

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

Campaign for Change

ADDRESS (number and street) 1147 Hancock St Suite 212

Check if different than previously reported. (ACC)

Quincy MA 02169

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

C C00441501

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:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M / D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

<input checked="" type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on M M / D D / Y Y Y Y Y Y in the State of MA

5. Covering Period M M / D D / Y Y Y Y Y Y through M M / D D / Y Y Y Y Y Y

10 / 16 / 2014 through 11 / 24 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas R. Kiley

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

12 / 02 / 2014

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

Campaign for Change

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		400811.86
(b) Cash on Hand at Beginning of Reporting Period.....	220150.96	
(c) Total Receipts (from Line 19)	10173.17	129359.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	230324.13	530170.86
7. Total Disbursements (from Line 31).....	33999.71	333846.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	196324.42	196324.42
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY 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
Campaign for Change

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	10261.58
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	10261.58
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	10261.58
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	10173.17	119097.42
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))..... ▶	10173.17	129359.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10173.17	129359.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	28009.71	245506.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	28009.71	245506.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5200.00	53200.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	790.00	35140.00
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)) ..	33999.71	333846.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33999.71	333846.44

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	10261.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	10261.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	28009.71	245506.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	28009.71	245506.44

**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 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Campaign for Change

A. Energy Transfer Partners, LP
 Full Name (Last, First, Middle Initial)
 Mailing Address 3738 Oak Lawn Avenue
 City Dallas State TX Zip Code 75219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 9975.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : C10304159
 Amount of Each Receipt this Period
 60.00
 Stock Gain

B. Enterprise Products Partners, L.P.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 Louisiana Street
 City Houston State TX Zip Code 77002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 21919.87

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2014
Transaction ID : C10306605
 Amount of Each Receipt this Period
 182.50
 * Stock Gain

C. Fidelity Investments
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 145421
 City Cincinnati State OH Zip Code 45250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 6622.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : C10304160
 Amount of Each Receipt this Period
 196.88
 * Dividend

SUBTOTAL of Receipts This Page (optional).....	▶	439.88
TOTAL This Period (last page this line number only).....	▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Campaign for Change

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

Mailing Address PO Box 145421

City State Zip Code
Cincinnati OH 45250

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **6622.66**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : C10304161

Amount of Each Receipt this Period
 48.04

* Dividend

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

Mailing Address PO Box 145421

City State Zip Code
Cincinnati OH 45250

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **6622.66**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014
Transaction ID : C10304162

Amount of Each Receipt this Period
 0.16

* Dividend

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

Mailing Address PO Box 145421

City State Zip Code
Cincinnati OH 45250

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **6622.66**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2014
Transaction ID : C10306606

Amount of Each Receipt this Period
 48.05

* Dividend

SUBTOTAL of Receipts This Page (optional)..... ▶ **96.25**

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 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial) A. National Grid US Service Company, Inc.		Date of Receipt
Mailing Address 40 Sylvan Road		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
Waltham	MA	02451
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : C10304164
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="4922.34"/>
Receipt For:	Aggregate Year-to-Date ▼	Stock Gain
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="9552.27"/>	

Full Name (Last, First, Middle Initial) B. Spectra Energy Corporation		Date of Receipt
Mailing Address 5400 Westheimer Court		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
Houston	TX	77056
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : C10304165
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="4638.44"/>
Receipt For:	Aggregate Year-to-Date ▼	Stock Gain
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="20328.37"/>	

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

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="9560.78"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="10096.41"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 7645 E 63rd st Suite 600

City Tulsa State OK Zip Code 74133

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 24 / 2014

Transaction ID : D557240

Amount of Each Disbursement this Period

520.00

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 7645 E 63rd st Suite 600

City Tulsa State OK Zip Code 74133

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 20 / 2014

Transaction ID : D557244

Amount of Each Disbursement this Period

650.00

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 7645 E 63rd st Suite 600

City Tulsa State OK Zip Code 74133

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2014

Transaction ID : D557246

Amount of Each Disbursement this Period

640.00

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

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

1810.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 7645 E 63rd st Suite 600

City Tulsa State OK Zip Code 74133

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2014

Transaction ID : D557255

Amount of Each Disbursement this Period

611.00

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 7645 E 63rd st Suite 600

City Tulsa State OK Zip Code 74133

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2014

Transaction ID : D557256

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 7645 E 63rd st Suite 600

City Tulsa State OK Zip Code 74133

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2014

Transaction ID : D557257

Amount of Each Disbursement this Period

455.00

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

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

2066.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. Best Buy

Mailing Address 550 Grossman Dr

City Braintree State MA Zip Code 02184

Purpose of Disbursement
Office supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2014

Transaction ID : D557220

Amount of Each Disbursement this Period

194.58

Full Name (Last, First, Middle Initial)

B. Charlie Palmer Restaurant

Mailing Address 101 Constitution Ave NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Food beverage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Transaction ID : D557262

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Dover Park Restaurant

Mailing Address 201 Mass Ave NE

City Washington State DC Zip Code 20001

Purpose of Disbursement
Food beverage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2014

Transaction ID : D557208

Amount of Each Disbursement this Period

71.19

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

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

465.77

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial) A. Dover Park Restaurant		Date of Disbursement MM / DD / YYYY 10 / 24 / 2014
Mailing Address 201 Mass Ave NE		Transaction ID : D557209
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 68.10	
Purpose of Disbursement Food beverage	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. Dover Park Restaurant		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014
Mailing Address 201 Mass Ave NE		Transaction ID : D557210
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 172.26	
Purpose of Disbursement Food beverage	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) C. Expedia Travel		Date of Disbursement MM / DD / YYYY 11 / 17 / 2014
Mailing Address 10190 Covington Cross Dr		Transaction ID : D557231
City Las Vegas State NV Zip Code 89144	Amount of Each Disbursement this Period 7.00	
Purpose of Disbursement Change fee	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:	

SUBTOTAL of Disbursements This Page (optional).....▶	247.36
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. Katharina Hermani

Mailing Address 9 Ketch Lane

City Quincy State MA Zip Code 02171

Purpose of Disbursement
Salary & wages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2014

Transaction ID : D557250

Amount of Each Disbursement this Period

847.00

Full Name (Last, First, Middle Initial)

B. Jetblue airways

Mailing Address 6322 S 3000 E Ste G10

City Salt Lake City State UT Zip Code 84121

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 21 / 2014

Transaction ID : D557237

Amount of Each Disbursement this Period

174.91

Full Name (Last, First, Middle Initial)

C. Jetblue airways

Mailing Address 6322 S 3000 E Ste G10

City Salt Lake City State UT Zip Code 84121

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2014

Transaction ID : D557221

Amount of Each Disbursement this Period

387.20

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

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

1409.11

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. Jetblue airways

Mailing Address 6322 S 3000 E Ste G10

City State Zip Code
Salt Lake City UT 84121

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2014

Transaction ID : D557216

Amount of Each Disbursement this Period

196.35

Full Name (Last, First, Middle Initial)

B. Lincoln

Mailing Address 1110 Vermont Ave NW

City State Zip Code
Washington DC 20005

Purpose of Disbursement
Food beverage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 11 / 2014

Transaction ID : D557195

Amount of Each Disbursement this Period

127.00

Full Name (Last, First, Middle Initial)

C. MA Port Authority

Mailing Address 1 Harborside Dr

City State Zip Code
Boston MA 02128

Purpose of Disbursement
Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Transaction ID : D553778

Amount of Each Disbursement this Period

58.00

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

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

381.35

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. MA Port Authority

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement
Transportation

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 / 2014

Transaction ID : D557223

Amount of Each Disbursement this Period

58.43

Full Name (Last, First, Middle Initial)

B. MA Port Authority

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement
Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2014

Transaction ID : D557190

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

C. MA Port Authority

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement
Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2014

Transaction ID : D557207

Amount of Each Disbursement this Period

29.00

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

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

116.43

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. MA Port Authority

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement
Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2014

Transaction ID : D557226

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

B. MA Port Authority

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement
Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 20 / 2014

Transaction ID : D557229

Amount of Each Disbursement this Period

14.00

Full Name (Last, First, Middle Initial)

C. MA Port Authority

Mailing Address 1 Harborside Dr

City Boston State MA Zip Code 02128

Purpose of Disbursement
Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2014

Transaction ID : D557233

Amount of Each Disbursement this Period

29.00

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

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

72.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. NGP Van Inc

Mailing Address 1101 15th St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
PAC Software fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : D557214

Amount of Each Disbursement this Period

5220.00

Full Name (Last, First, Middle Initial)

B. Paychex Inc. Payroll

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement
Payroll taxes

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
10 / 31 / 2014

Transaction ID : D557251

Amount of Each Disbursement this Period

1306.00

Full Name (Last, First, Middle Initial)

C. Paychex Inc. Payroll

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement
Payroll Service Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 20 / 2014

Transaction ID : D557252

Amount of Each Disbursement this Period

66.20

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

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

6592.20

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. Paychex Inc. Payroll

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement
Service fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 12 / 2014

Transaction ID : D557247

Amount of Each Disbursement this Period

9.99

Full Name (Last, First, Middle Initial)

B. Paychex Inc. Payroll

Mailing Address 911 Panorama Trail S

City Rochester State NY Zip Code 14625

Purpose of Disbursement
Payroll taxes

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
10 / 31 / 2014

Transaction ID : D557248

Amount of Each Disbursement this Period

98.65

Full Name (Last, First, Middle Initial)

C. Perkins Coie

Mailing Address 1201 Third Ave, 40th Floor

City Seattle State WA Zip Code 98101

Purpose of Disbursement
Legal Compliance Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : D557258

Amount of Each Disbursement this Period

197.00

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

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

305.64

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. Perkins Coie

Mailing Address 1201 Third Ave, 40th Floor

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal Compliance Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **D557242**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Sonoma Restaurant & Wine Bar

Mailing Address 223 Pennsylvania Ave SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement
Food beverage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **D553890**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Triplet Irrevocable Trust

Mailing Address 1147 Hancock St, suite 2

City State Zip Code
Quincy MA 02169

Purpose of Disbursement
Office rental payment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **D557241**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. Triplet Irrevocable Trust

Mailing Address 1147 Hancock St, suite 2

City Quincy State MA Zip Code 02169

Purpose of Disbursement
Office rental payment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2014

Transaction ID : D557254

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. US Airways

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 23 / 2014

Transaction ID : D557238

Amount of Each Disbursement this Period

501.90

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2014

Transaction ID : D557232

Amount of Each Disbursement this Period

860.20

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

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

4862.10

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2014

Transaction ID : D557224

Amount of Each Disbursement this Period

418.74

Full Name (Last, First, Middle Initial)

B. US Airways

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement
Change 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 / 12 / 2014

Transaction ID : D557225

Amount of Each Disbursement this Period

65.81

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2014

Transaction ID : D553876

Amount of Each Disbursement this Period

860.20

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

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

1344.75

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2014

Transaction ID : D553766

Amount of Each Disbursement this Period

856.00

Full Name (Last, First, Middle Initial)

B. US Airways

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : D557217

Amount of Each Disbursement this Period

928.40

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2014

Transaction ID : D557218

Amount of Each Disbursement this Period

550.00

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

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

2334.40

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E. Sky Harbour Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2014

Transaction ID : D557219

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

B. Washington Plaza Hotel

Mailing Address 10 Thomas Cir NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2014

Transaction ID : D553774

Amount of Each Disbursement this Period

254.19

Full Name (Last, First, Middle Initial)

C. Washington Plaza Hotel

Mailing Address 10 Thomas Cir NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 13 / 2014

Transaction ID : D557203

Amount of Each Disbursement this Period

59.67

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

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

763.86

26859.42

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Campaign for Change

Full Name (Last, First, Middle Initial)

A. Friends of Mary Landrieu

Mailing Address 700 13th St NW 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Candidate Contribution

Candidate Name

Mary Landrieu

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Runoff

State: LA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		24		2014

Transaction ID : D557239

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

B. Seth Moulton for Congress

Mailing Address 10 Colonial Rd

City Salem State MA Zip Code 01970

Purpose of Disbursement
Candidate Contribution

Candidate Name

Seth Moulton

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

Transaction ID : D553780

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

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

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

5200.00

5200.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Campaign for Change

Full Name (Last, First, Middle Initial)

A. Home for the Little Wanderers

Mailing Address 10 Guest St

City Brighton State MA Zip Code 02135

Purpose of Disbursement
Charitable Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 20 / 2014

Transaction ID : D557243

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. US Association of Former Members of Congress

Mailing Address 1401 K St NW
Suite 503

City Washington State DC Zip Code 20005

Purpose of Disbursement
Charitable Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 10 / 2014

Transaction ID : D557245

Amount of Each Disbursement this Period

290.00

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)..... ▶

790.00

790.00