

# 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.

**4 MA PAC**

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 David N Martin

Signature of Treasurer David N Martin [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

**4 MA PAC**

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="2014"/>	<input type="text" value="11094.96"/>	<input type="text" value="11094.96"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="39309.28"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5500.00"/>	<input type="text" value="95050.00"/>
(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="44809.28"/>	<input type="text" value="106144.96"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25849.27"/>	<input type="text" value="87184.95"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="18960.01"/>	<input type="text" value="18960.01"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**4 MA PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5500.00	87450.00
(ii) Unitemized .....	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5500.00	87550.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5500.00	95050.00
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.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	5500.00	95050.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5500.00	95050.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	2949.27	9584.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2949.27	9584.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22900.00	77600.00
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 .....	0.00	0.00
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)) ..	25849.27	87184.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25849.27	87184.95

**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) .....	5500.00	95050.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5500.00	95050.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2949.27	9584.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2949.27	9584.95

**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 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**4 MA PAC**

**A. David J Dykeman**  
Full Name (Last, First, Middle Initial)

Mailing Address 12 Stedman St  
# 3

City Brookline State MA Zip Code 02446-6009

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

Name of Employer Greenberg Traurig LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
10 / 14 / 2014  
Transaction ID : **VNHWQD4D4E2**

Amount of Each Receipt this Period  
2500.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 15 / 2014  
Transaction ID : **VNHWQD4D4E2E**

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C. Alan Fleischmann**  
Full Name (Last, First, Middle Initial)

Mailing Address 1128 16th St NW

City Washington State DC Zip Code 20036-4802

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

Name of Employer Occupation  
Laurel Strategies Founder & President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
10 / 09 / 2014  
Transaction ID : **VNHWQD2C9R0**

Amount of Each Receipt this Period  
2500.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5000.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 21  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**4 MA PAC**

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

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  
**10 / 09 / 2014**

**Transaction ID : VNHWQD2C9R0E**

Amount of Each Receipt this Period  
**2500.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Christopher R O'Neill**

Mailing Address **1310 19th St NW**

City **Washington** State **DC** Zip Code **20036-1602**

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

Name of Employer **Attorney** Occupation **Law Offices of O'Neill, Athy & Casey,**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
**10 / 09 / 2014**

**Transaction ID : VNHWQD2C9S7**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ \_\_\_\_\_

Date of Receipt  
\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Amount of Each Receipt this Period  
\_\_\_\_\_

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>5500.00</b>

**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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. 4C Partners, LLC**

Mailing Address 185 Devonshire St  
Ste 601

City Boston State MA Zip Code 02110-1414

Purpose of Disbursement  
Fundraising consulting

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  
10 / 04 / 2014

Transaction ID : VNGXF9TAH35

Amount of Each Disbursement this Period

1800.00

Full Name (Last, First, Middle Initial)

**B. Chick Montana Group, LLC**

Mailing Address 202 Bonham Rd

City Dedham State MA Zip Code 02026-5404

Purpose of Disbursement  
Accounting & Compliance 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  
10 / 01 / 2014

Transaction ID : VNGXF9T90S6

Amount of Each Disbursement this Period

550.80

Full Name (Last, First, Middle Initial)

**C. Chick Montana Group, LLC**

Mailing Address 202 Bonham Rd

City Dedham State MA Zip Code 02026-5404

Purpose of Disbursement  
Postage

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  
10 / 01 / 2014

Transaction ID : VNGXF9TAGV2

Amount of Each Disbursement this Period

100.97

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

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

2451.77



# 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

### A. NGP VAN, Inc.

Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Database expense

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
10	/	04	/	2014

Transaction ID : VNGXF9T90W9

Amount of Each Disbursement this Period

300.00
--------

Full Name (Last, First, Middle Initial)

### B.

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

Amount of Each Disbursement this Period

--

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

Amount of Each Disbursement this Period

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

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

300.00
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2751.77
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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 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. ALMA ADAMS FOR CONGRESS**

Mailing Address PO Box 20622

City Greensboro State NC Zip Code 27420-0622

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Alma Shealey Adams**

Office Sought:  House  
 Senate  
 President  
State: NC District: 12

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2014			

**Transaction ID : VNGXF9TAG66**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. BERA FOR CONGRESS**

Mailing Address PO Box 582496

City Elk Grove State CA Zip Code 95758-0042

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**AMERISH BERA**

Office Sought:  House  
 Senate  
 President  
State: CA District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2014			

**Transaction ID : VNGXF9T9141**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. BONNIE WATSON COLEMAN FOR CONGRESS**

Mailing Address 180 Upland Ave

City Ewing State NJ Zip Code 08638-2330

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Bonnie Watson Coleman**

Office Sought:  House  
 Senate  
 President  
State: NJ District: 12

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2014			

**Transaction ID : VNGXF9T91N5**

Amount of Each Disbursement this Period

500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2000.00
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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 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. BRENDA LAWRENCE FOR CONGRESS**

Mailing Address PO Box 3060

City Southfield State MI Zip Code 48037-3060

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Brenda Lulenar Lawrence**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: MI District: 14

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

**Transaction ID : VNGXF9TAG58**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. CAIN FOR CONGRESS**

Mailing Address PO Box 1523

City Bangor State ME Zip Code 04402-1523

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Emily Ann Cain**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: ME District: 02

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

**Transaction ID : VNGXF9T91W0**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. CAROL SHEA-PORTER FOR CONGRESS**

Mailing Address PO Box 453

City Rochester State NH Zip Code 03866-0453

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**CAROL SHEA-PORTER**

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
State: NH District: 01

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

**Transaction ID : VNGXF9T9174**

Amount of Each Disbursement this Period

500.00

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

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

1500.00

**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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. Citizens for Boyle**

Mailing Address PO Box 11545

City Philadelphia State PA Zip Code 19116-0545

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**Brendan F Boyle**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 13

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

**Transaction ID : VNGXF9T91V2**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. DEBBIE DINGELL FOR CONGRESS**

Mailing Address PO Box 746

City Dearborn State MI Zip Code 48121-0746

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**Debbie Dingell**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MI District: 12

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

**Transaction ID : VNGXF9T91M7**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. DONALD NORCROSS FOR CONGRESS**

Mailing Address PO Box 160

City Collingswood State NJ Zip Code 08108-0160

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**Donald Norcross**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NJ District: 01

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

**Transaction ID : VNGXF9T91G5**

Amount of Each Disbursement this Period

500.00

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

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

1500.00

**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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. DR. RAUL RUIZ FOR CONGRESS**

Mailing Address PO Box 6116

City La Quinta State CA Zip Code 92248-6116

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**RAUL DR. RUIZ**

Office Sought:  House  
 Senate  
 President  
State: CA District: 36

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 15 / 2014

**Transaction ID : VNGXF9T91B6**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF DAN MAFFEI**

Mailing Address PO Box 230

City Syracuse State NY Zip Code 13201-0230

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**DANIEL BENJAMIN MR. MAFFEI**

Office Sought:  House  
 Senate  
 President  
State: NY District: 24

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 15 / 2014

**Transaction ID : VNGXF9T9109**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Friends of Don Beyer**

Mailing Address 1751 Potomac Greens Dr

City Alexandria State VA Zip Code 22314-6233

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Don Beyer**

Office Sought:  House  
 Senate  
 President  
State: VA District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 15 / 2014

**Transaction ID : VNGXF9T91S6**

Amount of Each Disbursement this Period

500.00

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

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

2000.00

**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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF ELIZABETH ESTY**

Mailing Address PO Box 61

City Cheshire State CT Zip Code 06410-0061

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**ELIZABETH ESTY**

Office Sought:  House  
 Senate  
 President  
State: CT District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

**Transaction ID : VNGXF9T9117**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF LOIS CAPP**

Mailing Address PO Box 23940

City Santa Barbara State CA Zip Code 93121-3940

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**LOIS CAPP**

Office Sought:  House  
 Senate  
 President  
State: CA District: 24

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

**Transaction ID : VNGXF9T90Y5**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF PATRICK MURPHY**

Mailing Address 4521 Pga Blvd  
# 412

City Palm Beach Gardens State FL Zip Code 33418-3997

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**PATRICK MURPHY**

Office Sought:  House  
 Senate  
 President  
State: FL District: 18

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

**Transaction ID : VNGXF9T9125**

Amount of Each Disbursement this Period

500.00

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

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

2500.00

**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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF PATRICK MURPHY**

Mailing Address 4521 Pga Blvd  
# 412

City State Zip Code  
Palm Beach Gardens FL 33418-3997

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**PATRICK MURPHY**

Office Sought:  House  
 Senate  
 President  
State: FL District: 18

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VNGXF9T9158**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Friends of Renteria**

Mailing Address PO Box 655

City State Zip Code  
Sanger CA 93657-0655

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Amanda Renteria**

Office Sought:  House  
 Senate  
 President  
State: CA District: 21

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VNGXF9T91E0**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. GALLEGO FOR ARIZONA**

Mailing Address PO Box 1710

City State Zip Code  
Phoenix AZ 85001-1710

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Ruben Gallego**

Office Sought:  House  
 Senate  
 President  
State: AZ District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VNGXF9T91P3**

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 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES LEE WITT FOR CONGRESS**

Mailing Address PO Box 36

City Dardanelle State AR Zip Code 72834-0036

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**James Lee Witt**

Office Sought:  House  
 Senate  
 President  
State: AR District: 04

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

Transaction ID : VNGXF9T91F7

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. JOE GARCIA FOR CONGRESS**

Mailing Address PO Box 330871

City Miami State FL Zip Code 33233-0871

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**JOE GARCIA**

Office Sought:  House  
 Senate  
 President  
State: FL District: 26

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

Transaction ID : VNGXF9T9182

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Kathleen Rice for Congress**

Mailing Address 410 Jericho Tpke  
Ste 200

City Jericho State NY Zip Code 11753-1318

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Kathleen Rice**

Office Sought:  House  
 Senate  
 President  
State: NY District: 04

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

Transaction ID : VNGXF9T91R9

Amount of Each Disbursement this Period

500.00

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

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

1500.00



**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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial) <b>A. KUSTER FOR CONGRESS, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2014
Mailing Address PO Box 1498		<b>Transaction ID : VNGXF9T91C4</b>
City Concord	State NH	
Zip Code 03302-1498	Purpose of Disbursement Candidate Contribution	Amount of Each Disbursement this Period 200.00
Candidate Name <b>ANN MCLANE KUSTER</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NH District: 02		

Full Name (Last, First, Middle Initial) <b>B. KYRSTEN SINEMA FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2014
Mailing Address PO Box 25879		<b>Transaction ID : VNGXF9T9190</b>
City Tempe	State AZ	
Zip Code 85285-5879	Purpose of Disbursement Candidate Contribution	Amount of Each Disbursement this Period 500.00
Candidate Name <b>KYRSTEN SINEMA</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 09		

Full Name (Last, First, Middle Initial) <b>C. LOEBSACK FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2014
Mailing Address PO Box 3013		<b>Transaction ID : VNGXF9T9166</b>
City Iowa City	State IA	
Zip Code 52244-3013	Purpose of Disbursement Candidate Contribution	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>DAVID WAYNE LOEBSACK</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1700.00
<b>TOTAL</b> 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. MARK DESAULNIER FOR CONGRESS**

Mailing Address 5429 Madison Ave

City Sacramento State CA Zip Code 95841-3111

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Mark Desaulnier**

Office Sought:  House  
 Senate  
 President  
State: CA District: 11

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	15	/	2014

Transaction ID : VNGXF9T91H3

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Mark Takai for Congress**

Mailing Address PO Box 2267

City Pearl City State HI Zip Code 96782-9267

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Mark Takai**

Office Sought:  House  
 Senate  
 President  
State: HI District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	15	/	2014

Transaction ID : VNGXF9T91K9

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Moulton for Congress Committee**

Mailing Address PO Box 2013

City Salem State MA Zip Code 01970-6213

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Seth Moulton**

Office Sought:  House  
 Senate  
 President  
State: MA District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	14	/	2014

Transaction ID : VNGXF9T90V1

Amount of Each Disbursement this Period

600.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1600.00
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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)

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<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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. PETE AGUILAR FOR CONGRESS**

Mailing Address PO Box 10954

City San Bernardino State CA Zip Code 92423-0954

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**PETE AGUILAR**

Office Sought:  House  
 Senate  
 President  
State: CA District: 31

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VNGXF9TAFM6**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. RECCHIA FOR CONGRESS**

Mailing Address 172 Gravesend Neck Rd

City Brooklyn State NY Zip Code 11223-4707

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**DOMENIC M JR RECCHIA**

Office Sought:  House  
 Senate  
 President  
State: NY District: 13

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VNGXF9T91D2**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. SCHNEIDER FOR CONGRESS**

Mailing Address PO Box 1318

City Deerfield State IL Zip Code 60015-6005

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**BRADLEY SCOTT SCHNEIDER**

Office Sought:  House  
 Senate  
 President  
State: IL District: 10

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VNGXF9T90T4**

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 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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. SCOTT PETERS FOR CONGRESS**

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024-0980

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**SCOTT PETERS**

Office Sought:  House  
 Senate  
 President  
State: CA District: 52

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 15 / 2014

**Transaction ID : VNGXF9T90X7**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. SEAN ELDRIDGE FOR CONGRESS**

Mailing Address PO Box 4113

City Kingston State NY Zip Code 12402-4113

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**SEAN ELDRIDGE**

Office Sought:  House  
 Senate  
 President  
State: NY District: 19

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 15 / 2014

**Transaction ID : VNGXF9T91J1**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. TED LIEU FOR CONGRESS**

Mailing Address 6380 Wilshire Blvd  
Ste 1612

City Los Angeles State CA Zip Code 90048-5018

Purpose of Disbursement  
Candidate Contribution

Candidate Name

**Ted Lieu**

Office Sought:  House  
 Senate  
 President  
State: CA District: 33

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 15 / 2014

**Transaction ID : VNGXF9T91X8**

Amount of Each Disbursement this Period

500.00

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

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

2000.00

**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)  
**4 MA PAC**

Full Name (Last, First, Middle Initial)

**A. THE BILL KEATING COMMITTEE**

Mailing Address PO Box 3065

City Buzzards Bay State MA Zip Code 02532-0765

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**WILLIAM RICHARD KEATING**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: MA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

**Transaction ID : VNGXF9T9133**

Amount of Each Disbursement this Period

2500.00
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Full Name (Last, First, Middle Initial)

**B. VIRGIN ISLANDERS FOR PLASKETT**

Mailing Address PO Box 26502

City Christiansted State VI Zip Code 00824-2502

Purpose of Disbursement  
Candidate Contribution

Candidate Name  
**Stacey Plaskett**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: VI District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

**Transaction ID : VNGXF9T91Y6**

Amount of Each Disbursement this Period

500.00
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Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

3000.00
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22900.00
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