

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
DNC PAC

ADDRESS (number and street) One Park Row Suite 5 Providence RI 02903
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00307991
3. IS THIS REPORT NEW OR AMENDED (A) [X] (N)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special
(d) 30-Day POST-Election Report for the: General, Runoff, Special
Election on [MM/DD/YYYY] in the State of []

5. Covering Period [MM/DD/YYYY] through [MM/DD/YYYY]
10 / 20 / 2016 through 11 / 28 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Benoit, Nancy, , ,
Type or Print Name of Treasurer

Signature of Treasurer Benoit, Nancy, , , [Electronically Filed] Date 12 / 08 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

DNC 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="2016"/>	<input type="text" value="2804.56"/>	<input type="text" value="2804.56"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="13519.58"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="10000.00"/>	<input type="text" value="35000.00"/>
(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="23519.58"/>	<input type="text" value="37804.56"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="16112.50"/>	<input type="text" value="30397.48"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7407.08"/>	<input type="text" value="7407.08"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

DNC PAC

Report Covering the Period: From: MM / DD / YYYY 10 / 20 / 2016 To: MM / DD / YYYY 11 / 28 / 2016

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).....	5000.00	20000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5000.00	20000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10000.00	35000.00
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)).....▶	10000.00	35000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10000.00	35000.00

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	4112.50	12967.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4112.50	12967.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12000.00	14930.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	2000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	16112.50	30397.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16112.50	30397.48

DETAILED SUMMARY PAGE
of Disbursements

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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)	10000.00	35000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000.00	35000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4112.50	12967.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4112.50	12967.48

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Gebbia, Joe, , ,			Date of Receipt
Mailing Address PO Box 410045			<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2016"/>
City San Francisco	State CA	Zip Code 94141	Transaction ID : SA11AI.4463
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer (for Individual) Airbnb		Occupation (for Individual) Internet	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hornor, John, , ,			Date of Receipt
Mailing Address 46 Ladyslipper Lane			<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2016"/>
City Florence	State MA	Zip Code 02062	Transaction ID : SA11AI.4461
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer (for Individual) N/A		Occupation (for Individual) None	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.			Date of Receipt
Mailing Address			<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <input type="text"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="5000.00"/>

**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 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
DNC PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

Mailing Address 900 SEVENTH ST, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		20		2016

Transaction ID : SA11C.4466

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

**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"/> 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)
DNC PAC

A. Downtown Woonsocket Collaborative

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 625 Park Ave

M M	/	D D	/	Y Y Y Y
11		18		2016

City
Woonsocket

State
RI

Zip Code
02895

FEC Identification Number

Purpose of Disbursement
Donation

C

Transaction ID : SB21B.4431
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

500.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

B. Gabarra, Amy, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 62 Bellman Ave

M M	/	D D	/	Y Y Y Y
11		18		2016

City
Warwick

State
RI

Zip Code
02889

FEC Identification Number

Purpose of Disbursement
Fundraising Consulting

C

Transaction ID : SB21B.4429
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2000.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

Purpose of Disbursement

C

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

--

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

2500.00

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

3665.00

**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"/> 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)
DNC PAC

Full Name (Last, First, Middle Initial)
A. ANGIE CRAIG FOR CONGRESS

Mailing Address PO BOX 22116

City EAGAN State MN Zip Code 55122

Purpose of Disbursement Contribution

Candidate Name

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

State: MN District: 02

Date of Disbursement: 10 / 24 / 2016

FEC Identification Number: C00575209
Transaction ID : SB23.4450
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. APPLGATE FOR CONGRESS

Mailing Address 380 S MELROSE DRIVE SUITE 207

City VISTA State CA Zip Code 92081

Purpose of Disbursement Contributions

Candidate Name

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

State: CA District: 49

Date of Disbursement: 10 / 24 / 2016

FEC Identification Number: C00581595
Transaction ID : SB23.4439
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City BANGOR State ME Zip Code 04402

Purpose of Disbursement Contribution

Candidate Name

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

State: ME District: 02

Date of Disbursement: 10 / 24 / 2016

FEC Identification Number: C00546077
Transaction ID : SB23.4437
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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"/> 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)
DNC PAC

A. CAROL SHEA-PORTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 453

City ROCHESTER State NH Zip Code 03866

Purpose of Disbursement Contribution

Candidate Name

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

Disbursement For: 2016
 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2016

FEC Identification Number

C C00419978

Transaction ID : SB23.4435

Amount of Each Disbursement this Period

1000.00

Memo Item

B. DENISE JUNEAU FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 563

City HELENA State MT Zip Code 59624

Purpose of Disbursement Contribution

Candidate Name

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

Disbursement For: 2016
 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2016

FEC Identification Number

C C00591289

Transaction ID : SB23.4452

Amount of Each Disbursement this Period

1000.00

Memo Item

C. DR. MATT HEINZ FOR ARIZONA

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 57698

City TUCSON State AZ Zip Code 85732

Purpose of Disbursement Contributions

Candidate Name

Office Sought: House Senate President
State: AZ District: 02

Disbursement For: 2016
 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2016

FEC Identification Number

C C00582221

Transaction ID : SB23.4441

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

**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"/> 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)
DNC PAC

Full Name (Last, First, Middle Initial) A. LINDBECK FOR ALASKA		Date of Disbursement MM / DD / YYYY 10 / 24 / 2016
Mailing Address PO BOX 90025		FEC Identification Number C 000615302 Transaction ID : SB23.4442 Amount of Each Disbursement this Period 1000.00
City ANCHORAGE	State AK	Zip Code 99517
Purpose of Disbursement Contributions		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AK	District: 00	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. LUANN BENNETT FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 24 / 2016
Mailing Address PO BOX 446		FEC Identification Number C 000595116 Transaction ID : SB23.4446 Amount of Each Disbursement this Period 1000.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement Contribution		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District: 10	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MOWRER FOR IOWA		Date of Disbursement MM / DD / YYYY 10 / 24 / 2016
Mailing Address PO BOX 13470		FEC Identification Number C 000546549 Transaction ID : SB23.4448 Amount of Each Disbursement this Period 1000.00
City DES MOINES	State IA	Zip Code 50310
Purpose of Disbursement Contribution		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 03	
<input type="checkbox"/> Memo Item		

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

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

3000.00

**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"/> 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)
DNC PAC

Full Name (Last, First, Middle Initial) A. ROSEN FOR NEVADA		Date of Disbursement MM / DD / YYYY 10 / 24 / 2016
Mailing Address 1000 N GREEN VALLEY PKWY #440-177		FEC Identification Number C00606939 Transaction ID : SB23.4444
City HENDERSON	State NV	Zip Code 89074
Purpose of Disbursement Contributions	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV District: 03	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. SCHNEIDER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 24 / 2016
Mailing Address 487 MEADOWLARK DRIVE		FEC Identification Number C00374751 Transaction ID : SB23.4454
City SARASOTA	State FL	Zip Code 34236
Purpose of Disbursement Contribution	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 13	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. STEPHANIE MURPHY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 24 / 2016
Mailing Address PO BOX 205		FEC Identification Number C00620443 Transaction ID : SB23.4433
City WINTER PARK	State FL	Zip Code 32790
Purpose of Disbursement Contributions	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 07	<input type="checkbox"/> Memo Item	

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

3000.00

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

12000.00