

# 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

Forward Together PAC

ADDRESS (number and street) 1751 Potomac Greens Drive

Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00412791

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - Convention (12C)
  - General (12G)
  - Special (12S)
  - Runoff (12R)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 11 / 01 / 2015 through [MM] / [DD] / [YYYY] 11 / 30 / 2015

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 Gerald S. McGowan

Signature of Treasurer Gerald S. McGowan [Electronically Filed] Date [MM] / [DD] / [YYYY] 12 / 20 / 2015

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**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Forward Together 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="2015"/>		171313.81
(b) Cash on Hand at Beginning of Reporting Period.....	170858.77	
(c) Total Receipts (from Line 19) .....	36870.00	432917.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	207728.77	604230.87
7. Total Disbursements (from Line 31).....	28677.28	425179.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	179051.49	179051.49
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	

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  
Forward Together PAC

Report Covering the Period: From: 11 / 01 / 2015 To: 11 / 30 / 2015

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).....	12785.00	209785.00
(ii) Unitemized .....	85.00	340.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12870.00	210125.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	24000.00	222000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	36870.00	432125.00
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	790.19
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	1.87
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))..... ▶	36870.00	432917.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	36870.00	432917.06

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	28677.28	339304.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	28677.28	339304.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	85375.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	500.00
(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	500.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	28677.28	425179.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28677.28	425179.38

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	36870.00	432125.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	36870.00	431625.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	28677.28	339304.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	790.19
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	28677.28	338514.19

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**Forward Together PAC**

**A. John F. Savarese**  
Full Name (Last, First, Middle Initial)

Mailing Address 300 W End Ave  
Number 6-B

City New York State NY Zip Code 10023-8156

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

Name of Employer Wachtell Lipton Rosen & Katz Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
11 / 24 / 2015  
**Transaction ID : C7048955**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 251 W 13th St

City New York State NY Zip Code 10011-7701

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

Name of Employer Levinson & Fontana Company Occupation Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
11 / 24 / 2015  
**Transaction ID : C7048956**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 6930 Hillmead Rd

City Bethesda State MD Zip Code 20817-3049

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

Name of Employer Self-Employed Occupation Dentist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
11 / 06 / 2015  
**Transaction ID : C7045378**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Forward Together PAC**

Full Name (Last, First, Middle Initial)  
**A. Leo J. Corbett**

Mailing Address 1214 5th Ave  
Apt 37C

City New York State NY Zip Code 10029-5255

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

Name of Employer Zephyr Internet Partners Occupation Venture Capital

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
11 / 08 / 2015  
**Transaction ID : C7045970A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5870.00

Date of Receipt  
11 / 08 / 2015  
**Transaction ID : C7045970AB**

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 319 Tappan Ter

City Orinda State CA Zip Code 94563-1343

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

Name of Employer DaVita Rx Occupation Snr. Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
11 / 08 / 2015  
**Transaction ID : C7045971A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Forward Together PAC**

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238-2110

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5870.00

Date of Receipt  
11 / 08 / 2015  
**Transaction ID : C7045971AB**

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address PO Box 6347

City State Zip Code  
St Thomas VI 00804-6347

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4200.00

Date of Receipt  
11 / 08 / 2015  
**Transaction ID : C7045973A**

Amount of Each Receipt this Period  
700.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238-2110

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5870.00

Date of Receipt  
11 / 08 / 2015  
**Transaction ID : C7045973AB**

Amount of Each Receipt this Period  
700.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Forward Together PAC**

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

Mailing Address 10 Gracie Sq

City New York State NY Zip Code 10028-8031

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

Name of Employer Ruben Companies Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
11 / 15 / 2015  
Transaction ID : **C7048573A**

Amount of Each Receipt this Period  
2500.00

\* Earmarked Contribution: See Below

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

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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5870.00

Date of Receipt  
11 / 15 / 2015  
Transaction ID : **C7048573AB**

Amount of Each Receipt this Period  
2500.00

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

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

Mailing Address 422 Cascada Way

City Los Angeles State CA Zip Code 90049-1711

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

Name of Employer DaVita HealthCare Partners Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
11 / 22 / 2015  
Transaction ID : **C7048848A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....▶ 3500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Forward Together PAC**

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238-2110

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5870.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 22 / 2015

**Transaction ID : C7048848AB**

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 1515 Victoria Farms Ln

City State Zip Code  
Vienna VA 22182-1559

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

Name of Employer Occupation  
DLA Piper (US) LLP Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 22 / 2015

**Transaction ID : C7048849A**

Amount of Each Receipt this Period  
85.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238-2110

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5870.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 22 / 2015

**Transaction ID : C7048849AB**

Amount of Each Receipt this Period  
85.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	85.00
<b>TOTAL</b> This Period (last page this line number only).....▶	12785.00

**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 11 OF 20
<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)  
**Forward Together PAC**

Full Name (Last, First, Middle Initial)  
**A. The Home Depot, Inc. PAC**

Mailing Address 1155 F St NW  
Ste 400

City Washington State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
11 / 23 / 2015  
**Transaction ID : C7048800**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. Lifepoint Hospitals Inc. Good Government Fund**

Mailing Address 330 Seven Springs Way

City Brentwood State TN Zip Code 37027-4536

FEC ID number of contributing federal political committee. **C** C00347955

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
11 / 23 / 2015  
**Transaction ID : C7048794**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. HCA Inc. Good Government Fund**

Mailing Address PO Box 550  
One Park Plaza

City Nashville State TN Zip Code 37202-0550

FEC ID number of contributing federal political committee. **C** C00067231

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
11 / 24 / 2015  
**Transaction ID : C7048954**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 20
<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)  
**Forward Together PAC**

Full Name (Last, First, Middle Initial)  
**A. American College Of Radiology Assoc PAC**

Mailing Address 1891 Preston White Dr

City Reston State VA Zip Code 20191-4326

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2015  
**Transaction ID : C7045376**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. National Multi Housing Council PAC**

Mailing Address 1850 M St NW Ste 540

City Washington State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2015  
**Transaction ID : C7045377**

Amount of Each Receipt this Period  
4000.00

Full Name (Last, First, Middle Initial)  
**C. Natl Assoc of Real Estate Investment Trusts PAC**

Mailing Address 1875 I St NW Ste 600

City Washington State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 23 / 2015  
**Transaction ID : C7048799**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	24000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Forward Together PAC**

Full Name (Last, First, Middle Initial) <b>A. Funding Solutions, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 06 / 2015
Mailing Address 18 Ensign Spence		<b>Transaction ID : D361840</b>
City Williamsburg	State VA	
Zip Code 23185-5561	Purpose of Disbursement Fundraising Consulting Services	Amount of Each Disbursement this Period 5014.97
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dominion Payroll</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 306 E Main St		<b>Transaction ID : D361920</b>
City Richmond	State VA	
Zip Code 23219-3820	Purpose of Disbursement Payroll Taxes	Amount of Each Disbursement this Period 354.51
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Bloom Strategic Consulting, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 25 / 2015
Mailing Address 105 Duane St 30F		<b>Transaction ID : D362000</b>
City New York	State NY	
Zip Code 10007-3601	Purpose of Disbursement Fundraising Consulting Services	Amount of Each Disbursement this Period 3000.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8369.48
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Forward Together PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Finance Consultants**

Mailing Address 10 G St NE  
Ste 470

City Washington State DC Zip Code 20002-8038

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

**Transaction ID : D361901**

Amount of Each Disbursement this Period

3505.39

Full Name (Last, First, Middle Initial)

**B. Vonage Business**

Mailing Address 7900 Westpark Dr  
Ste A315

City Mc Lean State VA Zip Code 22102-4235

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 06 / 2015

**Transaction ID : D361842**

Amount of Each Disbursement this Period

65.99

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 08 / 2015

**Transaction ID : D361902**

Amount of Each Disbursement this Period

90.26

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

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

3661.64

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Forward Together PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			22			2015			

**Transaction ID : D362013**

Amount of Each Disbursement this Period

42.86
-------

Full Name (Last, First, Middle Initial)

**B. Dominion Payroll**

Mailing Address 306 E Main St

City Richmond State VA Zip Code 23219-3820

Purpose of Disbursement  
Payroll Service Charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2015			

**Transaction ID : D361814**

Amount of Each Disbursement this Period

39.15
-------

Full Name (Last, First, Middle Initial)

**C. Wells Fargo Bank, NA**

Mailing Address 330 N Washington St

City Alexandria State VA Zip Code 22314-2502

Purpose of Disbursement  
Bank Service Charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2015			

**Transaction ID : D362065**

Amount of Each Disbursement this Period

59.89
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

141.90
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Forward Together PAC**

Full Name (Last, First, Middle Initial)

**A. Dominion Payroll**

Mailing Address 306 E Main St

City Richmond State VA Zip Code 23219-3820

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2015

Transaction ID : D361815

Amount of Each Disbursement this Period

354.49

Full Name (Last, First, Middle Initial)

**B. Wild Bronco Productions**

Mailing Address PO Box 333

City Los Olivos State CA Zip Code 93441-0333

Purpose of Disbursement  
Writing Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : D361895

Amount of Each Disbursement this Period

6250.00

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2015

Transaction ID : D361926

Amount of Each Disbursement this Period

98.75

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

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

6703.24



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Forward Together PAC**

Full Name (Last, First, Middle Initial)

**A. Bloom Strategic Consulting, LLC**

Mailing Address 105 Duane St  
30F

City New York State NY Zip Code 10007-3601

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2015

**Transaction ID : D362046**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. LexisNexis**

Mailing Address PO Box 72477090

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Research Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

**Transaction ID : D361898**

Amount of Each Disbursement this Period

510.00

Full Name (Last, First, Middle Initial)

**C. Andrew Cyphers**

Mailing Address 8500 16th St  
Apt 424

City Silver Spring State MD Zip Code 20910-3087

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2015

**Transaction ID : D361918**

Amount of Each Disbursement this Period

856.56

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

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

4366.56

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Forward Together PAC**

Full Name (Last, First, Middle Initial)

**A. Dominion Payroll**

Mailing Address 306 E Main St

City Richmond State VA Zip Code 23219-3820

Purpose of Disbursement  
Payroll Service Charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2015

Transaction ID : D361919

Amount of Each Disbursement this Period

39.15

Full Name (Last, First, Middle Initial)

**B. Andrew Cyphers**

Mailing Address 8500 16th St  
Apt 424

City Silver Spring State MD Zip Code 20910-3087

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2015

Transaction ID : D361819

Amount of Each Disbursement this Period

856.57

Full Name (Last, First, Middle Initial)

**C. Ms. Katherine M. Buchanan**

Mailing Address 1751 Potomac Greens Dr

City Alexandria State VA Zip Code 22314-6233

Purpose of Disbursement  
Accounting/Compliance Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 06 / 2015

Transaction ID : D361839

Amount of Each Disbursement this Period

2625.00

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

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

3520.72

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Forward Together PAC**

Full Name (Last, First, Middle Initial) <b>A. Republic Parking System</b>		Date of Disbursement MM / DD / YYYY 11 / 20 / 2015
Mailing Address 108 N Fairfax St		<b>Transaction ID : D361929</b>
City Alexandria	State VA	
Purpose of Disbursement Parking		Amount of Each Disbursement this Period 127.50
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement MM / DD / YYYY 11 / 25 / 2015
Mailing Address PO Box 1270		<b>Transaction ID : D362066</b>
City Newark	State NJ	
Purpose of Disbursement Credit Card Payment		Amount of Each Disbursement this Period 1786.24
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Salsa Labs, Inc.</b>		Date of Disbursement MM / DD / YYYY 11 / 25 / 2015
Mailing Address PO Box 674533		<b>Transaction ID : D362067</b>
City Detroit	State MI	
Purpose of Disbursement Website Support		Amount of Each Disbursement this Period 975.00
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	1913.74
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Forward Together PAC**

Full Name (Last, First, Middle Initial)

**A. Bistro Bis**

Mailing Address 15 E St NW

City Washington State DC Zip Code 20001-1501

Purpose of Disbursement  
Catering/Events

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 25 / 2015

**Transaction ID : D362068**

Amount of Each Disbursement this Period

811.24

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

0.00

28677.28