendor. Therefore this expenditure does not appear on this report. The transactions shown on this report to BaughmanMerrill are correct.

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: PAGE 7 OF 20

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**CENTER FORWARD COMMITTEE**

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

## **A. ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)**

Mailing Address 101 CONSTITUTION AVE NW  
SUITE 400W

City  
WASHINGTON

State  
DC

Zip Code  
20001

FEC ID number of contributing  
federal political committee.

**C** C00089136

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

**11** / **01** / **2018**

**Transaction ID : SA11C.4280**

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
Donation

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

## **B. HOUSE MAJORITY PAC**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City  
WASHINGTON

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

**C** C00495028

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6500.00

Date of Receipt

**11** / **01** / **2018**

**Transaction ID : SA11C.4288**

Amount of Each Receipt this Period

6500.00

☐ Memo Item  
Donation

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

## **C. PRIORITIES USA ACTION**

Mailing Address 1150 18TH ST NW  
STE 750

City  
WASHINGTON

State  
DC

Zip Code  
20036

FEC ID number of contributing  
federal political committee.

**C** C00495861

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50.00

Date of Receipt

**10** / **18** / **2018**

**Transaction ID : SA11C.4225**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
In-kind - Targeting NM-02

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

56550.00

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

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

FOR LINE NUMBER: PAGE 8 OF 20

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**CENTER FORWARD COMMITTEE**

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

## **A. PRIORITIES USA ACTION**

Mailing Address 1150 18TH ST NW  
STE 750

City  
WASHINGTON

State  
DC

Zip Code  
20036

FEC ID number of contributing  
federal political committee.

**C** C00495861

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

**10** / **18** / **2018**

**Transaction ID : SA11C.4228**

Amount of Each Receipt this Period

50.00

☐ Memo Item

In-kind - Targetting NJ-11

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

## **B. PRIORITIES USA ACTION**

Mailing Address 1150 18TH ST NW  
STE 750

City  
WASHINGTON

State  
DC

Zip Code  
20036

FEC ID number of contributing  
federal political committee.

**C** C00495861

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.52

Date of Receipt

**10** / **18** / **2018**

**Transaction ID : SA11C.4230**

Amount of Each Receipt this Period

124.52

☐ Memo Item

In-kind - Rageting AZ-00

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

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

/  /

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

174.52

56724.52



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

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

FOR LINE NUMBER: PAGE 9 OF 20  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 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)

**CENTER FORWARD COMMITTEE**

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

**A. BaughmanMerrill**

Mailing Address 1592 Union Street  
Suite 401

City  
San Francisco

State  
CA

Zip Code  
94123

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 ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2018

Transaction ID : SA15.4277

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
Refund of overpayment

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

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2500.00

2500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 20

<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

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)

**CENTER FORWARD COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Chain Bridge Bank**

Mailing Address 1445-A McLaughlin Avenue

City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Bank fee

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
10		23		2018

FEC Identification Number

**C****Transaction ID : SB21B.4293**

Amount of Each Disbursement this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chain Bridge Bank**

Mailing Address 1445-A McLaughlin Avenue

City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Bank fee

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
10		25		2018

FEC Identification Number

**C****Transaction ID : SB21B.4294**

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Chain Bridge Bank**

Mailing Address 1445-A McLaughlin Avenue

City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Bank fee

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
10		26		2018

FEC Identification Number

**C****Transaction ID : SB21B.4295**

Amount of Each Disbursement this Period

80.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 20

<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

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)

**CENTER FORWARD COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Chain Bridge Bank**

Mailing Address 1445-A McLaughlin Avenue

City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Bank fee

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2018			

FEC Identification Number

**C****Transaction ID : SB21B.4296**

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chain Bridge Bank**

Mailing Address 1445-A McLaughlin Avenue

City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Bank fee

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.4302**

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Lithia Consultants**

Mailing Address 120 E Walnut Streett

City  
AlexandriaState  
VAZip Code  
22301Purpose of Disbursement  
Adminstrative and technical services

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

FEC Identification Number

**C****Transaction ID : SB21B.4286**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10080.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 20

<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

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)

**CENTER FORWARD COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Lithia Consultants**

Mailing Address 120 E Walnut Streett

City  
AlexandriaState  
VAZip Code  
22301Purpose of Disbursement  
Adminstrative and technical services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			19			2018			

FEC Identification Number

**C** **Transaction ID : SB21B.4287**

Amount of Each Disbursement this Period

 5000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PRIORITIES USA ACTION**Mailing Address 1150 18TH ST NW  
STE 750City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
In-kind - Rageting AZ-00

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

**C** C00495861**Transaction ID : SB21B.4231**

Amount of Each Disbursement this Period

 124.52☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

**C** 

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 5124.52 15404.52

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 20

<input 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 checked="" 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)

**CENTER FORWARD COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Center Forward**Mailing Address 555 12th Street, NW  
7th FloorCity  
WashingtonState  
DCZip Code  
20004Purpose of Disbursement  
Refund to non-federal committee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB29.4284**

Amount of Each Disbursement this Period

8300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Center Forward**Mailing Address 555 12th Street, NW  
7th FloorCity  
WashingtonState  
DCZip Code  
20004Purpose of Disbursement  
Refund to non-federal committee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2018			

FEC Identification Number

**C****Transaction ID : SB29.4285**

Amount of Each Disbursement this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

28300.00

28300.00

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 14 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CENTER FORWARD COMMITTEE</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00568444	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>BaughmanMerrill</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1592 Union Street Suite 401			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 27 / 2018		
City San Francisco		State CA	Zip Code 94123		
Purpose of Expenditure Digital advertising (estimated)		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Amount <span style="border: 1px solid black; padding: 2px;">60000.00</span>	
Name of Federal Candidate: SHERRILL, REBECCA MICHELLE, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">60000.00</span>			Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Ethica</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1225 Franklin Ave Suite 325			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 19 / 2018		
City Garden City		State NY	Zip Code 11530		
Purpose of Expenditure Media production and time buy		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Amount <span style="border: 1px solid black; padding: 2px;">124996.00</span>	
Name of Federal Candidate: CRAMER, KEVIN J, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">124996.00</span>			Office Sought: <input checked="" type="checkbox"/> House District: 00 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ND Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">184996.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Murray, Jefferies, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 06 / 2018		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 15 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CENTER FORWARD COMMITTEE</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00568444	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <b>Ethica</b> <span style="float: right;"><input type="checkbox"/> Memo Item</span>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2018		
Mailing Address 1225 Franklin Ave Suite 325			Amount <span style="border: 1px solid black; padding: 2px;">100000.00</span>		
City Garden City	State NY	Zip Code 11530	Transaction ID : <b>SE.4220</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2018		
Purpose of Expenditure Digital media buy & poroduction (estimated0			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate: MCSALLY, MARTHA, , , <span style="float: right;"><input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose</span>			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">100000.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Ethica</b> <span style="float: right;"><input type="checkbox"/> Memo Item</span>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 23 / 2018		
Mailing Address 1225 Franklin Ave Suite 325			Amount <span style="border: 1px solid black; padding: 2px;">125000.00</span>		
City Garden City	State NY	Zip Code 11530	Transaction ID : <b>SE.4235</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 23 / 2018		
Purpose of Expenditure Radio time buy & production (estimated)			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate: MURPHY, STEPHANIE, , , <span style="float: right;"><input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose</span>			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">125000.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">225000.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Murray, Jefferies, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 06 / 2018	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 16 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CENTER FORWARD COMMITTEE</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00568444	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Ethica</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 23 / 2018		
Mailing Address 1225 Franklin Ave Suite 325			Amount <span style="border: 1px solid black; padding: 2px;">150000.00</span>		
City Garden City		State NY	Zip Code 11530		Transaction ID : <b>SE.4236</b>
Purpose of Expenditure Radio time buy & production			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 23 / 2018
Name of Federal Candidate: BRAUN, MIKE, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: IN
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">150000.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Ethica</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 23 / 2018		
Mailing Address 1225 Franklin Ave Suite 325			Amount <span style="border: 1px solid black; padding: 2px;">70000.00</span>		
City Garden City		State NY	Zip Code 11530		Transaction ID : <b>SE.4237</b>
Purpose of Expenditure Digital time buy & production (estimate)			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 23 / 2018
Name of Federal Candidate: TORRES SMALL, XOCHITL, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President State: NM
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">70000.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">220000.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Murray, Jefferies, , , Signature			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 06 / 2018



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 17 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CENTER FORWARD COMMITTEE</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00568444	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Ethica</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 23 / 2018		
Mailing Address 1225 Franklin Ave Suite 325			Amount <span style="border: 1px solid black; padding: 2px;">50000.00</span>		
City Garden City	State NY	Zip Code 11530	Transaction ID : <b>SE.4238</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 23 / 2018		
Purpose of Expenditure Radio time buy & production (estimated)		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>			
Name of Federal Candidate: TARKANIAN, DANNY, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">50000.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Ethica</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 27 / 2018		
Mailing Address 1225 Franklin Ave Suite 325			Amount <span style="border: 1px solid black; padding: 2px;">150240.00</span>		
City Garden City	State NY	Zip Code 11530	Transaction ID : <b>SE.4246</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 26 / 2018		
Purpose of Expenditure Media time buy and production (estimated)		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: WATKINS, STEVE, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">150240.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">200240.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Murray, Jefferies, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 06 / 2018	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 18 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CENTER FORWARD COMMITTEE</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00568444	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Ethica</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 30 / 2018		
Mailing Address 1225 Franklin Ave Suite 325			Amount <span style="border: 1px solid black; padding: 2px;">23666.66</span>		
City Garden City	State NY	Zip Code 11530	Transaction ID : <b>SE.4258</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 30 / 2018		
Purpose of Expenditure Digital production & time buy (estimated)		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: RUIZ, RAUL DR, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 36 <input type="checkbox"/> President <input type="checkbox"/> State: CA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">23666.66</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Ethica</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 30 / 2018		
Mailing Address 1225 Franklin Ave Suite 325			Amount <span style="border: 1px solid black; padding: 2px;">23666.67</span>		
City Garden City	State NY	Zip Code 11530	Transaction ID : <b>SE.4260</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 30 / 2018		
Purpose of Expenditure Digital production & time buy (estimated)		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: SANCHEZ, LINDA, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 38 <input type="checkbox"/> President <input type="checkbox"/> State: CA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">23666.67</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">47333.33</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Murray, Jefferies, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 06 / 2018	
Signature					

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 19 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CENTER FORWARD COMMITTEE</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00568444</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

  

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Ethica</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">30</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Mailing Address 1225 Franklin Ave Suite 325			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">23666.67</div>		
City Garden City	State NY	Zip Code 11530	<b>Transaction ID : SE.4261</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">30</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Purpose of Expenditure Digital production & time buy (estimated)			Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>		
Name of Federal Candidate: BROWNLEY, JULIA, ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose         </div> <div>           Office Sought: <input checked="" type="checkbox"/> House    District: 26  <input type="checkbox"/> President    <input type="checkbox"/> Senate    State: CA         </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">23666.67</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		

  

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Ethica</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">30</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Mailing Address 1225 Franklin Ave Suite 325			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10000.00</div>		
City Garden City	State NY	Zip Code 11530	<b>Transaction ID : SE.4262</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">30</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Purpose of Expenditure Digital production & time buy (estimated)			Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>		
Name of Federal Candidate: BERA, AMERISH, ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose         </div> <div>           Office Sought: <input checked="" type="checkbox"/> House    District: 07  <input type="checkbox"/> President    <input type="checkbox"/> Senate    State: CA         </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">10000.00</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">33666.67</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
(c) TOTAL Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Murray, Jefferies, , ,*

Signature

*[Electronically Filed]*

Date

M M /

D D /

Y Y Y Y Y Y

12

06

2018

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

PAGE	20	OF	20
FOR LINE 24 OF FORM 3X			

NAME OF COMMITTEE (In Full) <b>CENTER FORWARD COMMITTEE</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00568444	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on			<div style="border: 1px solid black; padding: 2px;">         M M / D D / Y Y Y Y Y Y          10 / 30 / 2018       </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Waterfront Strategies</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">         M M / D D / Y Y Y Y Y Y          10 / 30 / 2018       </div>	
Mailing Address 3050 K Street, NW Suite 100			Amount <div style="border: 1px solid black; padding: 2px;">         166900.00       </div>	
City Washington	State DC	Zip Code 20007	Transaction ID : <b>SE.4251</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">         M M / D D / Y Y Y Y Y Y          10 / 29 / 2018       </div>	
Purpose of Expenditure Media time buy & production (estimated)			Category/Type	
Name of Federal Candidate: ROGERS, WENDY, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: AZ	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px;">         166900.00       </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">         M M / D D / Y Y Y Y Y Y       </div>	
Mailing Address			Amount <div style="border: 1px solid black; padding: 2px;">         166900.00       </div>	
City	State	Zip Code	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">         M M / D D / Y Y Y Y Y Y       </div>	
Purpose of Expenditure			Category/Type	
Name of Federal Candidate:			<input type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px;">         166900.00       </div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px;">         166900.00       </div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px;">         166900.00       </div>	
<b>(c) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px;">         1078136.00       </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Murray, Jefferies, , ,</u>			Date <div style="border: 1px solid black; padding: 2px;">         M M / D D / Y Y Y Y Y Y          12 / 06 / 2018       </div>	

[Electronically Filed]