

# 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

07 /  01 /  2017 THROUGH  07 /  31 /  2017

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  10 /  21 /  2017

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

# JILL STEIN FOR PRESIDENT

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

## SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	<input type="text" value="1293904.26"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3) .....	<input type="text" value="0.00"/>
8. SUBTOTAL (Lines 6 and 7) .....	<input type="text" value="1293904.26"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 4) .....	<input type="text" value="110117.00"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8).....	<input type="text" value="1183787.26"/>
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="87740.00"/>
13. EXPENDITURES SUBJECT TO LIMITATION (Use the worksheet on Page 8 to calculate this amount.).....	<input type="text" value="3564555.23"/>

## 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="3217134.39"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B on Page 3 from 23, Column B on Page 4).....	<input type="text" value="3549399.17"/>

**DETAILED SUMMARY PAGE**  
of Receipts

NAME OF COMMITTEE (in Full)

**JILL STEIN FOR PRESIDENT**

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	456035.39
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized .....	0.00	1119095.08
(ii) unitemized .....	0.00	2100504.31
(iii) Total contributions .....	0.00	3219599.39
(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	3219599.39
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate .....	0.00	40000.00
(b) Other Loans .....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b)) .....	0.00	40000.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating .....	0.00	16652.53
(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)) .....	0.00	16652.53
21. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21) .....	0.00	3732287.31

**DETAILED SUMMARY PAGE**

FEC Form 3P (Rev. 05/2016)

of Disbursements and Contributed Items

NAME OF COMMITTEE (in Full)

**JILL STEIN FOR PRESIDENT**

Report Covering the Period: From:

07 / 01 / 2017

To:

07 / 31 / 2017

**II. DISBURSEMENTS**

**COLUMN A  
Total This Period**

**COLUMN B  
Election Cycle-to-Date**

23. OPERATING EXPENDITURES.....	110117.00	3566051.70
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	22300.00
25. FUNDRAISING DISBURSEMENTS .....	0.00	15156.06
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	2465.00
(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	2465.00
29. OTHER DISBURSEMENTS .....	0.00	250.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....	110117.00	3606222.76

**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 C00581199

JILL STEIN FOR PRESIDENT

ADDRESS (number and street)

PO Box 260197

Madison

CITY

WI

STATE

53726

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 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

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2017		
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C		
City Fort Worth	State TX	Zip Code 76155	Transaction ID : <b>SB23.426833</b> Amount of Each Disbursement this Period 569.51		
Purpose of Disbursement Airline Tickets		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2017		
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C		
City Fort Worth	State TX	Zip Code 76155	Transaction ID : <b>SB23.426872</b> Amount of Each Disbursement this Period 75.00		
Purpose of Disbursement Airline Ticket Costs		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2017		
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C		
City Fort Worth	State TX	Zip Code 76155	Transaction ID : <b>SB23.426846</b> Amount of Each Disbursement this Period 384.30		
Purpose of Disbursement Airline Tickets		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Subtotal Of Receipts This Page (optional)..... 1028.81

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2017		
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C		
City Fort Worth	State TX	Zip Code 76155	Transaction ID : <b>SB23.426896</b> Amount of Each Disbursement this Period 16.76		
Purpose of Disbursement Airline Booking Costs		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2017		
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C		
City Fort Worth	State TX	Zip Code 76155	Transaction ID : <b>SB23.426822</b> Amount of Each Disbursement this Period 779.30		
Purpose of Disbursement Airline Tickets		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2017		
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C		
City Fort Worth	State TX	Zip Code 76155	Transaction ID : <b>SB23.426827</b> Amount of Each Disbursement this Period 666.09		
Purpose of Disbursement Airline Tickets		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

**Subtotal Of Receipts This Page** (optional)..... 1462.15

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement MM / DD / YYYY 07 / 31 / 2017		
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C		
City Fort Worth	State TX	Zip Code 76155	Transaction ID : <b>SB23.426876</b> Amount of Each Disbursement this Period 56.11		
Purpose of Disbursement Airline Tickets		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>			Date of Disbursement MM / DD / YYYY 07 / 02 / 2017		
Mailing Address 4300 Garden City Dr			FEC Identification Number C		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>SB23.426852</b> Amount of Each Disbursement this Period 318.00		
Purpose of Disbursement Train Tickets		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Amtrak</b>			Date of Disbursement MM / DD / YYYY 07 / 07 / 2017		
Mailing Address 4300 Garden City Dr			FEC Identification Number C		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>SB23.426815</b> Amount of Each Disbursement this Period 1056.00		
Purpose of Disbursement Train Tickets		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

**Subtotal Of Receipts This Page** (optional)..... 1430.11

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>			Date of Disbursement MM / DD / YYYY 07 / 18 / 2017		
Mailing Address 4300 Garden City Dr			FEC Identification Number C		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>SB23.426857</b>		
Purpose of Disbursement Train Tickets		Category/ Type	Amount of Each Disbursement this Period 202.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Apple Store</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2017		
Mailing Address 1 Infinite Loop			FEC Identification Number C		
City Cupertino	State CA	Zip Code 95014	Transaction ID : <b>SB23.426791</b>		
Purpose of Disbursement Office Laptop + Equipment		Category/ Type	Amount of Each Disbursement this Period 3780.10		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Artful Dodger Productions</b>			Date of Disbursement MM / DD / YYYY 07 / 07 / 2017		
Mailing Address PO Box 1099			FEC Identification Number C		
City Groton	State MA	Zip Code 01450	Transaction ID : <b>SB23.426788</b>		
Purpose of Disbursement Videography Services		Category/ Type	Amount of Each Disbursement this Period 11500.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Subtotal Of Receipts This Page (optional)..... 15482.10

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

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net</b>			Date of Disbursement MM / DD / YYYY 07 / 05 / 2017		
Mailing Address PO Box 8999			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94128-8999	Transaction ID : <b>SB23.426885</b> Amount of Each Disbursement this Period 35.00		
Purpose of Disbursement Donation Processing Services		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Belle, Anita, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 01 / 2017		
Mailing Address 415 Burns Dr #S-201			FEC Identification Number C		
City Detroit	State MI	Zip Code 48214	Transaction ID : <b>SB23.426835</b> Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Recount Organizing Services		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Belle, Anita, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 08 / 2017		
Mailing Address 415 Burns Dr #S-201			FEC Identification Number C		
City Detroit	State MI	Zip Code 48214	Transaction ID : <b>SB23.426836</b> Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Recount Organizing Services		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:			

Subtotal Of Receipts This Page (optional)..... 1035.00

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Best Buy</b>			Date of Disbursement MM / DD / YYYY 07 / 06 / 2017		
Mailing Address 7357 W Towne Way			FEC Identification Number C		
City Madison	State WI	Zip Code 53719	Transaction ID : <b>SB23.426863</b> Amount of Each Disbursement this Period 156.11		
Purpose of Disbursement Computer Cables		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Blackmon, Robert, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 23 / 2017		
Mailing Address 1161 N Ogden Dr #109			FEC Identification Number C		
City West Hollywood	State CA	Zip Code 90046	Transaction ID : <b>SB23.426793</b> Amount of Each Disbursement this Period 3000.00		
Purpose of Disbursement Web Management Services		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. BP - Madison</b>			Date of Disbursement MM / DD / YYYY 07 / 02 / 2017		
Mailing Address 735 E. Washington Ave.			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426882</b> Amount of Each Disbursement this Period 42.55		
Purpose of Disbursement Gasoline Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other				
State: District:					

Subtotal Of Receipts This Page (optional)..... 3198.66

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. BP - Madison</b>			Date of Disbursement MM / DD / YYYY 07 / 04 / 2017		
Mailing Address 735 E. Washington Ave.					
City Madison		State WI	Zip Code 53703		
Purpose of Disbursement Gasoline Costs				Category/ Type	
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: _____ District: _____		FEC Identification Number <b>C</b> _____ Transaction ID : <b>SB23.426886</b> Amount of Each Disbursement this Period _____ 32.55			
<input type="checkbox"/> Memo Item					

Full Name (Last, First, Middle Initial) <b>B. BP - Madison</b>			Date of Disbursement MM / DD / YYYY 07 / 25 / 2017		
Mailing Address 735 E. Washington Ave.					
City Madison		State WI	Zip Code 53703		
Purpose of Disbursement Gasoline Costs				Category/ Type	
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: _____ District: _____		FEC Identification Number <b>C</b> _____ Transaction ID : <b>SB23.426883</b> Amount of Each Disbursement this Period _____ 40.86			
<input type="checkbox"/> Memo Item					

Full Name (Last, First, Middle Initial) <b>c. Citrix Online</b>			Date of Disbursement MM / DD / YYYY 07 / 15 / 2017		
Mailing Address 4988 Great America Pkwy					
City Santa Clara		State CA	Zip Code 95054		
Purpose of Disbursement Video Conference Software				Category/ Type	
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: _____ District: _____		FEC Identification Number <b>C</b> _____ Transaction ID : <b>SB23.426869</b> Amount of Each Disbursement this Period _____ 93.90			
<input type="checkbox"/> Memo Item					

Subtotal Of Receipts This Page (optional)..... 167.31

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Cobb, David, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 03 / 2017		
Mailing Address 1402 M St			FEC Identification Number <b>C</b>		
City Eureka	State CA	Zip Code 95501	Transaction ID : <b>SB23.426792</b>		
Purpose of Disbursement Campaign Manager		Category/ Type	Amount of Each Disbursement this Period 3760.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Cobb, David, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 12 / 2017		
Mailing Address 1402 M St			FEC Identification Number <b>C</b>		
City Eureka	State CA	Zip Code 95501	Transaction ID : <b>SB23.426805</b>		
Purpose of Disbursement Campaign Manager		Category/ Type	Amount of Each Disbursement this Period 1455.54		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Cobb, David, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 19 / 2017		
Mailing Address 1402 M St			FEC Identification Number <b>C</b>		
City Eureka	State CA	Zip Code 95501	Transaction ID : <b>SB23.426823</b>		
Purpose of Disbursement Campaign Manager		Category/ Type	Amount of Each Disbursement this Period 727.77		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

**Subtotal Of Receipts This Page** (optional)..... → 5943.31

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Cobb, David, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 19 / 2017		
Mailing Address 1402 M St			FEC Identification Number C		
City Eureka	State CA	Zip Code 95501	Transaction ID : <b>SB23.426824</b>		
Purpose of Disbursement Campaign Manager		Category/ Type	Amount of Each Disbursement this Period 727.77		
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>B. Cobb, David, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 27 / 2017		
Mailing Address 1402 M St			FEC Identification Number C		
City Eureka	State CA	Zip Code 95501	Transaction ID : <b>SB23.426811</b>		
Purpose of Disbursement Campaign Manager		Category/ Type	Amount of Each Disbursement this Period 1306.66		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Cobb, David, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 27 / 2017		
Mailing Address 1402 M St			FEC Identification Number C		
City Eureka	State CA	Zip Code 95501	Transaction ID : <b>SB23.426812</b>		
Purpose of Disbursement Campaign Manager		Category/ Type	Amount of Each Disbursement this Period 1306.66		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

**Subtotal Of Receipts This Page** (optional)..... 3341.09

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Cobb, David, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2017		
Mailing Address 1402 M St			FEC Identification Number <b>C</b>		
City Eureka	State CA	Zip Code 95501			
Purpose of Disbursement Campaign Manager		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		Memo Item <input type="checkbox"/>		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Cobb, David, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2017		
Mailing Address 1402 M St			FEC Identification Number <b>C</b>		
City Eureka	State CA	Zip Code 95501			
Purpose of Disbursement Campaign Manager		Candidate Name		Category/ Type	
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) ▼ Other		Memo Item <input type="checkbox"/>		
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Delta Airlines</b>			Date of Disbursement MM / DD / YYYY 07 / 09 / 2017		
Mailing Address PO Box 20706			FEC Identification Number <b>C</b>		
City Atlanta	State GA	Zip Code 30320			
Purpose of Disbursement Airline Tickets		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		Memo Item <input type="checkbox"/>		
State:	District:				

Subtotal Of Receipts This Page (optional)..... 4053.40

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>			Date of Disbursement MM / DD / YYYY 07 / 09 / 2017		
Mailing Address PO Box 20706			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30320	Transaction ID : <b>SB23.426862</b> Amount of Each Disbursement this Period 158.00		
Purpose of Disbursement Airline Booking Costs		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>			Date of Disbursement MM / DD / YYYY 07 / 23 / 2017		
Mailing Address PO Box 20706			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30320	Transaction ID : <b>SB23.426854</b> Amount of Each Disbursement this Period 252.20		
Purpose of Disbursement Airline Tickets		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Delta Airlines</b>			Date of Disbursement MM / DD / YYYY 07 / 31 / 2017		
Mailing Address PO Box 20706			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30320	Transaction ID : <b>SB23.426829</b> Amount of Each Disbursement this Period 619.60		
Purpose of Disbursement Airline Tickets		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Subtotal Of Receipts This Page (optional)..... 1029.80

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>			Date of Disbursement MM / DD / YYYY 07 / 31 / 2017		
Mailing Address PO Box 20706			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30320	Transaction ID : <b>SB23.426830</b> Amount of Each Disbursement this Period 618.40		
Purpose of Disbursement Airline Tickets		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Dropbox</b>			Date of Disbursement MM / DD / YYYY 07 / 18 / 2017		
Mailing Address 185 Berry St #400			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94107	Transaction ID : <b>SB23.426871</b> Amount of Each Disbursement this Period 90.00		
Purpose of Disbursement Digital File Storage Services		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>c. Enterprise - Evanston</b>			Date of Disbursement MM / DD / YYYY 07 / 06 / 2017		
Mailing Address 1810 Maple Ave			FEC Identification Number C		
City Evanston	State IL	Zip Code 60201	Transaction ID : <b>SB23.426843</b> Amount of Each Disbursement this Period 452.42		
Purpose of Disbursement Rental Car Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

**Subtotal Of Receipts This Page** (optional)..... 1160.82

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Ferguson, Kendall, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 03 / 2017	
Mailing Address 1622 Fordem Ave #401			FEC Identification Number C	
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426819</b> Amount of Each Disbursement this Period 960.00	
Purpose of Disbursement Finance Associate		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Ferguson, Kendall, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 03 / 2017	
Mailing Address 1622 Fordem Ave #401			FEC Identification Number C	
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426820</b> Amount of Each Disbursement this Period 960.00	
Purpose of Disbursement Finance Associate		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>c. Ferguson, Kendall, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 12 / 2017	
Mailing Address 1622 Fordem Ave #401			FEC Identification Number C	
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426825</b> Amount of Each Disbursement this Period 706.82	
Purpose of Disbursement Finance Associate Services		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

**Subtotal Of Receipts This Page** (optional)..... 2626.82

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Ferguson, Kendall, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 12 / 2017		
Mailing Address 1622 Fordem Ave #401			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426826</b> Amount of Each Disbursement this Period 706.81		
Purpose of Disbursement Finance Associate Services		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>B. Ferguson, Kendall, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 27 / 2017		
Mailing Address 1622 Fordem Ave #401			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426808</b> Amount of Each Disbursement this Period 1413.63		
Purpose of Disbursement Finance Associate		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Figueroa, Meleiza, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 03 / 2017		
Mailing Address 1526 Beau Rivage			FEC Identification Number C		
City San Pablo	State CA	Zip Code 94806	Transaction ID : <b>SB23.426831</b> Amount of Each Disbursement this Period 576.00		
Purpose of Disbursement Press Director		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

**Subtotal Of Receipts This Page** (optional).....→ 2696.44

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Figueroa, Meleiza, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 12 / 2017		
Mailing Address 1526 Beau Rivage			FEC Identification Number C		
City San Pablo	State CA	Zip Code 94806	Transaction ID : <b>SB23.426841</b>		
Purpose of Disbursement Press Director		Category/ Type	Amount of Each Disbursement this Period 485.38		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Figueroa, Meleiza, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 27 / 2017		
Mailing Address 1526 Beau Rivage			FEC Identification Number C		
City San Pablo	State CA	Zip Code 94806	Transaction ID : <b>SB23.426842</b>		
Purpose of Disbursement Press Director		Category/ Type	Amount of Each Disbursement this Period 485.38		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Figueroa, Meleiza, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2017		
Mailing Address 1526 Beau Rivage			FEC Identification Number C		
City San Pablo	State CA	Zip Code 94806	Transaction ID : <b>SB23.426832</b>		
Purpose of Disbursement Press Director		Category/ Type	Amount of Each Disbursement this Period 576.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

<b>Subtotal Of Receipts This Page</b> (optional).....	1546.76
<b>Total This Period</b> (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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. GoGo Air</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2017		
Mailing Address 111 N Canal St			FEC Identification Number C		
City Chicago	State IL	Zip Code 60606	Transaction ID : <b>SB23.426895</b> Amount of Each Disbursement this Period 16.95		
Purpose of Disbursement Airline Internet Services		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. GoGo Air</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2017		
Mailing Address 111 N Canal St			FEC Identification Number C		
City Chicago	State IL	Zip Code 60606	Transaction ID : <b>SB23.426929</b> Amount of Each Disbursement this Period 4.95		
Purpose of Disbursement Airline Internet Services		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. GoGo Air</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2017		
Mailing Address 111 N Canal St			FEC Identification Number C		
City Chicago	State IL	Zip Code 60606	Transaction ID : <b>SB23.426922</b> Amount of Each Disbursement this Period 7.95		
Purpose of Disbursement Airline Internet Services		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Subtotal Of Receipts This Page (optional)..... 29.85

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Google Inc.</b>			Date of Disbursement MM / DD / YYYY 07 / 02 / 2017		
Mailing Address 1600 Amphitheatre Parkway			FEC Identification Number C		
City Mountain View	State CA	Zip Code 94043	Transaction ID : <b>SB23.426844</b>		
Purpose of Disbursement Domain Hosting Services		Category/ Type	Amount of Each Disbursement this Period 430.00		
Candidate Name			<input type="checkbox"/> Memo Item		
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>B. Hilton - Newark</b>			Date of Disbursement MM / DD / YYYY 07 / 19 / 2017		
Mailing Address 1048 Raymond Blvd			FEC Identification Number C		
City Newark	State NJ	Zip Code 07102	Transaction ID : <b>SB23.426809</b>		
Purpose of Disbursement Hotel Costs		Category/ Type	Amount of Each Disbursement this Period 1371.49		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Hilton - Newark</b>			Date of Disbursement MM / DD / YYYY 07 / 19 / 2017		
Mailing Address 1048 Raymond Blvd			FEC Identification Number C		
City Newark	State NJ	Zip Code 07102	Transaction ID : <b>SB23.426850</b>		
Purpose of Disbursement Hotel Costs		Category/ Type	Amount of Each Disbursement this Period 320.76		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Subtotal Of Receipts This Page (optional)..... 2122.25

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Hotels.com</b>			Date of Disbursement MM / DD / YYYY 07 / 13 / 2017		
Mailing Address 5400 LBJ Freeway Suite 500			FEC Identification Number C		
City Dallas	State TX	Zip Code 75240	Transaction ID : <b>SB23.426859</b> Amount of Each Disbursement this Period 196.06		
Purpose of Disbursement Hotel Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Hotels.com</b>			Date of Disbursement MM / DD / YYYY 07 / 16 / 2017		
Mailing Address 5400 LBJ Freeway Suite 500			FEC Identification Number C		
City Dallas	State TX	Zip Code 75240	Transaction ID : <b>SB23.426856</b> Amount of Each Disbursement this Period 247.56		
Purpose of Disbursement Hotel Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Hotels.com</b>			Date of Disbursement MM / DD / YYYY 07 / 18 / 2017		
Mailing Address 5400 LBJ Freeway Suite 500			FEC Identification Number C		
City Dallas	State TX	Zip Code 75240	Transaction ID : <b>SB23.426855</b> Amount of Each Disbursement this Period 250.65		
Purpose of Disbursement Hotel Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

**Subtotal Of Receipts This Page** (optional)..... 694.27

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Hotels.com</b>			Date of Disbursement MM / DD / YYYY 07 / 20 / 2017		
Mailing Address 5400 LBJ Freeway Suite 500			FEC Identification Number C		
City Dallas	State TX	Zip Code 75240	Transaction ID : <b>SB23.426864</b> Amount of Each Disbursement this Period 151.52		
Purpose of Disbursement Hotel Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Hotels.com</b>			Date of Disbursement MM / DD / YYYY 07 / 21 / 2017		
Mailing Address 5400 LBJ Freeway Suite 500			FEC Identification Number C		
City Dallas	State TX	Zip Code 75240	Transaction ID : <b>SB23.426867</b> Amount of Each Disbursement this Period 109.38		
Purpose of Disbursement Hotel Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Hotels.com</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2017		
Mailing Address 5400 LBJ Freeway Suite 500			FEC Identification Number C		
City Dallas	State TX	Zip Code 75240	Transaction ID : <b>SB23.426803</b> Amount of Each Disbursement this Period 1766.05		
Purpose of Disbursement Hotel Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other				
State: District:					

Subtotal Of Receipts This Page (optional)..... 2026.95

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. JetBlue</b>			Date of Disbursement MM / DD / YYYY 07 / 16 / 2017		
Mailing Address 27-01 Queens Plaza North			FEC Identification Number C		
City Long Island City	State NY	Zip Code 11101	Transaction ID : <b>SB23.426828</b>		
Purpose of Disbursement Airline Tickets		Category/ Type	Amount of Each Disbursement this Period 632.79		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Kozlowski, Matthew, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 03 / 2017		
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426799</b>		
Purpose of Disbursement Director of Compliance		Category/ Type	Amount of Each Disbursement this Period 1790.00		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Kozlowski, Matthew, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 03 / 2017		
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426800</b>		
Purpose of Disbursement Director of Compliance		Category/ Type	Amount of Each Disbursement this Period 1790.00		
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)..... 4212.79

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:  
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<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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Kozlowski, Matthew, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 12 / 2017		
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426790</b> Amount of Each Disbursement this Period 4000.01		
Purpose of Disbursement Director of Compliance		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Kozlowski, Matthew, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 12 / 2017		
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426794</b> Amount of Each Disbursement this Period 2461.88		
Purpose of Disbursement Director of Compliance		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) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Kozlowski, Matthew, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 27 / 2017		
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426813</b> Amount of Each Disbursement this Period 1230.94		
Purpose of Disbursement Director of Compliance		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

**Subtotal Of Receipts This Page** (optional)..... 7692.83

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

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Kozlowski, Matthew, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2017		
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426814</b> Amount of Each Disbursement this Period 1230.94		
Purpose of Disbursement Director of Compliance		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Other		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Kozlowski, Matthew, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2017		
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426801</b> Amount of Each Disbursement this Period 1790.00		
Purpose of Disbursement Director of Compliance		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Other		
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Kozlowski, Matthew, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2017		
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : <b>SB23.426802</b> Amount of Each Disbursement this Period 1790.00		
Purpose of Disbursement Director of Compliance		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Other		
State:	District:				

**Subtotal Of Receipts This Page** (optional)..... 4810.94

**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:  
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<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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Kurland, Jennifer, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 01 / 2017	
Mailing Address 19207 Five Pts			FEC Identification Number C	
City Redford	State MI	Zip Code 48240	Transaction ID : <b>SB23.426839</b> Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Recount Organizing Services		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Kurland, Jennifer, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 08 / 2017	
Mailing Address 19207 Five Pts			FEC Identification Number C	
City Redford	State MI	Zip Code 48240	Transaction ID : <b>SB23.426840</b> Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Recount Organizing Services		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Liberty Tree Foundation</b>			Date of Disbursement MM / DD / YYYY 07 / 03 / 2017	
Mailing Address PO Box 260217			FEC Identification Number C	
City Madison	State WI	Zip Code 53726	Transaction ID : <b>SB23.426787</b> Amount of Each Disbursement this Period 18500.00	
Purpose of Disbursement Event Registration and Services		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Subtotal Of Receipts This Page (optional)..... 19500.00

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

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Lyft Inc</b>			Date of Disbursement MM / DD / YYYY 07 / 21 / 2017		
Mailing Address 2300 Harrison St			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94110	Transaction ID : <b>SB23.426924</b>		
Purpose of Disbursement Ground Travel Costs		Category/ Type	Amount of Each Disbursement this Period 7.18		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Martin, George, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 01 / 2017		
Mailing Address 4142 N Newhall St			FEC Identification Number C		
City Shorewood	State WI	Zip Code 53211	Transaction ID : <b>SB23.426837</b>		
Purpose of Disbursement Recount Organizing Services		Category/ Type	Amount of Each Disbursement this Period 500.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Martin, George, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 08 / 2017		
Mailing Address 4142 N Newhall St			FEC Identification Number C		
City Shorewood	State WI	Zip Code 53211	Transaction ID : <b>SB23.426838</b>		
Purpose of Disbursement Recount Organizing Services		Category/ Type	Amount of Each Disbursement this Period 500.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Subtotal Of Receipts This Page (optional)..... **1007.18**

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Nationbuilder</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2017
Mailing Address 520 S Grand Ave 2nd Floor		FEC Identification Number C
City Los Angeles	State CA	Zip Code 90071
Purpose of Disbursement Domain Hosting Services		Transaction ID : <b>SB23.426789</b>
Candidate Name		Amount of Each Disbursement this Period 4023.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Office Depot - Madison</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2017
Mailing Address 4016 E Washington Ave		FEC Identification Number C
City Madison	State WI	Zip Code 53704
Purpose of Disbursement Office Supplies		Transaction ID : <b>SB23.426887</b>
Candidate Name		Amount of Each Disbursement this Period 28.24
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Payroll Center</b>		Date of Disbursement MM / DD / YYYY 07 / 03 / 2017
Mailing Address PO Box 8023		FEC Identification Number C
City Madison	State WI	Zip Code 53708
Purpose of Disbursement Payroll Taxes		Transaction ID : <b>SB23.426804</b>
Candidate Name		Amount of Each Disbursement this Period 1587.22
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	<input type="checkbox"/> Memo Item
State:	District:	

**Subtotal Of Receipts This Page** (optional)..... 5638.46

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Payroll Center</b>			Date of Disbursement MM / DD / YYYY 07 / 03 / 2017		
Mailing Address PO Box 8023			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : <b>SB23.426848</b>		
Purpose of Disbursement Payroll Processing Fees		Category/ Type	Amount of Each Disbursement this Period 328.50		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Payroll Center</b>			Date of Disbursement MM / DD / YYYY 07 / 14 / 2017		
Mailing Address PO Box 8023			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : <b>SB23.426810</b>		
Purpose of Disbursement Payroll Taxes		Category/ Type	Amount of Each Disbursement this Period 1358.52		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Payroll Center</b>			Date of Disbursement MM / DD / YYYY 07 / 14 / 2017		
Mailing Address PO Box 8023			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : <b>SB23.426851</b>		
Purpose of Disbursement Payroll Processing Fees		Category/ Type	Amount of Each Disbursement this Period 318.50		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

**Subtotal Of Receipts This Page** (optional)..... → 2005.52

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Payroll Center</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2017		
Mailing Address PO Box 8023			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : <b>SB23.426821</b> Amount of Each Disbursement this Period 910.57		
Purpose of Disbursement Payroll 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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Payroll Center</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2017		
Mailing Address PO Box 8023			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : <b>SB23.426849</b> Amount of Each Disbursement this Period 328.50		
Purpose of Disbursement Payroll Processing 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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Romanelli, Carl, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 01 / 2017		
Mailing Address 350 South Franklin St			FEC Identification Number C		
City Wilkes-Barre	State PA	Zip Code 18702	Transaction ID : <b>SB23.426816</b> Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Recount Organizing Services		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Subtotal Of Receipts This Page (optional)..... 2239.07

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Romanelli, Carl, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 16 / 2017		
Mailing Address 350 South Franklin St			FEC Identification Number C		
City Wilkes-Barre	State PA	Zip Code 18702	Transaction ID : <b>SB23.426817</b>		
Purpose of Disbursement Recount Organizing Services		Category/ Type	Amount of Each Disbursement this Period 1000.00		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Romanelli, Carl, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2017		
Mailing Address 350 South Franklin St			FEC Identification Number C		
City Wilkes-Barre	State PA	Zip Code 18702	Transaction ID : <b>SB23.426818</b>		
Purpose of Disbursement Recount Organizing Services		Category/ Type	Amount of Each Disbursement this Period 1000.00		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Romanelli, Carl, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 29 / 2017		
Mailing Address 350 South Franklin St			FEC Identification Number C		
City Wilkes-Barre	State PA	Zip Code 18702	Transaction ID : <b>SB23.426845</b>		
Purpose of Disbursement Reimbursement: Event Registration Costs		Category/ Type	Amount of Each Disbursement this Period 415.00		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		<input type="checkbox"/> Memo Item		
State:	District:				

Subtotal Of Receipts This Page (optional)..... 2415.00

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Romanelli, Carl, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2017	
Mailing Address 350 South Franklin St			FEC Identification Number C	
City Wilkes-Barre	State PA	Zip Code 18702	Transaction ID : <b>SB23.426847</b>	
Purpose of Disbursement Ground Travel Costs		Category/ Type	Amount of Each Disbursement this Period 330.00	
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Schwab, David, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2017	
Mailing Address 225 E Lakelawn Pl			FEC Identification Number C	
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426795</b>	
Purpose of Disbursement Director of Communications		Category/ Type	Amount of Each Disbursement this Period 1920.00	
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Schwab, David, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2017	
Mailing Address 225 E Lakelawn Pl			FEC Identification Number C	
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426806</b>	
Purpose of Disbursement Director of Communications		Category/ Type	Amount of Each Disbursement this Period 1413.63	
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

**Subtotal Of Receipts This Page** (optional)..... 3663.63

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Schwab, David, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 27 / 2017	
Mailing Address 225 E Lakelawn Pl			FEC Identification Number C	
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426807</b> Amount of Each Disbursement this Period 1413.63	
Purpose of Disbursement Communications Director		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Schwab, David, , ,</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2017	
Mailing Address 225 E Lakelawn Pl			FEC Identification Number C	
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426796</b> Amount of Each Disbursement this Period 1920.00	
Purpose of Disbursement Director of Communications		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Southwest Airlines</b>			Date of Disbursement MM / DD / YYYY 07 / 05 / 2017	
Mailing Address 2702 Love Field Dr			FEC Identification Number C	
City Dallas	State TX	Zip Code 75235	Transaction ID : <b>SB23.426866</b> Amount of Each Disbursement this Period 129.00	
Purpose of Disbursement Airline Booking Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

**Subtotal Of Receipts This Page** (optional)..... 3462.63

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. The Hertz Corporation</b>			Date of Disbursement MM / DD / YYYY 07 / 02 / 2017		
Mailing Address PO Box 26120			FEC Identification Number C		
City Oklahoma City	State OK	Zip Code 73126	Transaction ID : <b>SB23.426834</b>		
Purpose of Disbursement Rental Car Costs		Category/ Type	Amount of Each Disbursement this Period 535.49		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. The Hertz Corporation</b>			Date of Disbursement MM / DD / YYYY 07 / 02 / 2017		
Mailing Address PO Box 26120			FEC Identification Number C		
City Oklahoma City	State OK	Zip Code 73126	Transaction ID : <b>SB23.426860</b>		
Purpose of Disbursement Rental Car Costs		Category/ Type	Amount of Each Disbursement this Period 177.12		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. The Hertz Corporation</b>			Date of Disbursement MM / DD / YYYY 07 / 19 / 2017		
Mailing Address PO Box 26120			FEC Identification Number C		
City Oklahoma City	State OK	Zip Code 73126	Transaction ID : <b>SB23.426858</b>		
Purpose of Disbursement Rental Car Costs		Category/ Type	Amount of Each Disbursement this Period 196.24		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

**Subtotal Of Receipts This Page** (optional)..... 908.85

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Unitemized Vendors - Under Limit</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426909</b> Amount of Each Disbursement this Period 10.60		
Purpose of Disbursement Travel Food		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Unitemized Vendors - Under Limit</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426920</b> Amount of Each Disbursement this Period 8.50		
Purpose of Disbursement Ground Transportation Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Unitemized Vendors - Under Limit</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426921</b> Amount of Each Disbursement this Period 8.50		
Purpose of Disbursement Ground Transportation Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

**Subtotal Of Receipts This Page** (optional)..... 27.60

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 13 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426923</b> Amount of Each Disbursement this Period 7.37		
Purpose of Disbursement Travel Food		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 14 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426891</b> Amount of Each Disbursement this Period 23.90		
Purpose of Disbursement Travel Food Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 14 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426904</b> Amount of Each Disbursement this Period 12.64		
Purpose of Disbursement Travel Food Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

**Subtotal Of Receipts This Page** (optional)..... 43.91

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial)

### A. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Travel Food Costs

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2017

FEC Identification Number

C

Transaction ID : SB23.426916

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Travel Food Costs

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2017

FEC Identification Number

C

Transaction ID : SB23.426927

Amount of Each Disbursement this Period

5.25

Memo Item

Full Name (Last, First, Middle Initial)

### C. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Travel Food Costs

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 14 / 2017

FEC Identification Number

C

Transaction ID : SB23.426928

Amount of Each Disbursement this Period

5.25

Memo Item

Subtotal Of Receipts This Page (optional)..... 20.50

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 14 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426933</b> Amount of Each Disbursement this Period 2.75		
Purpose of Disbursement Ground Travel Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 14 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426934</b> Amount of Each Disbursement this Period 1.60		
Purpose of Disbursement Ground Travel Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 14 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426935</b> Amount of Each Disbursement this Period 0.75		
Purpose of Disbursement Ground Travel Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

**Subtotal Of Receipts This Page** (optional)..... 5.10

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial)

### A. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Ground Transportation Costs

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	7

FEC Identification Number

C

Transaction ID : SB23.426884

Amount of Each Disbursement this Period

39.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Ground Travel Costs

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	7

FEC Identification Number

C

Transaction ID : SB23.426870

Amount of Each Disbursement this Period

93.13

Memo Item

Full Name (Last, First, Middle Initial)

### C. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Ground Travel Costs

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	7

FEC Identification Number

C

Transaction ID : SB23.426898

Amount of Each Disbursement this Period

15.00

Memo Item

Subtotal Of Receipts This Page (optional)..... 147.13

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial)

### A. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Gasoline Costs

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2017

FEC Identification Number

C

Transaction ID : SB23.426910

Amount of Each Disbursement this Period

10.50

Memo Item

Full Name (Last, First, Middle Initial)

### B. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Ground Travel Costs

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2017

FEC Identification Number

C

Transaction ID : SB23.426918

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Travel Food

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 16 / 2017

FEC Identification Number

C

Transaction ID : SB23.426919

Amount of Each Disbursement this Period

9.11

Memo Item

Subtotal Of Receipts This Page (optional)..... 29.61

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 17 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426868</b> Amount of Each Disbursement this Period 104.27		
Purpose of Disbursement Travel Food Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 17 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426892</b> Amount of Each Disbursement this Period 20.00		
Purpose of Disbursement Ground Travel Costs		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 17 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426902</b> Amount of Each Disbursement this Period 13.08		
Purpose of Disbursement Travel Food		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other				
State:	District:				

<b>Subtotal Of Receipts This Page</b> (optional).....	137.35
<b>Total This Period</b> (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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial)

### A. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Parking Costs

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2017

FEC Identification Number

C

Transaction ID : SB23.426903

Amount of Each Disbursement this Period

13.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Parking Costs

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2017

FEC Identification Number

C

Transaction ID : SB23.426905

Amount of Each Disbursement this Period

12.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Parking Costs

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 17 / 2017

FEC Identification Number

C

Transaction ID : SB23.426911

Amount of Each Disbursement this Period

10.50

Memo Item

Subtotal Of Receipts This Page (optional)..... 35.50

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial)

### A. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Ground Travel Costs

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : **SB23.426912**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### B. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Travel Food

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : **SB23.426907**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### C. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Ground Travel Costs

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : **SB23.426913**

Amount of Each Disbursement this Period

Memo Item

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

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 19 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426901</b> Amount of Each Disbursement this Period 13.28		
Purpose of Disbursement Travel Food Costs		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼		Other		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 19 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426908</b> Amount of Each Disbursement this Period 11.19		
Purpose of Disbursement Travel Food Costs		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼		Other		
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 19 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426915</b> Amount of Each Disbursement this Period 10.02		
Purpose of Disbursement Gasoline Costs		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼		Other		
State:	District:				

**Subtotal Of Receipts This Page** (optional)..... 34.49

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial)

### A. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Ground Travel Costs

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 19 / 2017

FEC Identification Number

C

Transaction ID : SB23.426926

Amount of Each Disbursement this Period

5.50

Memo Item

Full Name (Last, First, Middle Initial)

### B. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Parking Costs

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 20 / 2017

FEC Identification Number

C

Transaction ID : SB23.426874

Amount of Each Disbursement this Period

70.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Parking Costs

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 23 / 2017

FEC Identification Number

C

Transaction ID : SB23.426930

Amount of Each Disbursement this Period

4.50

Memo Item

Subtotal Of Receipts This Page (optional)..... 80.00

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 24 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426888</b>		
Purpose of Disbursement Ground Transportation Costs		Category/ Type	Amount of Each Disbursement this Period 27.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 24 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426932</b>		
Purpose of Disbursement Parking Costs		Category/ Type	Amount of Each Disbursement this Period 2.85		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 27 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426894</b>		
Purpose of Disbursement Travel Food		Category/ Type	Amount of Each Disbursement this Period 17.25		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

**Subtotal Of Receipts This Page** (optional)..... 47.10

**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

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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Unitemized Vendors - Under Limit</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2017	
Mailing Address 1202 Williamson St			FEC Identification Number C	
City Madison	State WI	Zip Code 53703	Transaction ID : <b>SB23.426931</b>	
Purpose of Disbursement Parking Costs		Category/ Type	Amount of Each Disbursement this Period 4.50	
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. USPS - Madison</b>			Date of Disbursement MM / DD / YYYY 07 / 07 / 2017	
Mailing Address 441 N Lake St			FEC Identification Number C	
City Madison	State WI	Zip Code 53715	Transaction ID : <b>SB23.426900</b>	
Purpose of Disbursement Postage		Category/ Type	Amount of Each Disbursement this Period 13.30	
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>c. USPS - Madison</b>			Date of Disbursement MM / DD / YYYY 07 / 13 / 2017	
Mailing Address 441 N Lake St			FEC Identification Number C	
City Madison	State WI	Zip Code 53715	Transaction ID : <b>SB23.426889</b>	
Purpose of Disbursement Postage		Category/ Type	Amount of Each Disbursement this Period 26.60	
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: _____	District: _____			

**Subtotal Of Receipts This Page** (optional)..... 44.40

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. USPS - Madison</b>			Date of Disbursement MM / DD / YYYY 07 / 20 / 2017		
Mailing Address 441 N Lake St			FEC Identification Number C		
City Madison	State WI	Zip Code 53715	Transaction ID : <b>SB23.426878</b> Amount of Each Disbursement this Period 47.50		
Purpose of Disbursement Postage		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. USPS - Madison</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2017		
Mailing Address 441 N Lake St			FEC Identification Number C		
City Madison	State WI	Zip Code 53715	Transaction ID : <b>SB23.426879</b> Amount of Each Disbursement this Period 47.50		
Purpose of Disbursement Postage		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. USPS - Madison</b>			Date of Disbursement MM / DD / YYYY 07 / 29 / 2017		
Mailing Address 441 N Lake St			FEC Identification Number C		
City Madison	State WI	Zip Code 53715	Transaction ID : <b>SB23.426873</b> Amount of Each Disbursement this Period 71.25		
Purpose of Disbursement Postage		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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

**Subtotal Of Receipts This Page** (optional)..... 166.25

**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)  
**JILL STEIN FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Zane Benefits</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2017	
Mailing Address 383 West Vine St Suite 300			FEC Identification Number C	
City Murray	State UT	Zip Code 84123	Transaction ID : <b>SB23.426875</b>	
Purpose of Disbursement Healthcare Reimbursement Services			Amount of Each Disbursement this Period 60.00	
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B.</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			Memo Item <input type="checkbox"/>	
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>C.</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			Memo Item <input type="checkbox"/>	
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)..... 60.00

**Total This Period** (last page this line number only)..... 109543.93

# SCHEDULE C-P LOANS

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

PAGE OF

FOR LINE NUMBER:  19a  19b  
(check only one)

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.8887

JILL STEIN FOR PRESIDENT

LOAN SOURCE Full Name (Last, First, Middle Initial)

STEIN, JILL, , ,

Memo Item

Election: 2016

Primary

General

Other (specify) ▼

Mailing Address

22 KENDALL ROAD

City

LEXINGTON

State

MA

Zip Code

02421

Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

### TERMS

Date Incurred

MM / DD / YYYY  
05 / 06 / 2015

Date Due

MM / DD / YYYY  
On Demand

Interest Rate (if none, enter 0)

0.00 % (apr)

Secured:

Yes  No

### List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

10000.00

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

Carry outstanding balance only to Line 3, Schedule D-P, for this line. If no Schedule D-P, carry forward to appropriate line of Summary Page.

# SCHEDULE C-P LOANS

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

PAGE OF

FOR LINE NUMBER:  19a  19b  
(check only one)

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.8889

JILL STEIN FOR PRESIDENT

LOAN SOURCE Full Name (Last, First, Middle Initial)

STEIN, JILL, , ,

Memo Item

Election: 2016

Primary

General

Other (specify) ▼

Mailing Address

22 KENDALL ROAD

City

LEXINGTON

State

MA

Zip Code

02421

Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

### TERMS

Date Incurred

MM / DD / YYYY  
06 / 06 / 2015

Date Due

MM / DD / YYYY  
On Demand

Interest Rate (if none, enter 0)

0.00

% (apr)

Secured:

Yes

No

### List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

10000.00

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

Carry outstanding balance only to Line 3, Schedule D-P, for this line. If no Schedule D-P, carry forward to appropriate line of Summary Page.

# SCHEDULE C-P LOANS

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

PAGE OF

FOR LINE NUMBER:  19a  19b  
(check only one)

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.8890

JILL STEIN FOR PRESIDENT

LOAN SOURCE Full Name (Last, First, Middle Initial)

STEIN, JILL, , ,

Memo Item

Election: 2016

Primary

General

Other (specify) ▼

Mailing Address

22 KENDALL ROAD

City

LEXINGTON

State

MA

Zip Code

02421

Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

### TERMS

Date Incurred

MM / DD / YYYY  
06 / 06 / 2015

Date Due

MM / DD / YYYY  
On Demand

Interest Rate (if none, enter 0)

0.00 % (apr)

Secured:

Yes  No

### List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

10000.00

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

Carry outstanding balance only to Line 3, Schedule D-P, for this line. If no Schedule D-P, carry forward to appropriate line of Summary Page.



# SCHEDULE C-P LOANS

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

PAGE OF

FOR LINE NUMBER:  19a  19b  
(check only one)

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.8891

JILL STEIN FOR PRESIDENT

LOAN SOURCE Full Name (Last, First, Middle Initial)

STEIN, JILL, , ,

Memo Item

Election: 2016

Primary

General

Other (specify) ▼

Mailing Address

22 KENDALL ROAD

City

LEXINGTON

State

MA

Zip Code

02421

Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

### TERMS

Date Incurred

MM / DD / YYYY  
06 / 23 / 2015

Date Due

MM / DD / YYYY  
On Demand

Interest Rate (if none, enter 0)

0.00

% (apr)

Secured:

Yes

No

### List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

10000.00

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

40000.00

Carry outstanding balance only to Line 3, Schedule D-P, for this line. If no Schedule D-P, carry forward to appropriate line of Summary Page.

**SCHEDULE D-P**  
**DEBTS AND OBLIGATIONS (Excluding Loans)**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:  11  
 12

NAME OF COMMITTEE (In Full)  
**JILL STEIN FOR PRESIDENT**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Dorno Solutions LLC**

Nature of Debt (Purpose):  
 Ballot Access Petitioning

Mailing Address PO Box 9003

City  
 Rochester

State  
 MN

Zip Code  
 55903

Outstanding Balance Beginning This Period

15940.00

Transaction ID : SD12.115238

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15940.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Four Americas Consulting**

Nature of Debt (Purpose):  
 Media and Events Consulting

Mailing Address 5400 Fieldston Rd  
 Unit 14E

City  
 Bronx

State  
 NY

Zip Code  
 10471

Outstanding Balance Beginning This Period

15000.00

Transaction ID : SD12.115237

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Hustle Inc**

Nature of Debt (Purpose):  
 Phonebanking Software

Mailing Address 251 Kearny St  
 Suite 300

City  
 San Francisco

State  
 CA

Zip Code  
 94108

Outstanding Balance Beginning This Period

16800.00

Transaction ID : SD12.115236

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

16800.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	47740.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	47740.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C-P (last page only) .....	▶	40000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	87740.00