

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
**Campaign for Change**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Thomas R. Kiley

Signature of Treasurer Thomas R. Kiley [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Campaign for Change**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		<input type="text" value="672881.16"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="672881.16"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="19093.35"/>	<input type="text" value="19093.35"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="691974.51"/>	<input type="text" value="691974.51"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="171597.98"/>	<input type="text" value="171597.98"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="520376.53"/>	<input type="text" value="520376.53"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name  
Campaign for Change

Report Covering the Period: From: 01 / 01 / 2013 To: 06 / 30 / 2013

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	19093.35	19093.35
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	19093.35	19093.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19093.35	19093.35

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	117347.98	117347.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	117347.98	117347.98
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	42500.00	42500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	11750.00	11750.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	171597.98	171597.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	171597.98	171597.98

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	117347.98	117347.98
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	117347.98	117347.98

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. AES Corporation</b>		Date of Receipt
Mailing Address 4300 Wilson Blvd. 11th Floor		<input type="text" value="05"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
Arlington	VA	22203
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968401</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1033.31"/>
Receipt For:	Aggregate Year-to-Date ▼	Stock Gain
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1033.31"/>	

Full Name (Last, First, Middle Initial) <b>B. American Express Company</b>		Date of Receipt
Mailing Address 200 Vesey Street		<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
New York	NY	10285
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968422</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="2980.60"/>
Receipt For:	Aggregate Year-to-Date ▼	Stock Gain
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2980.60"/>	

Full Name (Last, First, Middle Initial) <b>C. Annaly Capital Management, Inc.</b>		Date of Receipt
Mailing Address 1211 Avenue of the Americas Suite 2902		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
New York	NY	10036
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968442</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="-2415.84"/>
Receipt For:	Aggregate Year-to-Date ▼	Stock Loss
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="-2415.84"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1598.07"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Automatic Data Processing, Inc.</b>		Date of Receipt
Mailing Address 1 ADP Boulevard		<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
Roseland	NJ	07068
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968423</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="2015.55"/>
Receipt For:	Aggregate Year-to-Date ▼	Stock Gain
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2015.55"/>	

Full Name (Last, First, Middle Initial) <b>B. Biomed Realty Trust, Inc.</b>		Date of Receipt
Mailing Address 17190 Bernardo Center Drive		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
San Diego	CA	92128
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968450</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1492.05"/>
Receipt For:	Aggregate Year-to-Date ▼	Stock Gain
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1492.05"/>	

Full Name (Last, First, Middle Initial) <b>C. Compass Minerals International, Inc.</b>		Date of Receipt
Mailing Address 9900 West 109th Street Suite 100		<input type="text" value="02"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
Overland Park	KS	66210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968443</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1933.82"/>
Receipt For:	Aggregate Year-to-Date ▼	Stock Gain
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1933.82"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5441.42"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)  
**A. Energy Transfer Partners, LP**

Mailing Address 3738 Oak Lawn Avenue

City State Zip Code  
Dallas TX 75219

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1072.50

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2013

**Transaction ID : C8968411**

Amount of Each Receipt this Period  
536.25

Stock Gain

Full Name (Last, First, Middle Initial)  
**B. Energy Transfer Partners, LP**

Mailing Address 3738 Oak Lawn Avenue

City State Zip Code  
Dallas TX 75219

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1072.50

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2013

**Transaction ID : C8968413**

Amount of Each Receipt this Period  
536.25

Stock Gain

Full Name (Last, First, Middle Initial)  
**C. Enterprise Products Partners, L.P.**

Mailing Address 1100 Louisiana Street

City State Zip Code  
Houston TX 77002

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1103.90

Date of Receipt  
MM / DD / YYYY  
02 / 07 / 2013

**Transaction ID : C8968405**

Amount of Each Receipt this Period  
547.80

Stock Gain

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1620.30
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Enterprise Products Partners, L.P.</b>		Date of Receipt MM / DD / YYYY 05 / 07 / 2013
Mailing Address 1100 Louisiana Street		<b>Transaction ID : C8968407</b>
City Houston	State TX	Zip Code 77002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 556.10
Name of Employer	Occupation	Stock Gain
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1103.90	

Full Name (Last, First, Middle Initial) <b>B. Exelon Corporation</b>		Date of Receipt MM / DD / YYYY 02 / 07 / 2013
Mailing Address P.O. Box 805398		<b>Transaction ID : C8968445</b>
City Chicago	State IL	Zip Code 60680
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -3702.15
Name of Employer	Occupation	Stock Loss
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ -3702.15	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt MM / DD / YYYY 01 / 01 / 2013
Mailing Address PO Box 145421		<b>Transaction ID : C8968297</b>
City Cincinnati	State OH	Zip Code 45250
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 69.60
Name of Employer	Occupation	* Dividend
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12151.21	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	-3076.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968298</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="444.38"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968299</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="85.95"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="01"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968300</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="114.32"/>
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="644.65"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.		Transaction ID : <b>C8968301</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="839.78"/>
Name of Employer	Occupation	* Dividend
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="01"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.		Transaction ID : <b>C8968302</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="689.82"/>
Name of Employer	Occupation	* Dividend
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.		Transaction ID : <b>C8968303</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="66.50"/>
Name of Employer	Occupation	* Dividend
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1596.10"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968304</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="315.00"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968305</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="480.00"/>
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968306</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="0.06"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="795.06"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968307</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="193.13"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="02"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968308</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="19.00"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="02"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968309</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="118.75"/>
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="330.88"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="02"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.		<b>Transaction ID : C8968310</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="84.95"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="12151.21"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.		<b>Transaction ID : C8968311</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="875.00"/>
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="12151.21"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.		<b>Transaction ID : C8968312</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="128.07"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="12151.21"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1088.02"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968313</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="0.19"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968350</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="775.00"/>
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968351</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="72.00"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="847.19"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 16 OF 122  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)  
**A. Fidelity Investments**

Mailing Address PO Box 145421

City State Zip Code  
Cincinnati OH 45250

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12151.21

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2013  
**Transaction ID : C8968352**

Amount of Each Receipt this Period  
108.33

\* Interest

Full Name (Last, First, Middle Initial)  
**B. Fidelity Investments**

Mailing Address PO Box 145421

City State Zip Code  
Cincinnati OH 45250

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12151.21

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2013  
**Transaction ID : C8968353**

Amount of Each Receipt this Period  
387.76

\* Dividend

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

Mailing Address PO Box 145421

City State Zip Code  
Cincinnati OH 45250

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12151.21

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2013  
**Transaction ID : C8968354**

Amount of Each Receipt this Period  
78.63

\* Dividend

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 574.72

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 122
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968355</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="69.00"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968356</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1437.30"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968357</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="350.39"/>
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1856.69"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968358</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="187.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	* Dividend
	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968360</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="0.32"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	* Dividend
	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968361</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="486.68"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	* Dividend
	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="674.50"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968362</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="83.11"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968363</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="107.81"/>
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968364</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="126.28"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="317.20"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)  
**A. Fidelity Investments**

Mailing Address PO Box 145421

City Cincinnati State OH Zip Code 45250

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12151.21

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2013  
**Transaction ID : C8968365**

Amount of Each Receipt this Period  
 66.50

\* Dividend

Full Name (Last, First, Middle Initial)  
**B. Fidelity Investments**

Mailing Address PO Box 145421

City Cincinnati State OH Zip Code 45250

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12151.21

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2013  
**Transaction ID : C8968366**

Amount of Each Receipt this Period  
 0.22

\* Dividend

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

Mailing Address PO Box 145421

City Cincinnati State OH Zip Code 45250

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12151.21

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2013  
**Transaction ID : C8968367**

Amount of Each Receipt this Period  
 193.13

\* Dividend

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 259.85

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 122
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968368</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="84.80"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="05"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968369</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="103.91"/>
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968370</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="126.58"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="315.29"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="05"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968371</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="327.22"/>
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968372</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="145.24"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="05"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968373</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="187.50"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="659.96"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.		<b>Transaction ID : C8968374</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="31.00"/>
Name of Employer	Occupation	* Dividend
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.		<b>Transaction ID : C8968375</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="0.16"/>
Name of Employer	Occupation	* Dividend
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.		<b>Transaction ID : C8968377</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="72.00"/>
Name of Employer	Occupation	* Dividend
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="103.16"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968378</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="114.06"/>
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968379</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="301.95"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968380</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="80.99"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="497.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.		Transaction ID : <b>C8968381</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="47.63"/>
Name of Employer	Occupation	* Dividend
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.		Transaction ID : <b>C8968382</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="69.00"/>
Name of Employer	Occupation	* Dividend
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.		Transaction ID : <b>C8968384</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="126.75"/>
Name of Employer	Occupation	* Dividend
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="243.38"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968385</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="350.39"/>
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968386</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="857.67"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>C. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968387</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="43.75"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1251.81"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Investments</b>		Date of Receipt
Mailing Address PO Box 145421		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968388</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="26.15"/>
Receipt For:	Aggregate Year-to-Date ▼	* Dividend
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="12151.21"/>	

Full Name (Last, First, Middle Initial) <b>B. Herbalife International</b>		Date of Receipt
Mailing Address 800 West Olympic Blvd. Suite 406		<input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
Los Angeles	CA	90015
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968458</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="-2985.99"/>
Receipt For:	Aggregate Year-to-Date ▼	Stock Loss
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="-2985.99"/>	

Full Name (Last, First, Middle Initial) <b>C. Johnson &amp; Johnson</b>		Date of Receipt
Mailing Address One Johnson & Johnson Plaza		<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
New Brunswick	NJ	08933
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : C8968437</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1103.51"/>
Receipt For:	Aggregate Year-to-Date ▼	Stock Gain
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2326.68"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="-1856.33"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 122
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial) <b>A. Johnson &amp; Johnson</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2013 <b>Transaction ID : C8968438</b>
Mailing Address One Johnson & Johnson Plaza		Amount of Each Receipt this Period 1223.17
City New Brunswick	State NJ	Zip Code 08933
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1223.17	
Name of Employer	Occupation	Stock Gain
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2326.68	

Full Name (Last, First, Middle Initial) <b>B. Proctor &amp; Gamble Company</b>		Date of Receipt MM / DD / YYYY 01 / 18 / 2013 <b>Transaction ID : C8968439</b>
Mailing Address One Proctor & Gamble Plaza		Amount of Each Receipt this Period 372.69
City Cincinnati	State OH	Zip Code 45202
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 372.69	
Name of Employer	Occupation	Stock Gain
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 372.69	

Full Name (Last, First, Middle Initial) <b>C. United Parcel Service, Inc.</b>		Date of Receipt MM / DD / YYYY 01 / 18 / 2013 <b>Transaction ID : C8968441</b>
Mailing Address 55 Glenlake Parkway, NE		Amount of Each Receipt this Period 1631.88
City Atlanta	State GA	Zip Code 30328
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1631.88	
Name of Employer	Occupation	Stock Gain
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1631.88	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3227.74
<b>TOTAL</b> This Period (last page this line number only).....▶	19010.21

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Alba Bar & Grill**

Mailing Address 1495 Hancock St

City Quincy State MA Zip Code 02169

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2013

Transaction ID : D504554

Amount of Each Disbursement this Period

1000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Alba Bar & Grill**

Mailing Address 1495 Hancock St

City Quincy State MA Zip Code 02169

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2013

Transaction ID : D504555

Amount of Each Disbursement this Period

642.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Alba restaurant**

Mailing Address 1486 Hancock St

City Quincy State MA Zip Code 02169

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2013

Transaction ID : D505650

Amount of Each Disbursement this Period

300.00

Category/  
Type

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

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

1942.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Alba restaurant**

Mailing Address 1486 Hancock St

City Quincy State MA Zip Code 02169

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2013

**Transaction ID : D510116**

Amount of Each Disbursement this Period

155.00

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 7645 E 63rd st Suite 600

City Tulsa State OK Zip Code 74133

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2013

**Transaction ID : D507008**

Amount of Each Disbursement this Period

273.33

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 7645 E 63rd st Suite 600

City Tulsa State OK Zip Code 74133

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2013

**Transaction ID : D510073**

Amount of Each Disbursement this Period

912.58

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

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

1340.91

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 7645 E 63rd st Suite 600

City Tulsa State OK Zip Code 74133

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504748**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 7645 E 63rd st Suite 600

City Tulsa State OK Zip Code 74133

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504699**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 7645 E 63rd st Suite 600

City Tulsa State OK Zip Code 74133

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504691**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 7645 E 63rd st Suite 600

City State Zip Code  
Tulsa OK 74133

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 04 / 2013

**Transaction ID : D504556**

Amount of Each Disbursement this Period

672.80

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 7645 E 63rd st Suite 600

City State Zip Code  
Tulsa OK 74133

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 04 / 2013

**Transaction ID : D504557**

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**C. American Express Company**

Mailing Address 200 Vesey Street

City State Zip Code  
New York NY 10285

Purpose of Disbursement  
Ticket service fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 17 / 2013

**Transaction ID : D504391**

Amount of Each Disbursement this Period

39.00

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

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

861.80



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. American Express Company**

Mailing Address 200 Vesey Street

City New York State NY Zip Code 10285

Purpose of Disbursement  
Annual Credit Card Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 16 / 2013

**Transaction ID : D509806**

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 60 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 17 / 2013

**Transaction ID : D507042**

Amount of Each Disbursement this Period

18.00

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 60 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2013

**Transaction ID : D509818**

Amount of Each Disbursement this Period

302.00

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

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

770.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 60 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504618**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 60 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504620**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Apple**

Mailing Address 250 Grant St

City Braintree State MA Zip Code 02184

Purpose of Disbursement  
Office computer

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504373**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504383**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504370**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504558**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504562**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504563**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504498**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 26 / 2013

**Transaction ID : D504500**

Amount of Each Disbursement this Period

200.87

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2013

**Transaction ID : D504613**

Amount of Each Disbursement this Period

674.19

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2013

**Transaction ID : D504573**

Amount of Each Disbursement this Period

250.00

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

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

1125.06

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2013

**Transaction ID : D504574**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2013

**Transaction ID : D504692**

Amount of Each Disbursement this Period

141.07

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2013

**Transaction ID : D504739**

Amount of Each Disbursement this Period

1012.10

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

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

1403.17

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2013

**Transaction ID : D504736**

Amount of Each Disbursement this Period

289.25

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 05 / 2013

**Transaction ID : D504751**

Amount of Each Disbursement this Period

132.20

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 06 / 2013

**Transaction ID : D504754**

Amount of Each Disbursement this Period

285.59

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

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

707.04

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 12525 Cingular Way 3155H

City Alpharetta State GA Zip Code 30004

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 / 13 / 2013

**Transaction ID : D507009**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address 12525 Cingular Way 3155H

City Alpharetta State GA Zip Code 30004

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 22 / 2013

**Transaction ID : D507018**

Amount of Each Disbursement this Period

134.33

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address 12525 Cingular Way 3155H

City Alpharetta State GA Zip Code 30004

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 / 20 / 2013

**Transaction ID : D510070**

Amount of Each Disbursement this Period

184.14

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

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

568.47



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D510071**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D510106**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address 12525 Cingular Way 3155H

City State Zip Code  
Alpharetta GA 30004

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D510107**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 12525 Cingular Way 3155H

City Alpharetta State GA Zip Code 30004

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 25 / 2013

**Transaction ID : D510083**

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address 12525 Cingular Way 3155H

City Alpharetta State GA Zip Code 30004

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2013

**Transaction ID : D510079**

Amount of Each Disbursement this Period

176.79

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address 12525 Cingular Way 3155H

City Alpharetta State GA Zip Code 30004

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 28 / 2013

**Transaction ID : D510136**

Amount of Each Disbursement this Period

1184.22

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

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

1511.01

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Boston Coach Corp**

Mailing Address 69 Norman St

City Everett State MA Zip Code 02149

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2013

Transaction ID : D510082

Amount of Each Disbursement this Period

49.00

Full Name (Last, First, Middle Initial)

**B. Boston Coach Corp**

Mailing Address 69 Norman St

City Everett State MA Zip Code 02149

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2013

Transaction ID : D510088

Amount of Each Disbursement this Period

45.00

Full Name (Last, First, Middle Initial)

**C. Boston Coach Corp**

Mailing Address 69 Norman St

City Everett State MA Zip Code 02149

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2013

Transaction ID : D510089

Amount of Each Disbursement this Period

288.14

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

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

382.14

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Boston Coach Corp**

Mailing Address 69 Norman St

City Everett State MA Zip Code 02149

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2013

Transaction ID : D510090

Amount of Each Disbursement this Period

288.14

Full Name (Last, First, Middle Initial)

**B. Boston Coach Corp**

Mailing Address 69 Norman St

City Everett State MA Zip Code 02149

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2013

Transaction ID : D510091

Amount of Each Disbursement this Period

575.84

Full Name (Last, First, Middle Initial)

**C. Boston Coach Corp**

Mailing Address 69 Norman St

City Everett State MA Zip Code 02149

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2013

Transaction ID : D510092

Amount of Each Disbursement this Period

918.21

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

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

1782.19

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Suites**

Mailing Address 200 C St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2013

**Transaction ID : D510098**

Amount of Each Disbursement this Period

660.85

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Suites**

Mailing Address 200 C St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 12 / 2013

**Transaction ID : D505646**

Amount of Each Disbursement this Period

256.48

Full Name (Last, First, Middle Initial)

**C. Capitol Hill Suites**

Mailing Address 200 C St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2013

**Transaction ID : D504510**

Amount of Each Disbursement this Period

209.54

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

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

1126.87

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

### A. Capitol Hill Suites

Mailing Address 200 C St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 22 / 2013

Transaction ID : D504493

Amount of Each Disbursement this Period

525.56

Full Name (Last, First, Middle Initial)

### B. Capitol Hill Suites

Mailing Address 200 C St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 22 / 2013

Transaction ID : D504494

Amount of Each Disbursement this Period

582.81

Full Name (Last, First, Middle Initial)

### C. Capitol Hill Suites

Mailing Address 200 C St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 22 / 2013

Transaction ID : D504495

Amount of Each Disbursement this Period

582.81

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

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

1691.18

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Comcast Cable**

Mailing Address 330 Billerica Rd

City Chelmsford State MA Zip Code 01824

Purpose of Disbursement  
Office wireless service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2013

Transaction ID : D504576

Amount of Each Disbursement this Period

125.26

Full Name (Last, First, Middle Initial)

**B. Comcast Cable**

Mailing Address 330 Billerica Rd

City Chelmsford State MA Zip Code 01824

Purpose of Disbursement  
Office wireless service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2013

Transaction ID : D504577

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Comcast Cable**

Mailing Address 330 Billerica Rd

City Chelmsford State MA Zip Code 01824

Purpose of Disbursement  
Office wireless service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 04 / 2013

Transaction ID : D504631

Amount of Each Disbursement this Period

95.00

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

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

370.26

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Comcast Cable**

Mailing Address 330 Billerica Rd

City Chelmsford State MA Zip Code 01824

Purpose of Disbursement  
Office wireless service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 25 / 2013

**Transaction ID : D510084**

Amount of Each Disbursement this Period

239.11

Full Name (Last, First, Middle Initial)

**B. Corporate Services Company**

Mailing Address 2711 Centerville Rd, Suite 400

City Wilmington State DE Zip Code 19808

Purpose of Disbursement  
Registration fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 25 / 2013

**Transaction ID : D510182**

Amount of Each Disbursement this Period

387.00

Full Name (Last, First, Middle Initial)

**C. CSC E-Filing**

Mailing Address 1177 Ave of the Americas

City New York State NY Zip Code 10036

Purpose of Disbursement  
Tax filing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 08 / 2013

**Transaction ID : D507012**

Amount of Each Disbursement this Period

1746.23

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

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

2372.34



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Daniel Webster Inn**

Mailing Address 149 Main St

City Sandwich State MA Zip Code 02563

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2013

**Transaction ID : D504503**

Amount of Each Disbursement this Period

321.63

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address Atlanta Airport

City Atlanta State GA Zip Code 30344

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2013

**Transaction ID : D507013**

Amount of Each Disbursement this Period

379.55

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address Atlanta Airport

City Atlanta State GA Zip Code 30344

Purpose of Disbursement  
Airline fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 07 / 2013

**Transaction ID : D510048**

Amount of Each Disbursement this Period

25.00

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

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

726.18

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Edgemoor Investement Advisors**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2013

Mailing Address 7250 Woodmont Ave

**Transaction ID : D510212**

City State Zip Code  
Bethesda MD 20814

Amount of Each Disbursement this Period

1514.85
---------

Purpose of Disbursement  
Asset Management Fee

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Edgemoor Investement Advisors**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		17		2013

Mailing Address 7250 Woodmont Ave

**Transaction ID : D510214**

City State Zip Code  
Bethesda MD 20814

Amount of Each Disbursement this Period

1426.61
---------

Purpose of Disbursement  
Asset Management Fee

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Four Points Hotel**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		16		2013

Mailing Address 1201 K St NW

**Transaction ID : D510062**

City State Zip Code  
Washington DC 20005

Amount of Each Disbursement this Period

459.29
--------

Purpose of Disbursement  
Lodging

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

3400.75
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Katharina Hermani**

Mailing Address 9 Ketch Lane

City Quincy State MA Zip Code 02171

Purpose of Disbursement  
Payroll & Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2013

**Transaction ID : D510217**

Amount of Each Disbursement this Period

847.00

Full Name (Last, First, Middle Initial)

**B. Katharina Hermani**

Mailing Address 9 Ketch Lane

City Quincy State MA Zip Code 02171

Purpose of Disbursement  
Payroll & Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2013

**Transaction ID : D510220**

Amount of Each Disbursement this Period

1363.80

Full Name (Last, First, Middle Initial)

**C. Katharina Hermani**

Mailing Address 9 Ketch Lane

City Quincy State MA Zip Code 02171

Purpose of Disbursement  
Payroll & Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2013

**Transaction ID : D510194**

Amount of Each Disbursement this Period

847.00

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

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

3057.80

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Katharina Hermani**

Mailing Address 9 Ketch Lane

City Quincy State MA Zip Code 02171

Purpose of Disbursement  
Payroll & Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2013

**Transaction ID : D510195**

Amount of Each Disbursement this Period

1375.80

Full Name (Last, First, Middle Initial)

**B. Katharina Hermani**

Mailing Address 9 Ketch Lane

City Quincy State MA Zip Code 02171

Purpose of Disbursement  
Payroll & Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2013

**Transaction ID : D510203**

Amount of Each Disbursement this Period

847.00

Full Name (Last, First, Middle Initial)

**C. Katharina Hermani**

Mailing Address 9 Ketch Lane

City Quincy State MA Zip Code 02171

Purpose of Disbursement  
Payroll & Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2013

**Transaction ID : D510204**

Amount of Each Disbursement this Period

1369.80

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

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

3592.60

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Katharina Hermani**

Mailing Address 9 Ketch Lane

City Quincy State MA Zip Code 02171

Purpose of Disbursement  
Payroll & Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2013

**Transaction ID : D510183**

Amount of Each Disbursement this Period

847.00

Full Name (Last, First, Middle Initial)

**B. Katharina Hermani**

Mailing Address 9 Ketch Lane

City Quincy State MA Zip Code 02171

Purpose of Disbursement  
Payroll & Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2013

**Transaction ID : D510184**

Amount of Each Disbursement this Period

1375.80

Full Name (Last, First, Middle Initial)

**C. Katharina Hermani**

Mailing Address 9 Ketch Lane

City Quincy State MA Zip Code 02171

Purpose of Disbursement  
Payroll & Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2013

**Transaction ID : D510269**

Amount of Each Disbursement this Period

1363.80

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

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

3586.60

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Katharina Hermani**

Mailing Address 9 Ketch Lane

City Quincy State MA Zip Code 02171

Purpose of Disbursement  
Payroll & Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **D510271**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Katharina Hermani**

Mailing Address 9 Ketch Lane

City Quincy State MA Zip Code 02171

Purpose of Disbursement  
Salary & wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **D523929**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Holiday Inn Capitol Hill**

Mailing Address 550 C St SW

City Washington State DC Zip Code 20024

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **D504726**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. International Place Garage**

Mailing Address One International Place

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2013

**Transaction ID : D504728**

Amount of Each Disbursement this Period

34.00

Full Name (Last, First, Middle Initial)

**B. International Place Garage**

Mailing Address One International Place

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 11 / 2013

**Transaction ID : D505643**

Amount of Each Disbursement this Period

34.00

Full Name (Last, First, Middle Initial)

**C. International Place Garage**

Mailing Address One International Place

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 04 / 2013

**Transaction ID : D504750**

Amount of Each Disbursement this Period

34.00

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

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

102.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. International Place Garage**

Mailing Address One International Place

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 11 / 2013

**Transaction ID : D504703**

Amount of Each Disbursement this Period

34.00

Full Name (Last, First, Middle Initial)

**B. International Place Garage**

Mailing Address One International Place

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2013

**Transaction ID : D504575**

Amount of Each Disbursement this Period

34.00

Full Name (Last, First, Middle Initial)

**C. International Place Garage**

Mailing Address One International Place

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2013

**Transaction ID : D504612**

Amount of Each Disbursement this Period

34.00

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

102.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. International Place Garage**

Mailing Address One International Place

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 19 / 2013

**Transaction ID : D504614**

Amount of Each Disbursement this Period

34.00

Full Name (Last, First, Middle Initial)

**B. International Place Garage**

Mailing Address One International Place

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2013

**Transaction ID : D510127**

Amount of Each Disbursement this Period

23.00

Full Name (Last, First, Middle Initial)

**C. International Place Garage**

Mailing Address One International Place

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2013

**Transaction ID : D510065**

Amount of Each Disbursement this Period

34.00

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

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

91.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. International Place Garage**

Mailing Address One International Place

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 24 / 2013

**Transaction ID : D507016**

Amount of Each Disbursement this Period

34.00

Full Name (Last, First, Middle Initial)

**B. Irish Immigration Center**

Mailing Address 100 Franklin St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Charitable Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2013

**Transaction ID : D510278**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Jackson Lewis LLP**

Mailing Address 75 Park Plaza

City Boston State MA Zip Code 02116

Purpose of Disbursement  
Legal Compliance Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2013

**Transaction ID : D510198**

Amount of Each Disbursement this Period

5815.00

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

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

8349.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Jackson Lewis LLP**

Mailing Address 75 Park Plaza

City Boston State MA Zip Code 02116

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 18 / 2013

**Transaction ID : D510199**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Jetblue airways**

Mailing Address 6322 S 3000 E Ste G10

City Salt Lake City State UT Zip Code 84121

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2013

**Transaction ID : D509820**

Amount of Each Disbursement this Period

158.20

Full Name (Last, First, Middle Initial)

**C. Jetblue airways**

Mailing Address 6322 S 3000 E Ste G10

City Salt Lake City State UT Zip Code 84121

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 16 / 2013

**Transaction ID : D507043**

Amount of Each Disbursement this Period

958.98

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

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

6117.18

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Jetblue airways**

Mailing Address 6322 S 3000 E Ste G10

City State Zip Code  
Salt Lake City UT 84121

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	18	/	2013

**Transaction ID : D507040**

Amount of Each Disbursement this Period

95.00
-------

Full Name (Last, First, Middle Initial)

**B. Laz Parking**

Mailing Address India St

City State Zip Code  
Boston MA 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	16	/	2013

**Transaction ID : D510063**

Amount of Each Disbursement this Period

25.00
-------

Full Name (Last, First, Middle Initial)

**C. Laz Parking**

Mailing Address India St

City State Zip Code  
Boston MA 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	16	/	2013

**Transaction ID : D509809**

Amount of Each Disbursement this Period

25.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

95.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Laz Parking**

Mailing Address India St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
05 / 31 / 2013

Transaction ID : D510101

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Laz Parking**

Mailing Address India St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
02 / 19 / 2013

Transaction ID : D504615

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Laz Parking**

Mailing Address India St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
02 / 15 / 2013

Transaction ID : D504606

Amount of Each Disbursement this Period

25.00

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

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

70.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Laz Parking**

Mailing Address India St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 11 / 2013

Transaction ID : D504704

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Laz Parking**

Mailing Address India St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2013

Transaction ID : D504757

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Laz Parking**

Mailing Address India St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 15 / 2013

Transaction ID : D504731

Amount of Each Disbursement this Period

20.00

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

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

70.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Laz Parking**

Mailing Address India St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2013

Transaction ID : D504511

Amount of Each Disbursement this Period

9.00

Full Name (Last, First, Middle Initial)

**B. Laz Parking**

Mailing Address India St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2013

Transaction ID : D504548

Amount of Each Disbursement this Period

9.00

Full Name (Last, First, Middle Initial)

**C. Laz Parking**

Mailing Address India St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 17 / 2013

Transaction ID : D504392

Amount of Each Disbursement this Period

25.00

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

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

43.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Laz Parking**

Mailing Address India St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 09 / 2013

Transaction ID : **D504371**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Laz Parking**

Mailing Address India St

City Boston State MA Zip Code 02110

Purpose of Disbursement  
Event parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2013

Transaction ID : **D477470**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Lexington Hotel NYC**

Mailing Address 511 Lexington Ave

City New York State NY Zip Code 10017

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2013

Transaction ID : **D504596**

Amount of Each Disbursement this Period

14.98

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

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

64.98



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Lexington Hotel NYC**

Mailing Address 511 Lexington Ave

City New York State NY Zip Code 10017

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2013

**Transaction ID : D504597**

Amount of Each Disbursement this Period

658.68

Full Name (Last, First, Middle Initial)

**B. Lexington Hotel NYC**

Mailing Address 511 Lexington Ave

City New York State NY Zip Code 10017

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2013

**Transaction ID : D504598**

Amount of Each Disbursement this Period

76.00

Full Name (Last, First, Middle Initial)

**C. Lexington Hotel NYC**

Mailing Address 511 Lexington Ave

City New York State NY Zip Code 10017

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2013

**Transaction ID : D504628**

Amount of Each Disbursement this Period

174.47

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

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

909.15

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2013

**Transaction ID : D504688**

Amount of Each Disbursement this Period

27.00

Full Name (Last, First, Middle Initial)

**B. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2013

**Transaction ID : D504617**

Amount of Each Disbursement this Period

27.00

Full Name (Last, First, Middle Initial)

**C. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 09 / 2013

**Transaction ID : D504700**

Amount of Each Disbursement this Period

54.00

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

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

108.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 12 / 2013

**Transaction ID : D505648**

Amount of Each Disbursement this Period

54.00

Full Name (Last, First, Middle Initial)

**B. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2013

**Transaction ID : D504603**

Amount of Each Disbursement this Period

27.00

Full Name (Last, First, Middle Initial)

**C. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2013

**Transaction ID : D504565**

Amount of Each Disbursement this Period

27.00

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

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

108.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2013

**Transaction ID : D504549**

Amount of Each Disbursement this Period

27.00

Full Name (Last, First, Middle Initial)

**B. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2013

**Transaction ID : D504509**

Amount of Each Disbursement this Period

41.00

Full Name (Last, First, Middle Initial)

**C. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2013

**Transaction ID : D477471**

Amount of Each Disbursement this Period

27.00

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

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

95.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2013

Transaction ID : D504385

Amount of Each Disbursement this Period

27.00

Full Name (Last, First, Middle Initial)

**B. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2013

Transaction ID : D504386

Amount of Each Disbursement this Period

54.00

Full Name (Last, First, Middle Initial)

**C. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 21 / 2013

Transaction ID : D504491

Amount of Each Disbursement this Period

41.00

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

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

122.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 09 / 2013

**Transaction ID : D510109**

Amount of Each Disbursement this Period

9.00

Full Name (Last, First, Middle Initial)

**B. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2013

**Transaction ID : D510099**

Amount of Each Disbursement this Period

68.00

Full Name (Last, First, Middle Initial)

**C. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 24 / 2013

**Transaction ID : D509822**

Amount of Each Disbursement this Period

41.00

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

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

118.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 19 / 2013

**Transaction ID : D507020**

Amount of Each Disbursement this Period

54.00

Full Name (Last, First, Middle Initial)

**B. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2013

**Transaction ID : D510042**

Amount of Each Disbursement this Period

81.00

Full Name (Last, First, Middle Initial)

**C. MA Port Authority**

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 22 / 2013

**Transaction ID : D510120**

Amount of Each Disbursement this Period

81.23

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

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

216.23

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Mark 2 Restaurant**

Mailing Address 25 E 77th St

City New York State NY Zip Code 10075

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 24 / 2013

**Transaction ID : D504621**

Amount of Each Disbursement this Period

517.68

Full Name (Last, First, Middle Initial)

**B. Marriott Long Wharf**

Mailing Address 296 State St

City Boston State MA Zip Code 02109

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 23 / 2013

**Transaction ID : D507017**

Amount of Each Disbursement this Period

410.87

Full Name (Last, First, Middle Initial)

**C. Marriott Philadelphia**

Mailing Address 1201 Market St

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2013

**Transaction ID : D504374**

Amount of Each Disbursement this Period

444.61

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

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

1373.16



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Marriott**

Mailing Address 775 12th St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504702**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Marriott**

Mailing Address 775 12th St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D510103**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Marriott**

Mailing Address 775 12th St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D510097**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Middlebury College**

Mailing Address Munford House

City Middlebury State VT Zip Code 05733

Purpose of Disbursement Charitable Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : D510085

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Middlebury College**

Mailing Address Munford House

City Middlebury State VT Zip Code 05733

Purpose of Disbursement Charitable Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : D510137

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Moo Boston**

Mailing Address 15 Beacon St

City Boston State MA Zip Code 02108

Purpose of Disbursement Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : D507011

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Moo Boston**

Mailing Address 15 Beacon St

City Boston State MA Zip Code 02108

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2013

**Transaction ID : D504755**

Amount of Each Disbursement this Period

55.08

Full Name (Last, First, Middle Initial)

**B. MP Cosmo**

Mailing Address 45 E 48th St

City New York State NY Zip Code 10017

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2013

**Transaction ID : D504608**

Amount of Each Disbursement this Period

174.17

Full Name (Last, First, Middle Initial)

**C. MP Cosmo**

Mailing Address 45 E 48th St

City New York State NY Zip Code 10017

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 16 / 2013

**Transaction ID : D504609**

Amount of Each Disbursement this Period

55.25

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

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

284.50

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. MP Cosmo**

Mailing Address 45 E 48th St

City New York State NY Zip Code 10017

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 16 / 2013

**Transaction ID : D504610**

Amount of Each Disbursement this Period

141.00

Full Name (Last, First, Middle Initial)

**B. National Grid Utility**

Mailing Address 300 Erie Blvd W

City Syracuse State NY Zip Code 13202

Purpose of Disbursement  
Office utility

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 05 / 2013

**Transaction ID : D504752**

Amount of Each Disbursement this Period

712.03

Full Name (Last, First, Middle Initial)

**C. National Grid Utility**

Mailing Address 300 Erie Blvd W

City Syracuse State NY Zip Code 13202

Purpose of Disbursement  
Office utility

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 22 / 2013

**Transaction ID : D510076**

Amount of Each Disbursement this Period

446.27

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

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

1299.30

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. NGP Van Inc**

Mailing Address 1101 15th St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
PAC Software fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2013

Transaction ID : **D507007**

Amount of Each Disbursement this Period

5220.00

Full Name (Last, First, Middle Initial)

**B. Paychex Inc. Payroll**

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2013

Transaction ID : **D504415**

Amount of Each Disbursement this Period

83.80

Full Name (Last, First, Middle Initial)

**C. Paychex Inc. Payroll**

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2013

Transaction ID : **D510185**

Amount of Each Disbursement this Period

167.30

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

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

5471.10

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Paychex Inc. Payroll**

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2013

Transaction ID : D510179

Amount of Each Disbursement this Period

83.80

Full Name (Last, First, Middle Initial)

**B. Paychex Inc. Payroll**

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2013

Transaction ID : D510196

Amount of Each Disbursement this Period

83.82

Full Name (Last, First, Middle Initial)

**C. Paychex Inc. Payroll**

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2013

Transaction ID : D510221

Amount of Each Disbursement this Period

90.32

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

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

257.94

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Paychex Inc. Payroll**

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Payroll taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 01 / 2013

**Transaction ID : D510207**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Paychex Inc. Payroll**

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 01 / 2013

**Transaction ID : D510208**

Amount of Each Disbursement this Period

83.82

Full Name (Last, First, Middle Initial)

**C. Paychex Inc. Payroll**

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement  
Payroll processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 03 / 2013

**Transaction ID : D510272**

Amount of Each Disbursement this Period

88.07

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

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

1671.89

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie**

Mailing Address 1201 Third Ave, 40th Floor

City State Zip Code  
Seattle WA 98101

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2013

**Transaction ID : D510263**

Amount of Each Disbursement this Period

471.50

Full Name (Last, First, Middle Initial)

**B. Perkins Coie**

Mailing Address 1201 Third Ave, 40th Floor

City State Zip Code  
Seattle WA 98101

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2013

**Transaction ID : D510191**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Perkins Coie**

Mailing Address 1201 Third Ave, 40th Floor

City State Zip Code  
Seattle WA 98101

Purpose of Disbursement  
Legal Compliance Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 14 / 2013

**Transaction ID : D510180**

Amount of Each Disbursement this Period

140.00

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

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

711.50



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie**

Mailing Address 1201 Third Ave, 40th Floor

City State Zip Code  
Seattle WA 98101

Purpose of Disbursement  
Legal Compliance Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504416**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Quincy Community Action Programs, Inc.**

Mailing Address 1509 Hancock St

City State Zip Code  
Quincy MA 02169

Purpose of Disbursement  
Charitable Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504747**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Ritz Carlton**

Mailing Address 1 Lincoln Rd

City State Zip Code  
Miami Beach FL 33139

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D507021**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Sonoma Restaurant & Wine Bar**

Mailing Address 223 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 30 / 2013

Transaction ID : D510040

Amount of Each Disbursement this Period

190.00

Full Name (Last, First, Middle Initial)

**B. Sonoma Restaurant & Wine Bar**

Mailing Address 223 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
01 / 21 / 2013

Transaction ID : D504492

Amount of Each Disbursement this Period

163.00

Full Name (Last, First, Middle Initial)

**C. Sonoma Restaurant & Wine Bar**

Mailing Address 223 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food and Beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
01 / 15 / 2013

Transaction ID : D504375

Amount of Each Disbursement this Period

43.00

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

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

396.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Sonoma Restaurant & Wine Bar**

Mailing Address 223 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2013

**Transaction ID : D504505**

Amount of Each Disbursement this Period

62.00

Full Name (Last, First, Middle Initial)

**B. Sonoma Restaurant & Wine Bar**

Mailing Address 223 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2013

**Transaction ID : D504559**

Amount of Each Disbursement this Period

145.00

Full Name (Last, First, Middle Initial)

**C. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2013

**Transaction ID : D504567**

Amount of Each Disbursement this Period

30.00

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

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

237.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 09 / 2013

**Transaction ID : D504571**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 09 / 2013

**Transaction ID : D504572**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 03 / 2013

**Transaction ID : D477474**

Amount of Each Disbursement this Period

18.69

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

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

118.69

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
03 / 19 / 2013

**Transaction ID : D504737**

Amount of Each Disbursement this Period

17.26

Full Name (Last, First, Middle Initial)

**B. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
03 / 13 / 2013

**Transaction ID : D504707**

Amount of Each Disbursement this Period

22.17

Full Name (Last, First, Middle Initial)

**C. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 10 / 2013

**Transaction ID : D504758**

Amount of Each Disbursement this Period

21.30

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

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

60.73

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2013

Transaction ID : D504547

Amount of Each Disbursement this Period

19.15

Full Name (Last, First, Middle Initial)

**B. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 07 / 2013

Transaction ID : D504696

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2013

Transaction ID : D510043

Amount of Each Disbursement this Period

14.00

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

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

53.15

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2013

**Transaction ID : D510054**

Amount of Each Disbursement this Period

22.00

Full Name (Last, First, Middle Initial)

**B. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2013

**Transaction ID : D510037**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2013

**Transaction ID : D510100**

Amount of Each Disbursement this Period

23.15

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

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

65.15

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 / 29 / 2013

**Transaction ID : D510093**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 / 29 / 2013

**Transaction ID : D510094**

Amount of Each Disbursement this Period

41.29

Full Name (Last, First, Middle Initial)

**C. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 18 / 2013

**Transaction ID : D510119**

Amount of Each Disbursement this Period

26.26

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

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

82.55



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Square Washington DC**

Mailing Address 901 Mission St 104

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 26 / 2013

**Transaction ID : D510133**

Amount of Each Disbursement this Period

152.84

Full Name (Last, First, Middle Initial)

**B. Stephco Cleaning Systems**

Mailing Address PO Box 166

City Holbrook State MA Zip Code 02343

Purpose of Disbursement  
Office maintenance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 24 / 2013

**Transaction ID : D510181**

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

**C. Stephco Cleaning Systems**

Mailing Address PO Box 166

City Holbrook State MA Zip Code 02343

Purpose of Disbursement  
Office maintenance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2013

**Transaction ID : D510193**

Amount of Each Disbursement this Period

80.00

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

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

392.84

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Stephco Cleaning Systems**

Mailing Address PO Box 166

City Holbrook State MA Zip Code 02343

Purpose of Disbursement  
Office maintenance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 10 / 2013

Transaction ID : D510209

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

**B. Stephco Cleaning Systems**

Mailing Address PO Box 166

City Holbrook State MA Zip Code 02343

Purpose of Disbursement  
Office maintenance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2013

Transaction ID : D523928

Amount of Each Disbursement this Period

80.00

Full Name (Last, First, Middle Initial)

**C. Stephco Cleaning Systems**

Mailing Address PO Box 166

City Holbrook State MA Zip Code 02343

Purpose of Disbursement  
Office maintenance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 19 / 2013

Transaction ID : D510274

Amount of Each Disbursement this Period

160.00

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

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

400.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Stephco Cleaning Systems**

Mailing Address PO Box 166

City Holbrook State MA Zip Code 02343

Purpose of Disbursement  
Office maintenance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

01 / 18 / 2013

Transaction ID : D504417

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

**B. Strega Waterfront**

Mailing Address 1 Marina Park Dr

City Boston State MA Zip Code 02210

Purpose of Disbursement  
Event catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

06 / 23 / 2013

Transaction ID : D510125

Amount of Each Disbursement this Period

2513.12

Full Name (Last, First, Middle Initial)

**C. Strega Waterfront**

Mailing Address 1 Marina Park Dr

City Boston State MA Zip Code 02210

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

06 / 23 / 2013

Transaction ID : D510126

Amount of Each Disbursement this Period

175.12

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

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

2848.24

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Triplet Irrevocable Trust**

Mailing Address 1147 Hancock St, suite 2

City Quincy State MA Zip Code 02169

Purpose of Disbursement  
Office rental payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 19 / 2013

Transaction ID : D510189

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

**B. Triplet Irrevocable Trust**

Mailing Address 1147 Hancock St, suite 2

City Quincy State MA Zip Code 02169

Purpose of Disbursement  
Office rental payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 19 / 2013

Transaction ID : D510190

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

**C. Triplet Irrevocable Trust**

Mailing Address 1147 Hancock St, suite 2

City Quincy State MA Zip Code 02169

Purpose of Disbursement  
Office rental payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2013

Transaction ID : D510216

Amount of Each Disbursement this Period

3500.00

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

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

10500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Triplet Irrevocable Trust**

Mailing Address 1147 Hancock St, suite 2

City Quincy State MA Zip Code 02169

Purpose of Disbursement  
Office rental payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2013

**Transaction ID : D510206**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

**B. Triplet Irrevocable Trust**

Mailing Address 1147 Hancock St, suite 2

City Quincy State MA Zip Code 02169

Purpose of Disbursement  
Office rental payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2013

**Transaction ID : D510273**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

**C. TSP Travel**

Mailing Address 333 108th ave NE

City Bellevue State WA Zip Code 98004

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2013

**Transaction ID : D504568**

Amount of Each Disbursement this Period

24.00

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

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

7024.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. TSP Travel**

Mailing Address 333 108th ave NE

City Bellevue State WA Zip Code 98004

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2013

**Transaction ID : D504569**

Amount of Each Disbursement this Period

37.00

Full Name (Last, First, Middle Initial)

**B. TSP Travel**

Mailing Address 333 108th ave NE

City Bellevue State WA Zip Code 98004

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2013

**Transaction ID : D504570**

Amount of Each Disbursement this Period

159.30

Full Name (Last, First, Middle Initial)

**C. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2013

**Transaction ID : D504551**

Amount of Each Disbursement this Period

34.63

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

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

230.93

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2013

**Transaction ID : D504552**

Amount of Each Disbursement this Period

32.78

Full Name (Last, First, Middle Initial)

**B. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2013

**Transaction ID : D504507**

Amount of Each Disbursement this Period

18.50

Full Name (Last, First, Middle Initial)

**C. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 29 / 2013

**Transaction ID : D504508**

Amount of Each Disbursement this Period

38.00

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

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

89.28

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2013

**Transaction ID : D504546**

Amount of Each Disbursement this Period

20.88

Full Name (Last, First, Middle Initial)

**B. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 17 / 2013

**Transaction ID : D504485**

Amount of Each Disbursement this Period

18.18

Full Name (Last, First, Middle Initial)

**C. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 18 / 2013

**Transaction ID : D504488**

Amount of Each Disbursement this Period

15.64

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

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

54.70



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		20		2013

**Transaction ID : D504490**

Amount of Each Disbursement this Period

18.70
-------

Full Name (Last, First, Middle Initial)

**B. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		22		2013

**Transaction ID : D504496**

Amount of Each Disbursement this Period

21.96
-------

Full Name (Last, First, Middle Initial)

**C. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		23		2013

**Transaction ID : D504497**

Amount of Each Disbursement this Period

21.11
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

61.77
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2013

**Transaction ID : D477472**

Amount of Each Disbursement this Period

18.00

Full Name (Last, First, Middle Initial)

**B. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2013

**Transaction ID : D504372**

Amount of Each Disbursement this Period

19.83

Full Name (Last, First, Middle Initial)

**C. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2013

**Transaction ID : D504705**

Amount of Each Disbursement this Period

20.96

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

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

58.79

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2013

**Transaction ID : D504706**

Amount of Each Disbursement this Period

17.63
-------

Full Name (Last, First, Middle Initial)

**B. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	25	/	2013

**Transaction ID : D504626**

Amount of Each Disbursement this Period

23.00
-------

Full Name (Last, First, Middle Initial)

**C. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	25	/	2013

**Transaction ID : D504627**

Amount of Each Disbursement this Period

23.00
-------

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

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

63.63
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 16 / 2013

**Transaction ID : D504611**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2013

**Transaction ID : D504616**

Amount of Each Disbursement this Period

20.22

Full Name (Last, First, Middle Initial)

**C. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 11 / 2013

**Transaction ID : D505644**

Amount of Each Disbursement this Period

19.07

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

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

54.29

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 09 / 2013

**Transaction ID : D504701**

Amount of Each Disbursement this Period

44.38

Full Name (Last, First, Middle Initial)

**B. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 20 / 2013

**Transaction ID : D504743**

Amount of Each Disbursement this Period

21.57

Full Name (Last, First, Middle Initial)

**C. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 20 / 2013

**Transaction ID : D504744**

Amount of Each Disbursement this Period

23.57

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

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

89.52

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. UCC 62 Cab**

Mailing Address 8906 Robert Lundry Place

City Lorton State VA Zip Code 22079

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2013

**Transaction ID : D510039**

Amount of Each Disbursement this Period

19.00
-------

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 1200 E Algonquin Rd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2013

**Transaction ID : D510075**

Amount of Each Disbursement this Period

811.38
--------

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 1200 E Algonquin Rd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2013

**Transaction ID : D510111**

Amount of Each Disbursement this Period

550.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1380.38
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 1200 E Algonquin Rd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2013

Transaction ID : D510112

Amount of Each Disbursement this Period

550.00

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 1200 E Algonquin Rd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 26 / 2013

Transaction ID : D504501

Amount of Each Disbursement this Period

900.00

Full Name (Last, First, Middle Initial)

**C. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2013

Transaction ID : D504504

Amount of Each Disbursement this Period

422.80

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

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

1872.80

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 30 / 2013

Transaction ID : **D504544**

Amount of Each Disbursement this Period

188.00

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 31 / 2013

Transaction ID : **D504545**

Amount of Each Disbursement this Period

746.49

Full Name (Last, First, Middle Initial)

**C. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2013

Transaction ID : **D504561**

Amount of Each Disbursement this Period

523.80

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

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

1458.29



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504367**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504368**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504377**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2013

**Transaction ID : D504378**

Amount of Each Disbursement this Period

519.90

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2013

**Transaction ID : D504380**

Amount of Each Disbursement this Period

555.80

Full Name (Last, First, Middle Initial)

**C. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2013

**Transaction ID : D504382**

Amount of Each Disbursement this Period

504.80

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

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

1580.50

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504486**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504487**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D504745**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 13 / 2013

Transaction ID : D504723

Amount of Each Disbursement this Period

200.90

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 16 / 2013

Transaction ID : D504733

Amount of Each Disbursement this Period

542.15

Full Name (Last, First, Middle Initial)

**C. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 02 / 2013

Transaction ID : D504629

Amount of Each Disbursement this Period

374.80

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

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

1117.85

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2013

**Transaction ID : D504689**

Amount of Each Disbursement this Period

979.90

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2013

**Transaction ID : D504690**

Amount of Each Disbursement this Period

979.90

Full Name (Last, First, Middle Initial)

**C. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2013

**Transaction ID : D510113**

Amount of Each Disbursement this Period

550.00

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

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

2509.80

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **D510114**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **D510064**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address 600 Coolidge Drive

City Folsom State CA Zip Code 95630

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **D510077**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address 600 Coolidge Dr

City Folsom State CA Zip Code 95630

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 04 / 2013

**Transaction ID : D504632**

Amount of Each Disbursement this Period

127.56

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address 600 Coolidge Dr

City Folsom State CA Zip Code 95630

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2013

**Transaction ID : D504695**

Amount of Each Disbursement this Period

968.33

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address PO Box 4002

City Acworth State GA Zip Code 30101

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2013

**Transaction ID : D507006**

Amount of Each Disbursement this Period

170.87

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

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

1266.76

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address 600 Coolidge Dr

City Folsom State CA Zip Code 95630

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 05 / 2013

**Transaction ID : D504753**

Amount of Each Disbursement this Period

372.62

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address PO Box 4002

City Acworth State GA Zip Code 30101

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 25 / 2013

**Transaction ID : D504499**

Amount of Each Disbursement this Period

122.29

Full Name (Last, First, Middle Initial)

**C. WB Mason**

Mailing Address 59 Centre St

City Brockton State MA Zip Code 02301

Purpose of Disbursement Office supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2013

**Transaction ID : D504550**

Amount of Each Disbursement this Period

244.25

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

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

739.16



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. WB Mason**

Mailing Address 59 Centre St

City State Zip Code  
Brockton MA 02301

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 03 / 2013

**Transaction ID : D504366**

Amount of Each Disbursement this Period

131.20

Full Name (Last, First, Middle Initial)

**B. White House Gifts**

Mailing Address 701 15th St NW

City State Zip Code  
Washington DC 20005

Purpose of Disbursement  
Inauguration

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 16 / 2013

**Transaction ID : D504389**

Amount of Each Disbursement this Period

858.55

Full Name (Last, First, Middle Initial)

**C. Wilson Escobar**

Mailing Address 3410 36 Ave

City State Zip Code  
Astoria NY 11106

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
02 / 25 / 2013

**Transaction ID : D504624**

Amount of Each Disbursement this Period

276.89

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

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

1266.64

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Wilson Escobar**

Mailing Address 3410 36 Ave

City Astoria State NY Zip Code 11106

Purpose of Disbursement  
Food beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 25 / 2013

Transaction ID : **D504625**

Amount of Each Disbursement this Period

6.50

Full Name (Last, First, Middle Initial)

**B. Yellow Cab**

Mailing Address 1636 Bladensburg Rd NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2013

Transaction ID : **D510068**

Amount of Each Disbursement this Period

40.29

Full Name (Last, First, Middle Initial)

**C. Yellow Cab**

Mailing Address 1636 Bladensburg Rd NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2013

Transaction ID : **D510046**

Amount of Each Disbursement this Period

107.42

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

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

154.21

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Yellow Cab**

Mailing Address 1636 Bladensburg Rd NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2013

**Transaction ID : D510102**

Amount of Each Disbursement this Period

44.00

Full Name (Last, First, Middle Initial)

**B. Yellow Cab**

Mailing Address 1636 Bladensburg Rd NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 27 / 2013

**Transaction ID : D510087**

Amount of Each Disbursement this Period

31.32

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

75.32

114026.11

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Begich for Senate**

Mailing Address PO Box 410

City Palmer State AK Zip Code 99645

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Mark Begich**

Office Sought:  House  
 Senate  
 President  
State: AK District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	1	3

**Transaction ID : D510202**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Chris Coons for Delaware**

Mailing Address 600 Pennsylvania Ave #210

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Chris Coons**

Office Sought:  House  
 Senate  
 President  
State: DE District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	3

**Transaction ID : D510155**

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Friends of Mary Landrieu**

Mailing Address 700 13th St NW 600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Mary Landrieu**

Office Sought:  House  
 Senate  
 President  
State: LA District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	3

**Transaction ID : D510118**

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

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

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

8	5	0	0	.	0	0
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8	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Jim Langevin for Congress**

Mailing Address 181A Knight St

City Warwick State RI Zip Code 02886

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**Jim Langevin**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: RI District: 02

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 11 / 2013

**Transaction ID : D510110**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. John Tierney for Congress**

Mailing Address PO Box 8013

City Salem State MA Zip Code 01970

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**John Tierney**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MA District: 06

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2013

**Transaction ID : D504735**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. MA Democratic Party Committee**

Mailing Address 14 Arrow St

City Cambridge State MA Zip Code 02138

Purpose of Disbursement  
State Party Committee Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2013

**Transaction ID : D507005**

Amount of Each Disbursement this Period

2500.00

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Off the Side Lines PAC**

Mailing Address PO Box 78182

City Washington State DC Zip Code 20013

Purpose of Disbursement  
PAC Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : D510279**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Ron Barber for Congress**

Mailing Address 4848 E Hawthorne St

City Tucson State AZ Zip Code 85711

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**Ron Barber**

Office Sought:  House  Senate  President  
State: AZ District: 08

Disbursement For: 2014  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : D510139**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Schatz for Senate**

Mailing Address 709A 8th St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2013

**Transaction ID : D507015**

Amount of Each Disbursement this Period

4000.00

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

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

10000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Steve Lynch for Senate**

Mailing Address 105 Farragut Rd

City Boston State MA Zip Code 02127

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Steve Lynch**

Office Sought:  House  
 Senate  
 President  
State: MA District:

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	3

Transaction ID : **D510361**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. Tammy Duckworth for Congress**

Mailing Address 1800 Bolleana Ct  
Suite 120

City Hoffman Estates State IL Zip Code 60192

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Tammy Duckworth**

Office Sought:  House  
 Senate  
 President  
State: IL District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	3

Transaction ID : **D510104**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**C. Ted Deutch For Congress**

Mailing Address 7777 Glades Road, Suite 100

City Boca Raton State FL Zip Code 33434

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Ted Deutch**

Office Sought:  House  
 Senate  
 President  
State: FL District: 22

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	3

Transaction ID : **D510358**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

7	0	0	0	0	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

7	0	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. The Reed Committee**

Mailing Address 13 Bow St

City Jamestown State RI Zip Code 02835

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Jack Reed**

Office Sought:  House  
 Senate  
 President  
State: RI District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	3

**Transaction ID : D510108**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. Udall for Colorado**

Mailing Address PO Box 40158

City Denver State CO Zip Code 80204

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	3

**Transaction ID : D510267**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. Tom Udall for US Senate**

Mailing Address PO Box 25763

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Tom Udall**

Office Sought:  House  
 Senate  
 President  
State: NM District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	3

**Transaction ID : D510188**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

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

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

1	1	0	0	0	0	0	0	0	0

4	2	5	0	0	0	0	0	0	0



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Arlene Fund**

Mailing Address PO Bo 2014

City Boston State MA Zip Code 02119

Purpose of Disbursement  
Charitable Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 25 / 2013

**Transaction ID : D510275**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Biden for Attorney General**

Mailing Address PO Box 2838

City Wilmington State DE Zip Code 19805

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**Beau Biden**

Office Sought:  House  Senate  President  
State: DE District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : D510281**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Cedric Cromwell for Mashpee Wampanoag**

Mailing Address PO Box 1588

City Mashpee State MA Zip Code 02649

Purpose of Disbursement  
Donation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 22 / 2013

**Transaction ID : D510356**

Amount of Each Disbursement this Period

5000.00

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

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

6250.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Campaign for Change**

Full Name (Last, First, Middle Initial)

**A. Rabbis For Human Rights**

Mailing Address 333 Seventh Ave 13th Floor

City New York State NY Zip Code 10001

Purpose of Disbursement  
Charitable Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2013

**Transaction ID : D510095**

Amount of Each Disbursement this Period

1000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. US Association of Former Members of Congress**

Mailing Address 1401 K Street NW Suite 503

City Boston State MA Zip Code 20005

Purpose of Disbursement  
Charitable Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2013

**Transaction ID : D510201**

Amount of Each Disbursement this Period

4000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. WGBH Education Foundation**

Mailing Address 1 Guest St

City Brighton State MA Zip Code 02135

Purpose of Disbursement  
Charitable Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : D510157**

Amount of Each Disbursement this Period

500.00

Category/  
Type

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

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

5500.00

11750.00