

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

Mark Pocan for Congress

ADDRESS (number and street) ▼

PO Box 327

Check if different than previously reported. (ACC)

Madison

WI

53701

2. **FEC IDENTIFICATION NUMBER** ▼

C C00502179

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

WI

02

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)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

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

Election on  /  /  in the State of

(c) 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 Sondy Pope

Signature of Treasurer Sondy Pope

*[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.

Office Use Only									
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Mark Pocan for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	46958.67	57203.82
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	46958.67	57203.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	58054.71	111896.26
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	58054.71	111896.26
8. Cash on Hand at Close of Reporting Period (from Line 27).....	151058.98	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**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 3 (Revised 12/2003)

Write or Type Committee Name

**Mark Pocan for Congress**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3415.00	4665.00
(ii) Unitemized.....	23543.67	25038.82
(iii) TOTAL of contributions from individuals ▶	26958.67	29703.82
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	20000.00	27500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	46958.67	57203.82
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	46958.67	57203.82

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	58054.71	111896.26
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	25394.85	25394.85
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	83449.56	137291.11

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	187549.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	46958.67
25. SUBTOTAL (add Line 23 and Line 24).....	234508.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	83449.56
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	151058.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Mark Pocan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marian B Ashman**

Mailing Address 6720 Century Ave  
Apt 305

City Middleton State WI Zip Code 53562-1785

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : VNHXEDMSA38**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 7422 Voss Pkwy

City Middleton State WI Zip Code 53562-3660

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

Name of Employer American Family Insurance Occupation Programmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : VNHXEDMSAE5**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1119 Merrill Springs Rd

City Madison State WI Zip Code 53705-1316

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

Name of Employer U. Wisconsin Occupation Emeritus Prof.

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : VNHXEDMSAF3**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

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

Mailing Address 4827 Enchanted Valley Rd

City Middleton	State WI	Zip Code 53562-4118
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FEC ID number of contributing federal political committee. **C**

Name of Employer Alliant Energy corp	Occupation Chair, CEO and President
---	--

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		02		2015

**Transaction ID : VNHXEDJF193**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

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

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
18235.67

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		15		2015

**Transaction ID : VNHXEDJF193E**

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 8409 G24 Hwy

City Indianola	State IA	Zip Code 50125-8994
-------------------	-------------	------------------------

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

Name of Employer Iowa Health Systems	Occupation CEO
---	-------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		26		2015

**Transaction ID : VNHXEDMF197**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

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

Mailing Address 4222 Bagley Pkwy

City Madison State WI Zip Code 53705-5154

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

Name of Employer Venn Strategies, LLC Occupation Public Affairs

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : VNHXEDNYYK6**

Amount of Each Receipt this Period  
 250.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 18235.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : VNHXEDNYYK6E**

Amount of Each Receipt this Period  
 250.00

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

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

Mailing Address 19 Red Maple Trl

City Madison State WI Zip Code 53717-1515

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

Name of Employer Occupation Retired not employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 105.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2015

**Transaction ID : VNHXEDK8EB2**

Amount of Each Receipt this Period  
 35.00

\* Earmarked Contribution: See Below

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

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

285.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**18235.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 11 / 2015**

**Transaction ID : VNHXEDK8EB2E**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**35.00**

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

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

Mailing Address **19 Red Maple Trl**

City **Madison** State **WI** Zip Code **53717-1515**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Retired **not employed**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**140.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2015**

**Transaction ID : VNHXEDMP3X4**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**35.00**

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**18235.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2015**

**Transaction ID : VNHXEDMP3X4E**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**35.00**

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

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

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

\_\_\_\_\_

**35.00**

\_\_\_\_\_



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

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

Mailing Address 19 Red Maple Trl

City Madison State WI Zip Code 53717-1515

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

Name of Employer Retired Occupation not employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **150.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2015

**Transaction ID : VNHXEDNSQN1**

Amount of Each Receipt this Period  
 10.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **18235.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2015

**Transaction ID : VNHXEDNSQN1E**

Amount of Each Receipt this Period  
 10.00

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

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

Mailing Address 19 Red Maple Trl

City Madison State WI Zip Code 53717-1515

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

Name of Employer Retired Occupation not employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : VNHXEDNXR49**

Amount of Each Receipt this Period  
 50.00

\* Earmarked Contribution: See Below

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

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

60.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**18235.67**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		22		2015

**Transaction ID : VNHXEDNXR49E**

Amount of Each Receipt this Period  

_____	_____	_____	_____	_____
				50.00

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

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

Mailing Address **19 Red Maple Trl**

City **Madison** State **WI** Zip Code **53717-1515**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Retired **not employed**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**235.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		30		2015

**Transaction ID : VNHXEDNYN15**

Amount of Each Receipt this Period  

_____	_____	_____	_____	_____
				35.00

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**18235.67**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		31		2015

**Transaction ID : VNHXEDNYN15E**

Amount of Each Receipt this Period  

_____	_____	_____	_____	_____
				35.00

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

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

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

_____	_____	_____	_____	_____
				35.00
_____	_____	_____	_____	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert H. Whitlock**

Mailing Address 137 E Wilson St  
Unit 1211

City Madison State WI Zip Code 53703-3378

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

Name of Employer self Occupation sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : VNHXEDMN5A1**

Amount of Each Receipt this Period  
 250.00

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

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)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

250.00

3415.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 38
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 101 3rd St N

City Moorhead State MN Zip Code 56560-1952

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : VNHXEDMF0S1**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN FAMILY MUTUAL INSURANCE COMPANY FEDERAL PAC (AMFAM PAC)**

Mailing Address 6000 American Pkwy

City Madison State WI Zip Code 53783-0002

FEC ID number of contributing federal political committee. **C** C00354290

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : VNHXEDMF0W4**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES APAC**

Mailing Address 1575 I St NW

City Washington State DC Zip Code 20005-1105

FEC ID number of contributing federal political committee. **C** C00041566

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : VNHXEDN15K5**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 38
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)**

Mailing Address PO Box 961039

City Fort Worth State TX Zip Code 76161-0039

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : VNHXEDN15M3**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CULAC the PAC of Credit Union National Association**

Mailing Address 601 Pennsylvania Ave NW  
SOUTH BUILDING, SUITE 600

City Washington State DC Zip Code 20004-2620

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2015

**Transaction ID : VNHXEDKR7Q9**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1640 Rhode Island Ave NW

City Washington State DC Zip Code 20036-3212

FEC ID number of contributing federal political committee. **C** C00235853

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : VNHXEDN15N1**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 38
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**IKARIA POLITICAL ACTION COMMITTEE -AKA- IKAREPAC**

Mailing Address 444 N Capitol St NW  
Ste 830

City Washington State DC Zip Code 20001-1569

FEC ID number of contributing federal political committee. **C** C00463539

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : VNHXEDN15E6**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**International Association of Fire Fighters**

Mailing Address 1750 New York Ave NW

City Washington State DC Zip Code 20006-5301

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : VNHXEDN15F3**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Mailing Address 7525 Red River Rd

City Wahpeton State ND Zip Code 58075-9705

FEC ID number of contributing federal political committee. **C** C00164939

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : VNHXEDMF0R3**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 38
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PROGRESSIVES UNITED POLITICAL ACTION COMMITTEE**

Mailing Address PO Box 620062

City Middleton State WI Zip Code 53562-0062

FEC ID number of contributing federal political committee. **C C00279901**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : VNHXEDP1J64**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**PRUDENTIAL FINANCIAL, INC. STATE & FEDERAL POLITICAL ACTION COMMITTEE (AKA PRUDENTIAL STAT**

Mailing Address 751 Broad St  
FI 14

City Newark State NJ Zip Code 07102-3714

FEC ID number of contributing federal political committee. **C C00493304**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : VNHXEDP1WA6**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC TIAA-CREF**

Mailing Address 1101 Pennsylvania Ave NW  
Ste 800

City Washington State DC Zip Code 20004-2526

FEC ID number of contributing federal political committee. **C C00431361**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : VNHXEDN15G1**

Amount of Each Receipt this Period  
 1000.00

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

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

6000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 OF 38  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Transport Workers Union**

Mailing Address 501 3rd St NW  
FI 9

City Washington State DC Zip Code 20001-2790

FEC ID number of contributing federal political committee. **C** C00008268

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 26 / 2015

**Transaction ID : VNHXEDN15P9**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**WESTERN SUGAR COOPERATIVE PAC**

Mailing Address 7555 E Hampden Ave  
Ste 600

City Denver State CO Zip Code 80231-4837

FEC ID number of contributing federal political committee. **C** C00446674

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 26 / 2015

**Transaction ID : VNHXEDN15J7**

Amount of Each Receipt this Period  
1000.00

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

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)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2000.00

20000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. ABC Consulting</b>		Date of Disbursement
Mailing Address 499 S Capitol St SW		M M / D D / Y Y Y Y 01 / 27 / 2015
City Washington	State DC	Zip Code 20003-4013
Purpose of Disbursement Consulting: Fundraising Services	Amount of Each Disbursement this Period 4835.15	
Candidate Name	Transaction ID : VNGY69YDTW6	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. ABC Consulting</b>		Date of Disbursement
Mailing Address 499 S Capitol St SW		M M / D D / Y Y Y Y 02 / 20 / 2015
City Washington	State DC	Zip Code 20003-4013
Purpose of Disbursement Fundraising Consulting Services	Amount of Each Disbursement this Period 4627.86	
Candidate Name	Transaction ID : VNGY69YNE10	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. ABC Consulting</b>		Date of Disbursement
Mailing Address 499 S Capitol St SW		M M / D D / Y Y Y Y 03 / 27 / 2015
City Washington	State DC	Zip Code 20003-4013
Purpose of Disbursement Fundraising Consulting Services	Amount of Each Disbursement this Period 5926.36	
Candidate Name	Transaction ID : VNGY69YNE02	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15389.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 20.15 <b>Transaction ID : VNGY69YNRR1</b>
City Cambridge	State MA	
Purpose of Disbursement Credit card processing fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2015
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 2.77 <b>Transaction ID : VNGY69YNRS9</b>
City Cambridge	State MA	
Purpose of Disbursement Credit card processing fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 48.70 <b>Transaction ID : VNGY69YNRT7</b>
City Cambridge	State MA	
Purpose of Disbursement Credit card processing fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	71.62
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 11 / 2015</b>
Mailing Address <b>14 Arrow St</b>		Amount of Each Disbursement this Period <b>28.62</b>
City <b>Cambridge</b> State <b>MA</b> Zip Code <b>02138-5106</b>	Purpose of Disbursement <b>Credit card processing fee</b>	
Candidate Name	Category/Type	<b>Transaction ID : VNGY69YNRV5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 26 / 2015</b>
Mailing Address <b>14 Arrow St</b>		Amount of Each Disbursement this Period <b>3.38</b>
City <b>Cambridge</b> State <b>MA</b> Zip Code <b>02138-5106</b>	Purpose of Disbursement <b>Credit card processing fee</b>	
Candidate Name	Category/Type	<b>Transaction ID : VNGY69YNRW3</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 10 / 2015</b>
Mailing Address <b>14 Arrow St</b>		Amount of Each Disbursement this Period <b>1.87</b>
City <b>Cambridge</b> State <b>MA</b> Zip Code <b>02138-5106</b>	Purpose of Disbursement <b>Credit Card Processing Fee</b>	
Candidate Name	Category/Type	<b>Transaction ID : VNGY69YNCG3</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>33.87</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 38			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2015
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 14.36 <b>Transaction ID : VNGY69YNCM5</b>
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 73.69 <b>Transaction ID : VNGY69YNCJ9</b>
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 39.22 <b>Transaction ID : VNGY69YNCP1</b>
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	127.27
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 78.59
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : VNGY69YNCQ8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 1.36
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : VNGY69YNCR6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 433.81
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit card processing fee	Transaction ID : VNGY69YNRG8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	513.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2015
Mailing Address 4333 Amon Carter Blvd		Amount of Each Disbursement this Period 1236.24
City Fort Worth	State TX	
Zip Code 76155-2664	Purpose of Disbursement Travel	Transaction ID : VNGY69YNFX2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Badger Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 4302 Commercial Ave		Amount of Each Disbursement this Period 52.00
City Madison	State WI	
Zip Code 53714-1312	Purpose of Disbursement Storage Space Rental	Transaction ID : VNGY69YDV06
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Badger Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2015
Mailing Address 4302 Commercial Ave		Amount of Each Disbursement this Period 52.00
City Madison	State WI	
Zip Code 53714-1312	Purpose of Disbursement Storage	Transaction ID : VNGY69YNFP7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1340.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 38		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial)  
**A. Badger Self Storage**

Mailing Address 4302 Commercial Ave

City Madison State WI Zip Code 53714-1312

Purpose of Disbursement Storage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 01 / 2015

Amount of Each Disbursement this Period: 52.00

Transaction ID : VNGY69YNFN9

Full Name (Last, First, Middle Initial)  
**B. Blue State Digital**

Mailing Address 1000 Vermont Ave NW

City Washington State DC Zip Code 20005-4903

Purpose of Disbursement Consulting: Fundraising Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 27 / 2015

Amount of Each Disbursement this Period: 500.00

Transaction ID : VNGY69YDV14

Full Name (Last, First, Middle Initial)  
**c. Blue State Digital**

Mailing Address 1000 Vermont Ave NW

City Washington State DC Zip Code 20005-4903

Purpose of Disbursement Consulting: Fundraising Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 20 / 2015

Amount of Each Disbursement this Period: 500.00

Transaction ID : VNGY69YNG63

**SUBTOTAL** of Disbursements This Page (optional) ..... 1052.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 38		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Blue State Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 1000 Vermont Ave NW		Amount of Each Disbursement this Period 500.00
City Washington	State DC	
Zip Code 20005-4903	Purpose of Disbursement Consulting: Fundraising Services	Transaction ID : VNGY69YNG55
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Suites</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 200 C St SE		Amount of Each Disbursement this Period 421.37
City Washington	State DC	
Zip Code 20003-1909	Purpose of Disbursement Lodging	Transaction ID : VNGY69YDV22
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 756.20
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	Transaction ID : VNGY69YDV55
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1677.57
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 726.20
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	Transaction ID : VNGY69YNFW4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Democratic Party of Wisconsin</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2015
Mailing Address 15 N Pinckney St Ste 200		Amount of Each Disbursement this Period 600.50
City Madison	State WI	
Zip Code 53703-2833	Purpose of Disbursement Rent	Transaction ID : VNGY69YDV63
Candidate Name <b>Democratic Party of Wisconsin</b>	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Democratic Party of Wisconsin</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2015
Mailing Address 15 N Pinckney St Ste 200		Amount of Each Disbursement this Period 600.50
City Madison	State WI	
Zip Code 53703-2833	Purpose of Disbursement Rent	Transaction ID : VNGY69YNEP6
Candidate Name <b>Democratic Party of Wisconsin</b>	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1927.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Democratic Party of Wisconsin</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 15 N Pinckney St Ste 200		Amount of Each Disbursement this Period 600.50 <b>Transaction ID : VNGY69YNEN8</b>
City Madison	State WI Zip Code 53703-2833	
Purpose of Disbursement Rent		Category/ Type
Candidate Name <b>Democratic Party of Wisconsin</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dino's Grotto</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 1914 9th St NW		Amount of Each Disbursement this Period 220.00 <b>Transaction ID : VNGY69YNDV3</b>
City Washington	State DC Zip Code 20001-4464	
Purpose of Disbursement Catering		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. G Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 311 E Erie St		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : VNGY69YDV89</b>
City Milwaukee	State WI Zip Code 53202-6048	
Purpose of Disbursement Consulting: Fundraising Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5820.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. G Strategies</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 311 E Erie St		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : VNGY69YNE28</b>
City Milwaukee	State WI Zip Code 53202-6048	
Purpose of Disbursement Consulting: Fundraising Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. G Strategies</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2015
Mailing Address 311 E Erie St		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : VNGY69YNE36</b>
City Milwaukee	State WI Zip Code 53202-6048	
Purpose of Disbursement Consulting: Fundraising Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Gino's Italian Deli</b>		Date of Disbursement MM / DD / YYYY 01 / 18 / 2015
Mailing Address 4606 Verona Rd		Amount of Each Disbursement this Period 224.69 <b>Transaction ID : VNGY69YDV97</b>
City Madison	State WI Zip Code 53711-2737	
Purpose of Disbursement Catering		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10224.69
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

**A. Maple Leaf Cheese**

Full Name (Last, First, Middle Initial)  
Mailing Address N890 Twin Grove Rd

City Monroe State WI Zip Code 53566-9520

Purpose of Disbursement Catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 08 / 2015

Amount of Each Disbursement this Period: 1900.00

Transaction ID : VNGY69YDVX5

**B. Media Temple Hosting**

Full Name (Last, First, Middle Initial)  
Mailing Address 8520 National Blvd Bldg A

City Culver City State CA Zip Code 90232-2418

Purpose of Disbursement Software

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 14 / 2015

Amount of Each Disbursement this Period: 610.00

Transaction ID : VNGY69YDVF4

**c. Media Temple Hosting**

Full Name (Last, First, Middle Initial)  
Mailing Address 8520 National Blvd Bldg A

City Culver City State CA Zip Code 90232-2418

Purpose of Disbursement Software

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 14 / 2015

Amount of Each Disbursement this Period: 20.00

Transaction ID : VNGY69YNFT9

**SUBTOTAL** of Disbursements This Page (optional) ..... 2530.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

**A. Media Temple Hosting**

Full Name (Last, First, Middle Initial)  
Mailing Address 8520 National Blvd  
Bldg A

City Culver City State CA Zip Code 90232-2418

Purpose of Disbursement Software

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 14 / 2015

Amount of Each Disbursement this Period: 20.00

Transaction ID : VNGY69YNFS1

**B. New Blue Interactive**

Full Name (Last, First, Middle Initial)  
Mailing Address 501 3rd St NW

City Washington State DC Zip Code 20001-2760

Purpose of Disbursement Consulting: New Media

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 27 / 2015

Amount of Each Disbursement this Period: 1500.00

Transaction ID : VNGY69YDVZ1

**C. New Blue Interactive**

Full Name (Last, First, Middle Initial)  
Mailing Address 501 3rd St NW

City Washington State DC Zip Code 20001-2760

Purpose of Disbursement Consulting: New Media

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 20 / 2015

Amount of Each Disbursement this Period: 1500.00

Transaction ID : VNGY69YNG71

**SUBTOTAL** of Disbursements This Page (optional) ..... 3020.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

**A. New Blue Interactive**

Full Name (Last, First, Middle Initial)  
Mailing Address 501 3rd St NW

City Washington State DC Zip Code 20001-2760

Purpose of Disbursement Consulting: New Media

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 27 / 2015

Amount of Each Disbursement this Period: 1500.00

Transaction ID : VNGY69YNG89

**B. NGP VAN**

Full Name (Last, First, Middle Initial)  
Mailing Address 1225 I St NW Ste 1225

City Washington State DC Zip Code 20005-5918

Purpose of Disbursement Software

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 08 / 2015

Amount of Each Disbursement this Period: 2100.00

Transaction ID : VNGY69YDW09

**C. NGP VAN**

Full Name (Last, First, Middle Initial)  
Mailing Address 1225 I St NW Ste 1225

City Washington State DC Zip Code 20005-5918

Purpose of Disbursement Software

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 27 / 2015

Amount of Each Disbursement this Period: 2100.00

Transaction ID : VNGY69YNFV6

**SUBTOTAL** of Disbursements This Page (optional) ..... 5700.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. OutReach Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 02 / 2015</b>
Mailing Address <b>600 Williamson St</b>		Amount of Each Disbursement this Period <b>247.00</b> Transaction ID : <b>VNGY69YNE86</b>
City <b>Madison</b> State <b>WI</b> Zip Code <b>53703-3588</b>	Purpose of Disbursement Print Ad	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 21 / 2015</b>
Mailing Address <b>375 Bishops Way Ste 190</b>		Amount of Each Disbursement this Period <b>56.44</b> Transaction ID : <b>VNGY69YDW17</b>
City <b>Brookfield</b> State <b>WI</b> Zip Code <b>53005-6213</b>	Purpose of Disbursement Payroll Processing Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 10 / 2015</b>
Mailing Address <b>375 Bishops Way Ste 190</b>		Amount of Each Disbursement this Period <b>132.50</b> Transaction ID : <b>VNGY69YNEK2</b>
City <b>Brookfield</b> State <b>WI</b> Zip Code <b>53005-6213</b>	Purpose of Disbursement Payroll Processing Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>435.94</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2015
Mailing Address 375 Bishops Way Ste 190		Amount of Each Disbursement this Period 49.00
City Brookfield	State WI Zip Code 53005-6213	
Purpose of Disbursement Payroll Processing Fee		Transaction ID : VNGY69YNEJ5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PCMS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2015
Mailing Address 1050 17th St NW Ste 590		Amount of Each Disbursement this Period 816.25
City Washington	State DC Zip Code 20036-5592	
Purpose of Disbursement Accounting Services		Transaction ID : VNGY69YDW32
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PCMS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2015
Mailing Address 1050 17th St NW Ste 590		Amount of Each Disbursement this Period 405.00
City Washington	State DC Zip Code 20036-5592	
Purpose of Disbursement Accounting Services		Transaction ID : VNGY69YNDZ4
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1270.25
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. PCMS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 1050 17th St NW Ste 590		Amount of Each Disbursement this Period 272.50
City Washington	State DC	
Zip Code 20036-5592	Purpose of Disbursement Accounting Services	Transaction ID : VNGY69YNDY7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mark Pocan</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 309 N Baldwin St		Amount of Each Disbursement this Period 50.00
City Madison	State WI	
Zip Code 53703-1701	Purpose of Disbursement Travel Reimbursement	Transaction ID : VNGY69YNG14
Candidate Name Mr. Mark Pocan	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WI District: 02		

Full Name (Last, First, Middle Initial) <b>c. Mark Pocan</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 309 N Baldwin St		Amount of Each Disbursement this Period 112.20
City Madison	State WI	
Zip Code 53703-1701	Purpose of Disbursement Mileage	Transaction ID : VNGY69YNG22
Candidate Name Mr. Mark Pocan	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WI District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	434.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sheraton Worldwide</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 1 Star Pt		Amount of Each Disbursement this Period 1150.00
City Stamford	State CT	
Zip Code 06902-8911	Purpose of Disbursement Lodging	Transaction ID : VNGY69YDW40
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Taylor Gourmet</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 1116 H St NE		Amount of Each Disbursement this Period 261.76
City Washington	State DC	
Zip Code 20002-4443	Purpose of Disbursement Catering	Transaction ID : VNGY69YNGJ8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The UPS Store</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2015
Mailing Address 1360 Regent St		Amount of Each Disbursement this Period 19.15
City Madison	State WI	
Zip Code 53715-1255	Purpose of Disbursement Shipping	Transaction ID : VNGY69YNEA1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1430.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Walgreens</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 676 State St		Amount of Each Disbursement this Period 204.95 <b>Transaction ID : VNGY69YDW58</b>
City Madison	State WI Zip Code 53703-1016	
Purpose of Disbursement Office Supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Walgreens</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 676 State St		Amount of Each Disbursement this Period 8.43 <b>Transaction ID : VNGY69YNE93</b>
City Madison	State WI Zip Code 53703-1016	
Purpose of Disbursement Office Supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Wells Print and Digital Services</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2015
Mailing Address PO Box 1744		Amount of Each Disbursement this Period 31.65 <b>Transaction ID : VNGY69YNEF1</b>
City Madison	State WI Zip Code 53701-1744	
Purpose of Disbursement Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	245.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wells Print and Digital Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address PO Box 1744		Amount of Each Disbursement this Period 874.96 <b>Transaction ID : VNGY69YNEB9</b>
City Madison State WI Zip Code 53701-1744	Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:	

Full Name (Last, First, Middle Initial) <b>B. Wells Print and Digital Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address PO Box 1744		Amount of Each Disbursement this Period 789.83 <b>Transaction ID : VNGY69YNEC7</b>
City Madison State WI Zip Code 53701-1744	Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:	

Full Name (Last, First, Middle Initial) <b>C. Wells Print and Digital Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address PO Box 1744		Amount of Each Disbursement this Period 885.97 <b>Transaction ID : VNGY69YNED5</b>
City Madison State WI Zip Code 53701-1744	Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2550.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wells Print and Digital Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 27 / 2015</b>
Mailing Address <b>PO Box 1744</b>		Amount of Each Disbursement this Period <b>515.66</b>
City <b>Madison</b> State <b>WI</b> Zip Code <b>53701-1744</b>	Purpose of Disbursement <b>Printing</b>	
Candidate Name	Category/Type	<b>Transaction ID : VNGY69YNEE3</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wisconsin Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 08 / 2015</b>
Mailing Address <b>2135 Rimrock Rd</b>		Amount of Each Disbursement this Period <b>499.03</b>
City <b>Madison</b> State <b>WI</b> Zip Code <b>53713-1443</b>	Purpose of Disbursement <b>Payroll Taxes</b>	
Candidate Name	Category/Type	<b>Transaction ID : VNGY69YDW66</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Wisconsin Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 07 / 2015</b>
Mailing Address <b>2135 Rimrock Rd</b>		Amount of Each Disbursement this Period <b>60.48</b>
City <b>Madison</b> State <b>WI</b> Zip Code <b>53713-1443</b>	Purpose of Disbursement <b>Payroll Taxes</b>	
Candidate Name	Category/Type	<b>Transaction ID : VNGY69YNEM0</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1075.17</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>56870.85</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 38	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mark Pocan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 29 / 2015</b>
Mailing Address <b>430 S Capitol St SE</b>		Amount of Each Disbursement this Period <b>15000.00</b> Transaction ID : <b>VNGY69YDV48</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-4024</b>	Purpose of Disbursement <b>Unlimited Transfer to Party Committee</b>	
Candidate Name <b>Democratic Congressional Campaign Committee</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 12 / 2015</b>
Mailing Address <b>430 S Capitol St SE</b>		Amount of Each Disbursement this Period <b>10000.00</b> Transaction ID : <b>VNGY69YNGD9</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-4024</b>	Purpose of Disbursement <b>Unlimited Transfer to Party Committee</b>	
Candidate Name <b>Democratic Congressional Campaign Committee</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Supreme 4 the People</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 27 / 2015</b>
Mailing Address <b>1237 N 25th St</b>		Amount of Each Disbursement this Period <b>394.85</b> Transaction ID : <b>VNGY69YECJ5</b>
City <b>Milwaukee</b> State <b>WI</b> Zip Code <b>53205-2427</b>	Purpose of Disbursement <b>Contribution</b>	
Candidate Name <b>Supreme 4 the People</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>25394.85</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>25394.85</b>