

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

L PAC

ADDRESS (number and street) PO Box 76940

Check if different than previously reported. (ACC) Washington DC 20013

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

C C00519413 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

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

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

General (30G) Runoff (30R) Special (30S)

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

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2016 through M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016

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

Signature of Treasurer Rosen, Hilary, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

L PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		92680.76
(b) Cash on Hand at Beginning of Reporting Period.....	180030.88	
(c) Total Receipts (from Line 19)	306263.46	1096234.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	486294.34	1188915.56
7. Total Disbursements (from Line 31).....	319212.29	1021833.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	167082.05	167082.05
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

L PAC

Report Covering the Period: From: 07 / 01 / 2016 To: 09 / 30 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	44513.60	78214.56
(ii) Unitemized	3909.18	5532.34
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	48422.78	83746.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	6075.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	48422.78	89821.90
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).....	465.68	465.68
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	257375.00	1005947.22
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)).....▶	306263.46	1096234.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	306263.46	1096234.80

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1159.70	4908.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1159.70	4908.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	53023.60	119474.56
24. Independent Expenditures (use Schedule E)	0.00	2022.22
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	265028.99	895428.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	319212.29	1021833.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	319212.29	1021833.51

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	48422.78	89821.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48422.78	89821.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1159.70	4908.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	465.68	465.68
38. Net Operating Expenditures (subtract Line 37 from Line 36)	694.02	4443.05

**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 112
	<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)
L PAC

A. Atkins, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 Washington St
 135
 City San Diego State CA Zip Code 92103-2110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retured
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 07 / 21 / 2016
Transaction ID : VNW3HEG8NS5
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Earmarked for KAMALA HARRIS FOR SENATE

B. Bayles, Autumn, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 Green St
 Apt F
 City Philadelphia State PA Zip Code 19123-2810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Aramark Occupation (for Individual) Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2016
Transaction ID : VNW3HEG4WY0
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Bayles, Autumn, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 Green St
 Apt F
 City Philadelphia State PA Zip Code 19123-2810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Aramark Occupation (for Individual) Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2016
Transaction ID : VNW3HEG73P4
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1300.00
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 112
	<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)
L PAC

A. Benjamin, Barbara, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 Alden St
Apt 324

City Provincetown State MA Zip Code 02657-1481

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

Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2016

Transaction ID : VNW3HEH63A6

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 907 Allahana Way

City Santa Fe State NM Zip Code 87501

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

Name of Employer (for Individual) KC Properties Occupation (for Individual) Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2016

Transaction ID : VNW3HERT5Q4

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 2109 Broadway
Apt 1365

City New York State NY Zip Code 10023-2149

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

Name of Employer (for Individual) Self Occupation (for Individual) Artist

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2016

Transaction ID : VNW3HEH63G3

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2250.00
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 112
	<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)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Cohen, Lizabeth, , ,			Date of Receipt
Mailing Address 76 Brattle St			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Cambridge	State MA	Zip Code 02138-3452	Transaction ID : VNW3HET76A0
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="300.00"/>
Name of Employer (for Individual) Information Requested		Occupation (for Individual) Information Requested	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Collins, Paula, , ,			Date of Receipt
Mailing Address 35 Morton St Apt 11			<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2016"/>
City New York	State NY	Zip Code 10014-4027	Transaction ID : VNW3HEQSZZ2
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="20.16"/>
Name of Employer (for Individual) NYC Dept of Ed		Occupation (for Individual) Teacher	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="0.00"/>		

Earmarked for ANGIE CRAIG FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Cull, Rhian, , ,			Date of Receipt
Mailing Address 100 Westminster St Ste 1500			<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2016"/>
City Providence	State RI	Zip Code 02903-2395	Transaction ID : VNW3HEG4WA2
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) Hinckley Allen		Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="570.16"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**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 112
	<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)
L PAC

A. Eggers, Lynne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 Mullen Ave
 City San Francisco State CA Zip Code 94110-5331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt 08 / 12 / 2016
Transaction ID : VNW3HEP4K97
 Amount of Each Receipt this Period 20.16
 Memo Item
 Earmarked for ANGIE CRAIG FOR CONGRESS

B. Felicio, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 Westchester Rd 39
 City Jamaica Plain State MA Zip Code 02130-3451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Community Catalyst Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2016
Transaction ID : VNW3HEH63C2
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Filardi, Dolores, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1203
 City Truro State MA Zip Code 02666-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Sculptor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 08 / 05 / 2016
Transaction ID : VNW3HEH62T0
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	370.16
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 112
	<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)
L PAC

A. Filardi, Dolores, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1203
 City Truro State MA Zip Code 02666-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Sculptor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 26 / 2016
Transaction ID : VNW3HER3VY5
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Filardi, Dolores, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1203
 City Truro State MA Zip Code 02666-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Sculptor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 26 / 2016
Transaction ID : VNW3HESHY49
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Franchot, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1819 Humboldt Ave S
 City Minneapolis State MN Zip Code 55403-2814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2016
Transaction ID : VNW3HEH6380
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 112 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Gillespie, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5701 NE 21st Ave

City Fort Lauderdale	State FL	Zip Code 33308-2432
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : VNW3HES2ZA0

Amount of Each Receipt this Period
20.16

Memo Item

Earmarked for ANGIE CRAIG FOR CONGRESS

B. Goodridge, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 301840

City Boston	State MA	Zip Code 02130-0016
----------------	-------------	------------------------

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

Name of Employer (for Individual) Northstar Asset	Occupation (for Individual) Investment Advisor
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 08 / 05 / 2016
Transaction ID : VNW3HEH6315

Amount of Each Receipt this Period
250.00

Memo Item

C. Goodridge, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 301840

City Boston	State MA	Zip Code 02130-0016
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Northstar Asset	Occupation (for Individual) Investment Advisor
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 08 / 05 / 2016
Transaction ID : VNW3HEH64V1

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1270.16
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 12 OF 112
	<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)
L PAC

A. Green, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 Spring Park Ave
 City Jamaica Plain State MA Zip Code 02130-4428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : VNW3HET7611
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Heinberg, Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 Lanvale Ave
 City Asheville State NC Zip Code 28806-2613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Carolina Day School Occupation (for Individual) Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : VNW3HEH62R4
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Hoover, Gretchen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1087
 City Rhinelander State WI Zip Code 54501-1087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : VNW3HEH62E5
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5800.00
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 13 OF 112
<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)
L PAC

A. Hyde, Shelley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9360 Baypoint Ct
 City Reno State NV Zip Code 89523-6911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PeopleLink Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 16 / 2016
Transaction ID : VNW3HES3WP7
 Amount of Each Receipt this Period 20.16
 Memo Item
 Earmarked for ANGIE CRAIG FOR CONGRESS

B. Johnson, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 12550
 City Tucson State AZ Zip Code 85732-2550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) na
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt 08 / 12 / 2016
Transaction ID : VNW3HEM3ZQ0
 Amount of Each Receipt this Period 20.16
 Memo Item
 Earmarked for ANGIE CRAIG FOR CONGRESS

C. Johnson, Peggy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1245 Adams St Unit B303
 City Dorchester Center State MA Zip Code 02124-5799
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : VNW3HET75T5
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	290.32
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 14 OF 112
	<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)
L PAC

A. Joplin, Linda, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11312 edinburgh dr
 City Westminster State CA Zip Code 92683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 15 / 2016
Transaction ID : VNW3HES2ZZ5
 Amount of Each Receipt this Period 100.00
 Memo Item
 Earmarked for ANGIE CRAIG FOR CONGRESS

B. Kight, Kate, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1629 L St NE Unit 303
 City Washington State DC Zip Code 20002-3055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BTC Revolutions Occupation (for Individual) Communications Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6.00

Date of Receipt 09 / 26 / 2016
Transaction ID : VNW3HESM1Q3
 Amount of Each Receipt this Period 20.16
 Memo Item
 Earmarked for HILLARY FOR AMERICA

C. Lay, C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 Cooksie St
 City Baltimore State MD Zip Code 21230-5231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 18 / 2016
Transaction ID : VNW3HEG4Y06
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	620.16
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 15 OF 112
	<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)
L PAC

A. Lenane, Joan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 681
 City Provincetown State MA Zip Code 02657-0681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Coldwell Banker Pat Shultz Real Estate Occupation (for Individual) Real Estate Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : VNW3HEG4W86
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Leszczynski, Jeanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 Wellesley Ave
 City Needham State MA Zip Code 02494-1821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : VNW3HES3VD3
 Amount of Each Receipt this Period 100.00
 Memo Item
 Earmarked for ANGIE CRAIG FOR CONGRESS

C. Lewis, Ruth Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Seymour St Unit 3
 City Roslindale State MA Zip Code 02131-4326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ruth E Lewis PhD LLC Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : VNW3HEH6331
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 112
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Lewis, Ruth Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Seymour St
 Unit 3
 City Roslindale State MA Zip Code 02131-4326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ruth E Lewis PhD LLC Occupation (for Individual) Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : VNW3HET75D3
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Magliocco, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 NE 3rd St
 City Fort Lauderdale State FL Zip Code 33301-1670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : VNW3HEH63B4
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Nash, Gillian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 Leeward Rd
 City Belvedere Tiburon State CA Zip Code 94920-2321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : VNW3HESE7H9
 Amount of Each Receipt this Period 5000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 112
	<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)
L PAC

A. Piatt, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 Canton Ave
 City Milton State MA Zip Code 02186-3507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : VNW3HEH63J9
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Ricketts, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 Sheridan Rd
 City Wilmette State IL Zip Code 60091-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Cubs Occupation (for Individual) Co-Owner
 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
 09 / 12 / 2016
Transaction ID : VNW3HERX626
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 Earmarked for MAGGIE FOR NH

C. Ricketts, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 Sheridan Rd
 City Wilmette State IL Zip Code 60091-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Cubs Occupation (for Individual) Co-Owner
 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
 09 / 14 / 2016
Transaction ID : VNW3HES0Q98
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 Earmarked for ANGIE CRAIG FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....	6400.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 18 OF 112
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
L PAC

A. Ricketts, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 Sheridan Rd
 City Wilmette State IL Zip Code 60091-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Cubs Occupation (for Individual) Co-Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : VNW3HESTM23
 Amount of Each Receipt this Period 2700.00
 Memo Item
 Earmarked for DENISE JUNEAU FOR CONGRESS

B. Ricketts, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 Sheridan Rd
 City Wilmette State IL Zip Code 60091-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chicago Cubs Occupation (for Individual) Co-Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : VNW3HESX542
 Amount of Each Receipt this Period 2700.00
 Memo Item
 Earmarked for MAGGIE FOR NH

C. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 30220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 20 / 2016
Transaction ID : VNW3HETD554
 Amount of Each Receipt this Period 2000.00
 Memo Item
 Earmarked for KIRKPATRICK FOR ARIZONA

SUBTOTAL of Receipts This Page (optional)..... ▶ 5400.00
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 19 OF 112
<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)
L PAC

A. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 30220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 20 / 2016
Transaction ID : VNW3HETD570
 Amount of Each Receipt this Period 2500.00
 Memo Item
 Earmarked for MAGGIE FOR NH

B. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 30220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 20 / 2016
Transaction ID : VNW3HETD596
 Amount of Each Receipt this Period 2500.00
 Memo Item
 Earmarked for DEBORAH ROSS FOR SENATE

C. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 30220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 20 / 2016
Transaction ID : VNW3HETD5A4
 Amount of Each Receipt this Period 2500.00
 Memo Item
 Earmarked for KATIE MCGINTY FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 20 OF 112
<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)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Ritchie, Alix, L, ,		Date of Receipt MM / DD / YYYY 09 / 20 / 2016
Mailing Address PO Box 30220		Transaction ID : VNW3HETD5D7
City Fort Lauderdale	State FL	Zip Code 33303-0220
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer (for Individual) Alix Ritchie Consulting	Occupation (for Individual) Media Consultant	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	Earmarked for TAMMY FOR ILLINOIS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ritchie, Alix, L, ,		Date of Receipt MM / DD / YYYY 09 / 20 / 2016
Mailing Address PO Box 30220		Transaction ID : VNW3HETD5E5
City Fort Lauderdale	State FL	Zip Code 33303-0220
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer (for Individual) Alix Ritchie Consulting	Occupation (for Individual) Media Consultant	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	Earmarked for CATHERINE CORTEZ MASTO FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Ritchie, Alix, L, ,		Date of Receipt MM / DD / YYYY 09 / 20 / 2016
Mailing Address PO Box 30220		Transaction ID : VNW3HETD5H9
City Fort Lauderdale	State FL	Zip Code 33303-0220
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Alix Ritchie Consulting	Occupation (for Individual) Media Consultant	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 0.00	Earmarked for KAMALA HARRIS FOR SENATE

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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 21 OF 112
<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)
L PAC

A. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 30220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 20 / 2016
Transaction ID : VNW3HETD5J7
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Earmarked for RUSS FOR WISCONSIN

B. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 30220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 20 / 2016
Transaction ID : VNW3HETD5K5
 Amount of Each Receipt this Period 2000.00
 Memo Item
 Earmarked for ANGIE CRAIG FOR CONGRESS

C. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 30220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 20 / 2016
Transaction ID : VNW3HETD5M3
 Amount of Each Receipt this Period 2000.00
 Memo Item
 Earmarked for CAIN FOR CONGRESS

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 22 OF 112
	<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)
L PAC

A. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 30220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 20 / 2016
Transaction ID : VNW3HETD5N0
 Amount of Each Receipt this Period 2000.00
 Memo Item
 Earmarked for VAL DEMINGS FOR CONGRESS

B. Ritchie, Alix, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 30220
 City Fort Lauderdale State FL Zip Code 33303-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alix Ritchie Consulting Occupation (for Individual) Media Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 20 / 2016
Transaction ID : VNW3HETD5Q6
 Amount of Each Receipt this Period 2000.00
 Memo Item
 Earmarked for DENISE JUNEAU FOR CONGRESS

C. Rose, Sally, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 681
 City Provincetown State MA Zip Code 02657-0681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Provincetown Banner Occupation (for Individual) Editor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 05 / 2016
Transaction ID : VNW3HEH63K7
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00
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 23 OF 112
	<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)
L PAC

A. Schmidt, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 Michigan Ave
 City Wilmette State IL Zip Code 60091-1931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : VNW3HESS7X0
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Serafini, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 86 Hammond St
 City Acton State MA Zip Code 01720-3225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSC ServiceWorks Occupation (for Individual) lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 15 / 2016
Transaction ID : VNW3HES30B0
 Amount of Each Receipt this Period 100.00
 Memo Item
 Earmarked for ANGIE CRAIG FOR CONGRESS

C. Shatkin, JoAnne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Perkins St Apt 223
 City Jamaica Plain State MA Zip Code 02130-4323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 05 / 2016
Transaction ID : VNW3HEH62V7
 Amount of Each Receipt this Period 240.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5340.00
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 24 OF 112
	<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)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Shipp, Elizabeth, , ,		Date of Receipt MM / DD / YYYY 09 / 26 / 2016
Mailing Address 15955 Frederick Rd Apt 1308		Transaction ID : VNW3HESM1R9
City Rockville	State MD	Zip Code 20855-2295
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.16
Name of Employer (for Individual) LPAC	Occupation (for Individual) Executive Director	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	Earmarked for HILLARY FOR AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Slavin, Jeffrey, Z., ,		Date of Receipt MM / DD / YYYY 08 / 05 / 2016
Mailing Address 5706 Warwick PI		Transaction ID : VNW3HEH64X7
City Chevy Chase	State MD	Zip Code 20815-5502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Town of Somerset, MD	Occupation (for Individual) Mayor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sloan, Stanley, J., ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2016
Mailing Address 38 Garrison Ave # 1		Transaction ID : VNW3HESSK90
City Jersey City	State NJ	Zip Code 07306-5616
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Family Equality Council	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 0.00	Earmarked for HILLARY FOR AMERICA

SUBTOTAL of Receipts This Page (optional).....▶	5070.16
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 25 OF 112
	<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)
L PAC

A. Smith, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 Webster St
 City Newport State RI Zip Code 02840-4031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : VNW3HEH6398
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Stanley, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21814 C St 200 Berger rd
 City Rehoboth Beach State DE Zip Code 19971-8401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Oral Surgeon
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : VNW3HESNGP2
 Amount of Each Receipt this Period 100.00
 Memo Item
 Earmarked for HILLARY FOR AMERICA

C. Sturtz, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1676 10th St
 City Los Osos State CA Zip Code 93402-2227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt **08 / 12 / 2016**
Transaction ID : VNW3HEM3ZX7
 Amount of Each Receipt this Period 72.00
 Memo Item
 Earmarked for ANGIE CRAIG FOR CONGRESS

SUBTOTAL of Receipts This Page (optional).....	422.00
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 26 OF 112
<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)
L PAC

A. Suchors, Cheryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 Mount Vernon St
 City Cambridge State MA Zip Code 02140-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : VNW3HET75B7
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Teslow, Sheryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4949 N 73rd St
 City Lincoln State NE Zip Code 68507-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : VNW3HEP4JZ8
 Amount of Each Receipt this Period
 20.16
 Memo Item
 Earmarked for ANGIE CRAIG FOR CONGRESS

C. Walton, Tammy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 153 Commercial St
 City Provincetown State MA Zip Code 02657-2033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : VNW3HEH63E8
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	770.16
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 27 OF 112
	<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)
L PAC

A. Walton, Tammy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 153 Commercial St
 City Provincetown State MA Zip Code 02657-2033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt **08 / 10 / 2016**
Transaction ID : VNW3HESAEC5
 Amount of Each Receipt this Period - 500.00
 Memo Item

B. Ware, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 Hilliard St
 City Cambridge State MA Zip Code 02138-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Author
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 20 / 2016**
Transaction ID : VNW3HES8Z75
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Ware, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 Hilliard St
 City Cambridge State MA Zip Code 02138-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Author
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : VNW3HETD5S2
 Amount of Each Receipt this Period 1500.00
 Memo Item
 Earmarked for HILLARY FOR AMERICA

SUBTOTAL of Receipts This Page (optional)..... ▶ - 200.00
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 28 OF 112
	<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)
L PAC

A. Ware, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 Hilliard St
 City Cambridge State MA Zip Code 02138-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Author
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : VNW3HET7660
 Amount of Each Receipt this Period 200.00
 Memo Item

B. York, Beverly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Bean Creek Rd Unit 35
 City Scotts Valley State CA Zip Code 95066-4136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 141.12

Date of Receipt 09 / 27 / 2016
Transaction ID : VNW3HESN0V8
 Amount of Each Receipt this Period 20.16
 Memo Item
 Earmarked for HILLARY FOR AMERICA

C. York, Beverly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Bean Creek Rd Unit 35
 City Scotts Valley State CA Zip Code 95066-4136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 141.12

Date of Receipt 09 / 27 / 2016
Transaction ID : VNW3HESNM07
 Amount of Each Receipt this Period 20.16
 Memo Item
 Earmarked for HILLARY FOR AMERICA

SUBTOTAL of Receipts This Page (optional).....	240.32
TOTAL This Period (last page this line number only).....	44513.60

**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 29 OF 112
<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)
L PAC

A. Aronstein, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Moraine St
 City Jamaica Plain State MA Zip Code 02130-4316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HRIA Inc Occupation (for Individual) Adminstrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : VNW3HESS8T9
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

B. Atkins, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 Washington St 135
 City San Diego State CA Zip Code 92103-2110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retured
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2016
Transaction ID : VNW3HES9TG3
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

C. Barreto, Amilcar, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 Hemenway St Apt 102
 City Boston State MA Zip Code 02115-4121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NE Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : VNW3HESS8P8
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	750.00
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 30 OF 112
<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)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bechdel, Alison, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2016
Mailing Address 1915 Notch Rd			Transaction ID : VNW3HESM6M9
City Jericho	State VT	Zip Code 05465-9568	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self		Occupation (for Individual) Cartoonist	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Belot, Jana, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 06 / 2016
Mailing Address 53 Scheurman Ter Apt 711			Transaction ID : VNW3HEH69T4
City Warren	State NJ	Zip Code 07059-7154	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) gotta dance		Occupation (for Individual) self	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 100.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Belot, Jana, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 29 / 2016
Mailing Address 53 Scheurman Ter Apt 711			Transaction ID : VNW3HESTJQ6
City Warren	State NJ	Zip Code 07059-7154	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) gotta dance		Occupation (for Individual) self	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	850.00
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 31 OF 112
<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)
L PAC

A. Bernstein, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 Ellery St
 City Cambridge State MA Zip Code 02138-4355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : VNW3HEH1BN9
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Non-Contribution Account

B. Bettencourt Fox, Jan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address n/a
 City Waltham State MA Zip Code 02657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) best effort Occupation (for Individual) best effort
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : VNW3HEH0GC2
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

C. Bowers Disney, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2511 Hurston Ln NE
 City Washington State DC Zip Code 20018-3805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brady Campaign to Prevent Gun Violence Occupation (for Individual) Organizer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : VNW3HEH18N4
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

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 32 OF 112
<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)
L PAC

A. Bradford, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 Mariners Ln
 City Marblehead State MA Zip Code 01945-3217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Fenway Health Occupation (for Individual) Community Health Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : VNW3HEGKK00
 Amount of Each Receipt this Period 1500.00
 Memo Item
 Non-Contribution Account

B. Brauer, Shelley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 Calvin Rd
 City Jamaica Plain State MA Zip Code 02130-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Shelley Brauer, Ph.D. Occupation (for Individual) Psychotherapist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : VNW3HESS923
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non-Contribution Account

C. Columbia-Walsh, Meg, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 Christopher Columbus Dr
 City Jersey City State NJ Zip Code 07302-3432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wylei, Inc. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : VNW3HEH5CS4
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 33 OF 112
<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)
L PAC

A. Cruz, Ana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4836 W Flamingo Rd
 City Tampa State FL Zip Code 33611-1012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ballard Partners Occupation (for Individual) Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 06 / 2016
Transaction ID : VNW3HEFKZX2
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non-Contribution Account

B. Cull, Rhian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 Westminster St Ste 1500
 City Providence State RI Zip Code 02903-2395
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hinckley Allen Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 09 / 2016
Transaction ID : VNW3HERWJE7
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

C. Davis, Matha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 Woodbridge Drive
 City Woodbridge State NJ Zip Code 07095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) artist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 30 / 2016
Transaction ID : VNW3HEGQZF6
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ▶ 5750.00
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 34 OF 112
<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)
L PAC

A. Dicarlo, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 Wellesley Ave
 City Needham State MA Zip Code 02494-1821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : VNW3HEH6592
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Non-Contribution Account

B. Eychaner, Fred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1645 W Fullerton Ave
 City Chicago State IL Zip Code 60614-1919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Newsweb Corporation Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **09 / 09 / 2016**
Transaction ID : VNW3HERTZQ9
 Amount of Each Receipt this Period 50000.00
 Memo Item
 Non-Contribution Account

C. Felicio, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 Westchester Rd 39
 City Jamaica Plain State MA Zip Code 02130-3451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Community Catalyst Occupation (for Individual) COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : VNW3HEH62F3
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	51500.00
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 35 OF 112
<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)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Finan, Eileen, , ,			Date of Receipt
Mailing Address 11 Frances Rd			<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City Lexington	State MA	Zip Code 02421-7511	Transaction ID : VNW3HESS8X3
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) Harvard		Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gattuso, Chris, , ,			Date of Receipt
Mailing Address 3024 Tilden St NW Apt 502C			<input type="text" value="07"/> / <input type="text" value="08"/> / <input type="text" value="2016"/>
City Washington	State DC	Zip Code 20008-3084	Transaction ID : VNW3HEFRWP1
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer (for Individual) Kilpatrick Townsend & Stockton LLP		Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Gibbon, Mary, , ,			Date of Receipt
Mailing Address 1028 7th St NE			<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>
City Washington	State DC	Zip Code 20002-3652	Transaction ID : VNW3HESV570
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) Willis Towers Watson		Occupation (for Individual) Senior Consulting Actuary	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <input type="text" value="454.00"/>	Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 36 OF 112
<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)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Goodridge, Julie, , ,		Date of Receipt MM / DD / YYYY 09 / 28 / 2016
Mailing Address PO Box 301840		Transaction ID : VNW3HESS980
City Boston	State MA	Zip Code 02130-0016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Northstar Asset	Occupation (for Individual) Investment Advisor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Grainger, Katherine, , ,		Date of Receipt MM / DD / YYYY 07 / 16 / 2016
Mailing Address 56 Court St Apt 2E		Transaction ID : VNW3HEG3NX7
City Brooklyn	State NY	Zip Code 11201-4903
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Civitas Public Affairs	Occupation (for Individual) Consultant	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Grainger, Katherine, , ,		Date of Receipt MM / DD / YYYY 08 / 16 / 2016
Mailing Address 56 Court St Apt 2E		Transaction ID : VNW3HEQ36Q3
City Brooklyn	State NY	Zip Code 11201-4903
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Civitas Public Affairs	Occupation (for Individual) Consultant	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
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 37 OF 112
<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)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Grainger, Katherine, , ,			Date of Receipt MM / DD / YYYY 09 / 16 / 2016
Mailing Address 56 Court St Apt 2E			Transaction ID : VNW3HES42D8
City Brooklyn	State NY	Zip Code 11201-4903	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Civitas Public Affairs		Occupation (for Individual) Consultant	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gray, Mary, , ,			Date of Receipt MM / DD / YYYY 09 / 28 / 2016
Mailing Address 48 Hawthorne St			Transaction ID : VNW3HESS8R4
City Somerville	State MA	Zip Code 02144-2907	Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Microsoft		Occupation (for Individual) Researcher	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Gund, Agnes, , ,			Date of Receipt MM / DD / YYYY 08 / 12 / 2016
Mailing Address 765 Park Ave Apt 14B			Transaction ID : VNW3HEP5MQ7
City New York	State NY	Zip Code 10021-4271	Amount of Each Receipt this Period 25000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Museum of Modern Art		Occupation (for Individual) President Emerita, Art Historian	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 25000.00	

SUBTOTAL of Receipts This Page (optional).....	26600.00
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 38 OF 112
<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)
L PAC

A. Hunt, Kim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5514 S Woodlawn Ave
 City Chicago State IL Zip Code 60637-1636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIDS Foundation of Chicago Occupation (for Individual) Activist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 175.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : VNW3HEGNX32
 Amount of Each Receipt this Period 25.00
 Memo Item
 Non-Contribution Account

B. Hunt, Kim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5514 S Woodlawn Ave
 City Chicago State IL Zip Code 60637-1636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIDS Foundation of Chicago Occupation (for Individual) Activist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : VNW3HER4RF8
 Amount of Each Receipt this Period 25.00
 Memo Item
 Non-Contribution Account

C. Hunt, Kim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5514 S Woodlawn Ave
 City Chicago State IL Zip Code 60637-1636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIDS Foundation of Chicago Occupation (for Individual) Activist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : VNW3HESSKB6
 Amount of Each Receipt this Period 25.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 39 OF 112
<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)
L PAC

A. Huth, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 294 Walnut St
 Apt 2
 City Brookline State MA Zip Code 02445-7570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Huth Architects Occupation (for Individual) Architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : VNW3HEGQZ33
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Non-Contribution Account

B. Jobin, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2709 NE 2nd Ave
 City Wilton Manors State FL Zip Code 33334-1016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Our Fund, Inc Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : VNW3HEH18G4
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

C. Kamio, Mariko, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Elmwood Ave
 City Cambridge State MA Zip Code 02138-4740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Real estate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : VNW3HEH1CHO
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶	6250.00
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 40 OF 112
<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)
L PAC

A. Kaufman, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 Coolidge St
 City Brookline State MA Zip Code 02446-5859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Susan L Kaufman, Consulting Occupation (for Individual) Management consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 09 / 2016**
Transaction ID : VNW3HEHE8P2
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

B. Kight, Kate, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1629 L St NE Unit 303
 City Washington State DC Zip Code 20002-3055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BTC Revolutions Occupation (for Individual) Communications Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.01

Date of Receipt **07 / 12 / 2016**
Transaction ID : VNW3HEFYN41
 Amount of Each Receipt this Period 100.00
 Memo Item
 Non-Contribution Account

C. King, Billie Jean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 Rickland Dr
 City Randolph State NJ Zip Code 07869-4320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) World Team Tennis Occupation (for Individual) Tennis Promoter
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 55000.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : VNW3HEQTNJ6
 Amount of Each Receipt this Period 50000.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	50350.00
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 41 OF 112
<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)
L PAC

A. Kubesch, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1556 NE 37th St
 City Oakland Park State FL Zip Code 33334-4623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self employed Occupation (for Individual) Film Maker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : VNW3HEGZYN5
 Amount of Each Receipt this Period 2500.00
 Memo Item
 Non-Contribution Account

B. Lanser, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 Kirkland St
 City Cambridge State MA Zip Code 02138-2039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brandeis University Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : VNW3HESQZW7
 Amount of Each Receipt this Period 300.00
 Memo Item
 Non-Contribution Account

C. Layng, Pamela, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 248 Cortez Rd
 City West Palm Beach State FL Zip Code 33405-4106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PJL Associates Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : VNW3HEG8DP5
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	3300.00
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 42 OF 112
<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)
L PAC

A. Layng, Pamela, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 248 Cortez Rd
 City West Palm Beach State FL Zip Code 33405-4106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PJL Associates Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : VNW3HEGQZE8
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Non-Contribution Account

B. Lefkovitz, Lori, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 153 Brookline St
 City Chestnut Hill State MA Zip Code 02467-3059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northeastern Occupation (for Individual) professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : VNW3HESS8S1
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

C. Mandel, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 Nordic Trl Asheville
 City Asheville State NC Zip Code 28804-1970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) N/A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 8000.00

Date of Receipt **07 / 23 / 2016**
Transaction ID : VNW3HEGBCX1
 Amount of Each Receipt this Period 8000.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶ 9250.00
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 43 OF 112
<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)
L PAC

A. Nicastro, Laurent, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 Crepe Myrtle Cir
 City Apopka State FL Zip Code 32712-2655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Society Shopping, LLC Occupation (for Individual) Sec/Treas
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : VNW3HEH0GE7
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

B. Peterpaul, Luanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Rivergate Way
 City Long Branch State NJ Zip Code 07740-7800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Peterpaul Law, LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **09 / 16 / 2016**
Transaction ID : VNW3HES42B2
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non-Contribution Account

C. Peterpaul, Luanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Rivergate Way
 City Long Branch State NJ Zip Code 07740-7800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Peterpaul Law, LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **09 / 16 / 2016**
Transaction ID : VNW3HES42E6
 Amount of Each Receipt this Period 50.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
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 44 OF 112
<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)
L PAC

A. Pile, Kathryn, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16407 John Rowland Trl

City Milton	State DE	Zip Code 19968-3548
----------------	-------------	------------------------

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

Name of Employer (for Individual) Promontory Interfinancial Network	Occupation (for Individual) Chief Risk Officer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2016

Transaction ID : VNW3HEFQVP0

Amount of Each Receipt this Period
2700.00

Memo Item

Non-Contribution Account

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

Mailing Address 238 Pearl St

City Cambridge	State MA	Zip Code 02139-4513
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Wellesley College	Occupation (for Individual) college professor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2016

Transaction ID : VNW3HESS4C0

Amount of Each Receipt this Period
250.00

Memo Item

Non-Contribution Account

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

Mailing Address PO Box 30220

City Fort Lauderdale	State FL	Zip Code 33303-0220
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Alix Ritchie Consulting	Occupation (for Individual) Media Consultant
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
70000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	18	/	2016

Transaction ID : VNW3HEG4W52

Amount of Each Receipt this Period
20000.00

Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	22950.00
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 45 OF 112
<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)
L PAC

A. Rossett, Allison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3683 Albatross St
 City San Diego State CA Zip Code 92103-3923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allison Rossett & Associates Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 20 / 2016**
Transaction ID : VNW3HES9QJ3
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

B. Schaffer, Nan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2414 Tracy PI NW
 City Washington State DC Zip Code 20008-1627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Conservationist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : VNW3HET7500
 Amount of Each Receipt this Period 50000.00
 Memo Item
 Non-Contribution Account

C. Schmidt, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 Michigan Ave
 City Wilmette State IL Zip Code 60091-1931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : VNW3HESR0Z4
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	55250.00
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 46 OF 112
<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)
L PAC

A. Scott, Tuti, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 534
 City Gloucester State MA Zip Code 01931-0534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : VNW3HESS8W5
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

B. Sparks, A., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 Collingwood St
 City San Francisco State CA Zip Code 94114-1907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Masto Foundation Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : VNW3HEGYWN3
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Non-Contribution Account

C. Stier, Sandra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 10th St NE
 City Washington State DC Zip Code 20002-6214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HHS/Administration for Children&Famili Occupation (for Individual) Senior Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 11 / 2016**
Transaction ID : VNW3HEFWHA2
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

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 47 OF 112
<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)
L PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Sweeney, Kate, , ,		Date of Receipt
Mailing Address 18 Hiram Sq		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>
City New Brunswick	State NJ	Zip Code 08901-1270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HESVPJ2
Name of Employer (for Individual) Morgan Stanley		Occupation (for Individual) Financial Advisor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	Amount of Each Receipt this Period <input type="text" value="250.00"/>
		<input type="checkbox"/> Memo Item
		Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Taft, Deb, , ,		Date of Receipt
Mailing Address 161 S Huntington Ave		<input type="text" value="07"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Boston	State MA	Zip Code 02130-4823
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HEGQZ49
Name of Employer (for Individual) lowis lindower searches		Occupation (for Individual) COO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
		<input type="checkbox"/> Memo Item
		Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Teodosio, Laura, , ,		Date of Receipt
Mailing Address 29 Pearl St		<input type="text" value="07"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Provincetown	State MA	Zip Code 02657-1503
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : VNW3HEGQYN2
Name of Employer (for Individual) self		Occupation (for Individual) entrepreneur
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	Amount of Each Receipt this Period <input type="text" value="250.00"/>
		<input type="checkbox"/> Memo Item
		Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 48 OF 112
<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)
L PAC

A. Troyan, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 84 Commercial St
 City Provincetown State MA Zip Code 02657-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 04 / 2016
Transaction ID : VNW3HEH18J0
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non-Contribution Account

B. Troyan, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 84 Commercial St
 City Provincetown State MA Zip Code 02657-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 04 / 2016
Transaction ID : VNW3HEH1CJ8
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non-Contribution Account

C. Vaid, Urvashi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 W End Ave Apt 10C
 City New York State NY Zip Code 10023-3664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5150.00

Date of Receipt 07 / 30 / 2016
Transaction ID : VNW3HEGQZG4
 Amount of Each Receipt this Period 2500.00
 Memo Item
 Non-Contribution Account

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 49 OF 112
<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)
L PAC

A. Wallace, Meg, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 Calebs Ln
 City Rockport State MA Zip Code 01966-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UpHams Health Center Occupation (for Individual) NP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : VNW3HEGQZ25
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

B. Wright, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 633 Commercial St Apt 4
 City Provincetown State MA Zip Code 02657-1731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Genband Occupation (for Individual) telecom executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 05 / 2016**
Transaction ID : VNW3HERJM93
 Amount of Each Receipt this Period 250.00
 Memo Item
 Non-Contribution Account

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	249375.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. First Data		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016	
Mailing Address 1 Western Maryland Pkwy		FEC Identification Number C [] Transaction ID : VNV499T87Y! Amount of Each Disbursement this Period [] 115.69	
City Hagerstown	State MD	Zip Code 21740-5146	Category/ Type []
Purpose of Disbursement Credit card processing fee		Candidate Name	
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. First Data		Date of Disbursement MM / DD / YYYY 09 / 02 / 2016	
Mailing Address 1 Western Maryland Pkwy		FEC Identification Number C [] Transaction ID : VNV499TNFP Amount of Each Disbursement this Period [] 44.76	
City Hagerstown	State MD	Zip Code 21740-5146	Category/ Type []
Purpose of Disbursement Credit card processing fee		Candidate Name	
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. First Data		Date of Disbursement MM / DD / YYYY 09 / 06 / 2016	
Mailing Address 1 Western Maryland Pkwy		FEC Identification Number C [] Transaction ID : VNV499TP4S Amount of Each Disbursement this Period [] 25.00	
City Hagerstown	State MD	Zip Code 21740-5146	Category/ Type []
Purpose of Disbursement Credit card processing fee		Candidate Name	
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)..... ▶		[] 185.45	
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"/> 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)
L PAC

Full Name (Last, First, Middle Initial) A. Goldsmith, Diane, , ,			Date of Disbursement MM / DD / YYYY 07 / 19 / 2016	
Mailing Address 73 Shore Rd			FEC Identification Number C [] Transaction ID : VNV499T7XV	
City Westerly	State RI	Zip Code 02891-4203	Amount of Each Disbursement this Period [] 586.36	
Purpose of Disbursement Reimbursement		Candidate Name	Category/Type 001	
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:		<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Harmon, Curran, Spielberg & Eisenberg, LLC			Date of Disbursement MM / DD / YYYY 09 / 28 / 2016	
Mailing Address 1726 M St NW Ste 600			FEC Identification Number C [] Transaction ID : VNV499TNFZ	
City Washington	State DC	Zip Code 20036-4523	Amount of Each Disbursement this Period [] 290.70	
Purpose of Disbursement Legal services		Candidate Name	Category/Type 001	
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:		<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C.			Date of Disbursement MM / DD / YYYY	
Mailing Address			FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period []	
Purpose of Disbursement		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:		<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 877.06
TOTAL This Period (last page this line number only).....▶	[] 1062.51

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

M M M	/	D D D	/	Y Y Y Y Y
08		23		2016

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00575209
---	-----------

Candidate Name
CRAIG, ANGELA DAWN, , ,

Category/
Type

Transaction ID : VNW3HEM3Z

Amount of Each Disbursement this Period

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

20.16

State: MN District: 02

Earmarked by Donna Johnson
 Memo Item

B. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

M M M	/	D D D	/	Y Y Y Y Y
08		23		2016

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00575209
---	-----------

Candidate Name
CRAIG, ANGELA DAWN, , ,

Category/
Type

Transaction ID : VNW3HEM3Z

Amount of Each Disbursement this Period

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

72.00

State: MN District: 02

Earmarked by Ellen Sturtz
 Memo Item

C. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

M M M	/	D D D	/	Y Y Y Y Y
08		23		2016

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00575209
---	-----------

Candidate Name
CRAIG, ANGELA DAWN, , ,

Category/
Type

Transaction ID : VNW3HEP4J

Amount of Each Disbursement this Period

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

20.16

State: MN District: 02

Earmarked by Sheryl Teslow
 Memo Item

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

112.32

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. ANGIE CRAIG FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 23 / 2016
Mailing Address PO Box 22116		FEC Identification Number C00575209 Transaction ID : VNW3HEP4K
City Eagan	State MN	Zip Code 55122-0116
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 20.16
Candidate Name CRAIG, ANGELA DAWN, , ,		Earmarked by Lynne Eggers
Office Sought: <input checked="" 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: MN	District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. ANGIE CRAIG FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 23 / 2016
Mailing Address PO Box 22116		FEC Identification Number C00575209 Transaction ID : VNW3HEQSZ
City Eagan	State MN	Zip Code 55122-0116
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 20.16
Candidate Name CRAIG, ANGELA DAWN, , ,		Earmarked by Paula Collins
Office Sought: <input checked="" 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: MN	District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. ANGIE CRAIG FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 20 / 2016
Mailing Address PO Box 22116		FEC Identification Number C00575209 Transaction ID : VNW3HES0C
City Eagan	State MN	Zip Code 55122-0116
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 2700.00
Candidate Name CRAIG, ANGELA DAWN, , ,		Earmarked by Laura Ricketts
Office Sought: <input checked="" 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: MN	District: 02	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2740.32
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

M M M	/	D D D	/	Y Y Y Y Y
09		20		2016

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00575209
---	-----------

Candidate Name
CRAIG, ANGELA DAWN, , ,

Category/Type

Transaction ID : VNW3HES2Z

Amount of Each Disbursement this Period

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

20.16

Earmarked by Mary Gillespie
 Memo Item

B. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

M M M	/	D D D	/	Y Y Y Y Y
09		20		2016

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00575209
---	-----------

Candidate Name
CRAIG, ANGELA DAWN, , ,

Category/Type

Transaction ID : VNW3HES2Z

Amount of Each Disbursement this Period

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

100.00

Earmarked by Linda C Joplin
 Memo Item

C. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

M M M	/	D D D	/	Y Y Y Y Y
09		20		2016

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00575209
---	-----------

Candidate Name
CRAIG, ANGELA DAWN, , ,

Category/Type

Transaction ID : VNW3HES30

Amount of Each Disbursement this Period

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

100.00

Earmarked by Linda Serafini
 Memo Item

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

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

220.16

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)
L PAC

Full Name (Last, First, Middle Initial) A. ANGIE CRAIG FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 20 / 2016
Mailing Address PO Box 22116		FEC Identification Number C C00575209 Transaction ID : VNW3HES3V
City Eagan	State MN	Zip Code 55122-0116
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 100.00
Candidate Name CRAIG, ANGELA DAWN, , ,		Earmarked by Jeanne Leszczynski
Office Sought: <input checked="" 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: MN	District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. ANGIE CRAIG FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 20 / 2016
Mailing Address PO Box 22116		FEC Identification Number C C00575209 Transaction ID : VNW3HES3W
City Eagan	State MN	Zip Code 55122-0116
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 20.16
Candidate Name CRAIG, ANGELA DAWN, , ,		Earmarked by Shelley Hyde
Office Sought: <input checked="" 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: MN	District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. ANGIE CRAIG FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 20 / 2016
Mailing Address PO Box 22116		FEC Identification Number C C00575209 Transaction ID : VNV499TP4N
City Eagan	State MN	Zip Code 55122-0116
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name CRAIG, ANGELA DAWN, , ,		Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 02	

SUBTOTAL of Disbursements This Page (optional).....▶	2620.16
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 22116

City Eagan State MN Zip Code 55122-0116

Purpose of Disbursement
Conduit Contribution

Candidate Name
CRAIG, ANGELA DAWN, , ,

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

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number
C C00575209
Transaction ID : VNW3HETD5
Amount of Each Disbursement this Period
2000.00
Earmarked by Alix L Ritchie
 Memo Item

B. CAIN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1523

City Bangor State ME Zip Code 04402-1523

Purpose of Disbursement
Conduit Contribution

Candidate Name
CAIN, EMILY, , ,

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

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number
C C00546077
Transaction ID : VNW3HETD5I
Amount of Each Disbursement this Period
2000.00
Earmarked by Alix L Ritchie
 Memo Item

C. CAIN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1523

City Bangor State ME Zip Code 04402-1523

Purpose of Disbursement
Contribution

Candidate Name
CAIN, EMILY, , ,

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 29 / 2016

FEC Identification Number
C C00546077
Transaction ID : VNV499TP4F
Amount of Each Disbursement this Period
2000.00
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. CATHERINE CORTEZ MASTO FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 8020 S Rainbow Blvd
100-112

M M M	/	D D D	/	Y Y Y Y Y
09		21		2016

City Las Vegas State NV Zip Code 89139-6483

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00575548
---	-----------

Candidate Name
MASTO, CATHERINE CORTEZ, , ,

Category/
Type

Transaction ID : VNW3HETD5
Amount of Each Disbursement this Period

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

2500.00

Earmarked by Alix L Ritchie
 Memo Item

B. CATHERINE CORTEZ MASTO FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 8020 S Rainbow Blvd
100-112

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

City Las Vegas State NV Zip Code 89139-6483

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00575548
---	-----------

Candidate Name
MASTO, CATHERINE CORTEZ, , ,

Category/
Type

Transaction ID : VNV499TP4P
Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NV District: 00

2500.00

Memo Item

C. DEBORAH ROSS FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 28258

M M M	/	D D D	/	Y Y Y Y Y
09		21		2016

City Raleigh State NC Zip Code 27611-8258

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00589820
---	-----------

Candidate Name
ROSS, DEBORAH K, , ,

Category/
Type

Transaction ID : VNW3HETD5
Amount of Each Disbursement this Period

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

2500.00

Earmarked by Alix L Ritchie
 Memo Item

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

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

2500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)
L PAC

A. DENISE JUNEAU FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 563

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

City Helena State MT Zip Code 59624-0563

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00591289
---	-----------

Candidate Name
JUNEAU, DENISE, , ,

Category/
Type

Transaction ID : VNV499TNFC

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MT District: 01

2500.00

Memo Item

B. DENISE JUNEAU FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 563

M M M	/	D D D	/	Y Y Y Y Y
09		21		2016

City Helena State MT Zip Code 59624-0563

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00591289
---	-----------

Candidate Name
JUNEAU, DENISE, , ,

Category/
Type

Transaction ID : VNW3HETD5I

Amount of Each Disbursement this Period

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

2000.00

Earmarked by Alix L Ritchie

Memo Item

C. DENISE JUNEAU FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 563

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

City Helena State MT Zip Code 59624-0563

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00591289
---	-----------

Candidate Name
JUNEAU, DENISE, , ,

Category/
Type

Transaction ID : VNW3HESTM

Amount of Each Disbursement this Period

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

2700.00

Earmarked by Laura Ricketts

Memo Item

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

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

5200.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)
L PAC

Full Name (Last, First, Middle Initial) A. Friends of Patrick Murphy		Date of Disbursement MM / DD / YYYY 09 / 16 / 2016
Mailing Address 4521 Pga Blvd # 412		FEC Identification Number C Transaction ID : VNV499TNGP Amount of Each Disbursement this Period 2500.00
City Palm Beach Gardens	State FL	
Purpose of Disbursement Contribution	Zip Code 33418-3997	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Friends of Patrick Murphy		Date of Disbursement MM / DD / YYYY 09 / 29 / 2016
Mailing Address 4521 Pga Blvd # 412		FEC Identification Number C Transaction ID : VNV499TNGP Amount of Each Disbursement this Period 2500.00
City Palm Beach Gardens	State FL	
Purpose of Disbursement Contribution	Zip Code 33418-3997	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GREGORY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 29 / 2016
Mailing Address PO Box 478		FEC Identification Number C C00578260 Transaction ID : VNV499TNF) Amount of Each Disbursement this Period 2000.00
City Amityville	State NY	
Purpose of Disbursement Contribution	Zip Code 11701-0478	Memo Item <input type="checkbox"/>
Candidate Name GREGORY, DUWAYNE, , ,	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 02		

SUBTOTAL of Disbursements This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. HILLARY ACTION FUND			Date of Disbursement MM / DD / YYYY 07 / 18 / 2016	
Mailing Address PO Box 5256			FEC Identification Number C00619411 Transaction ID : VNV499T7XZ	
City New York	State NY	Zip Code 10185-5256	Amount of Each Disbursement this Period 10000.00	
Purpose of Disbursement Contribution		Category/Type 011	Memo Item <input type="checkbox"/>	
Candidate Name HILLARY ACTION FUND		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) B. HILLARY FOR AMERICA			Date of Disbursement MM / DD / YYYY 09 / 29 / 2016	
Mailing Address PO Box 5256			FEC Identification Number C00575795 Transaction ID : VNW3HESM1	
City New York	State NY	Zip Code 10185-5256	Amount of Each Disbursement this Period 20.16 Earmarked by Kate Kight	
Purpose of Disbursement Conduit Contribution		Category/Type	Memo Item <input type="checkbox"/>	
Candidate Name CLINTON, HILLARY RODHAM, , ,		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: 00 District: 00			

Full Name (Last, First, Middle Initial) C. HILLARY FOR AMERICA			Date of Disbursement MM / DD / YYYY 09 / 29 / 2016	
Mailing Address PO Box 5256			FEC Identification Number C00575795 Transaction ID : VNW3HESM1	
City New York	State NY	Zip Code 10185-5256	Amount of Each Disbursement this Period 20.16 Earmarked by Elizabeth Shipp	
Purpose of Disbursement Conduit Contribution		Category/Type	Memo Item <input type="checkbox"/>	
Candidate Name CLINTON, HILLARY RODHAM, , ,		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: 00 District: 00			

SUBTOTAL of Disbursements This Page (optional).....▶	10040.32
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. HILLARY FOR AMERICA		Date of Disbursement MM / DD / YYYY 09 / 29 / 2016
Mailing Address PO Box 5256		FEC Identification Number C C00575795 Transaction ID : VNW3HESN0
City New York	State NY	Zip Code 10185-5256
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 20.16
Candidate Name CLINTON, HILLARY RODHAM, , ,		Earmarked by Beverly York
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item
State: 00	District: 00	

Full Name (Last, First, Middle Initial) B. HILLARY FOR AMERICA		Date of Disbursement MM / DD / YYYY 09 / 29 / 2016
Mailing Address PO Box 5256		FEC Identification Number C C00575795 Transaction ID : VNW3HESNG
City New York	State NY	Zip Code 10185-5256
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 100.00
Candidate Name CLINTON, HILLARY RODHAM, , ,		Earmarked by Christine Stanley
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item
State: 00	District: 00	

Full Name (Last, First, Middle Initial) C. HILLARY FOR AMERICA		Date of Disbursement MM / DD / YYYY 09 / 29 / 2016
Mailing Address PO Box 5256		FEC Identification Number C C00575795 Transaction ID : VNW3HESN0
City New York	State NY	Zip Code 10185-5256
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 20.16
Candidate Name CLINTON, HILLARY RODHAM, , ,		Earmarked by Beverly York
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item
State: 00	District: 00	

SUBTOTAL of Disbursements This Page (optional).....▶	140.32
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. HILLARY FOR AMERICA		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016
Mailing Address PO Box 5256		FEC Identification Number C00575795 Transaction ID : VNW3HETD5
City New York	State NY	Zip Code 10185-5256
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 1500.00
Candidate Name CLINTON, HILLARY RODHAM, , ,		Earmarked by Susan Ware
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: 00	District: 00	

Full Name (Last, First, Middle Initial) B. HILLARY FOR AMERICA		Date of Disbursement MM / DD / YYYY 09 / 29 / 2016
Mailing Address PO Box 5256		FEC Identification Number C00575795 Transaction ID : VNW3HESSK
City New York	State NY	Zip Code 10185-5256
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 50.00
Candidate Name CLINTON, HILLARY RODHAM, , ,		Earmarked by Stanley J Sloan
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: 00	District: 00	

Full Name (Last, First, Middle Initial) C. KAMALA HARRIS FOR SENATE		Date of Disbursement MM / DD / YYYY 08 / 03 / 2016
Mailing Address 777 S Figueroa St Ste 4050		FEC Identification Number C00571919 Transaction ID : VNW3HEG8N
City Los Angeles	State CA	Zip Code 90017-5864
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name HARRIS, KAMALA D, , ,		Earmarked by Susan Atkins
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 00	

SUBTOTAL of Disbursements This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. KAMALA HARRIS FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 777 S Figueroa St
Ste 4050

M M M	/	D D D	/	Y Y Y Y Y
09		21		2016

City Los Angeles State CA Zip Code 90017-5864

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00571919
---	-----------

Candidate Name
HARRIS, KAMALA D, , ,

Category/
Type

Transaction ID : VNW3HETD5

Amount of Each Disbursement this Period

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

2016	1000.00
------	---------

State: CA District: 00

Earmarked by Alix L Ritchie

Memo Item

B. KAMALA HARRIS FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 777 S Figueroa St
Ste 4050

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

City Los Angeles State CA Zip Code 90017-5864

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00571919
---	-----------

Candidate Name
HARRIS, KAMALA D, , ,

Category/
Type

Transaction ID : VNV499TNG2

Amount of Each Disbursement this Period

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

2016	2500.00
------	---------

State: CA District: 00

Memo Item

C. KATIE MCGINTY FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22447

M M M	/	D D D	/	Y Y Y Y Y
09		21		2016

City Philadelphia State PA Zip Code 19110-2447

FEC Identification Number

Purpose of Disbursement
Conduit Contribution

C	C00582809
---	-----------

Candidate Name
MCGINTY, KATHLEEN ALANA, , ,

Category/
Type

Transaction ID : VNW3HETD5

Amount of Each Disbursement this Period

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

2016	2500.00
------	---------

State: PA District: 00

Earmarked by Alix L Ritchie

Memo Item

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

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. KIRKPATRICK FOR ARIZONA			Date of Disbursement M M M / D D D / Y Y Y Y Y 09 / 21 / 2016	
Mailing Address PO Box 12011				
City Casa Grande	State AZ	Zip Code 85130-0549	FEC Identification Number C C00437293 Transaction ID : VNW3HETD5 Amount of Each Disbursement this Period 2000.00 Earmarked by Alix L Ritchie	
Purpose of Disbursement Conduit Contribution			Category/Type	
Candidate Name KIRKPATRICK, ANN, , ,				
Office Sought: <input checked="" 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) ▼		<input checked="" type="checkbox"/> Memo Item	
State: AZ District: 01				

Full Name (Last, First, Middle Initial) B. KIRKPATRICK FOR ARIZONA			Date of Disbursement M M M / D D D / Y Y Y Y Y 09 / 29 / 2016	
Mailing Address PO Box 12011				
City Casa Grande	State AZ	Zip Code 85130-0549	FEC Identification Number C C00437293 Transaction ID : VNV499TNG6 Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Contribution			Category/Type	
Candidate Name KIRKPATRICK, ANN, , ,				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		<input type="checkbox"/> Memo Item	
State: AZ District: 01				

Full Name (Last, First, Middle Initial) C. MAGGIE FOR NH			Date of Disbursement M M M / D D D / Y Y Y Y Y 09 / 13 / 2016	
Mailing Address PO Box 298				
City Concord	State NH	Zip Code 03302-0298	FEC Identification Number C C00588772 Transaction ID : VNW3HERX6 Amount of Each Disbursement this Period 2700.00 Earmarked by Laura Ricketts	
Purpose of Disbursement Conduit Contribution			Category/Type	
Candidate Name HASSAN, MARGARET WOOD, , ,				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: NH District: 00				

SUBTOTAL of Disbursements This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. MAGGIE FOR NH			Date of Disbursement MM / DD / YYYY 09 / 21 / 2016	
Mailing Address PO Box 298			FEC Identification Number C00588772 Transaction ID : VNW3HETD5 Amount of Each Disbursement this Period 2500.00 Earmarked by Alix L Ritchie	
City Concord	State NH	Zip Code 03302-0298	Category/Type	
Purpose of Disbursement Conduit Contribution			Memo Item <input checked="" type="checkbox"/>	
Candidate Name HASSAN, MARGARET WOOD, , ,				
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NH	District: 00			

Full Name (Last, First, Middle Initial) B. MAGGIE FOR NH			Date of Disbursement MM / DD / YYYY 09 / 29 / 2016	
Mailing Address PO Box 298			FEC Identification Number C00588772 Transaction ID : VNV499TNGA Amount of Each Disbursement this Period 2500.00	
City Concord	State NH	Zip Code 03302-0298	Category/Type	
Purpose of Disbursement Contribution			Memo Item <input type="checkbox"/>	
Candidate Name HASSAN, MARGARET WOOD, , ,				
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NH	District: 00			

Full Name (Last, First, Middle Initial) C. MAGGIE FOR NH			Date of Disbursement MM / DD / YYYY 09 / 30 / 2016	
Mailing Address PO Box 298			FEC Identification Number C00588772 Transaction ID : VNW3HESX5 Amount of Each Disbursement this Period 2700.00 Earmarked by Laura Ricketts	
City Concord	State NH	Zip Code 03302-0298	Category/Type	
Purpose of Disbursement Conduit Contribution			Memo Item <input type="checkbox"/>	
Candidate Name HASSAN, MARGARET WOOD, , ,				
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NH	District: 00			

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

5200.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

A. MCEACHIN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 8092

City Richmond State VA Zip Code 23223-0092

Purpose of Disbursement Contribution

Candidate Name
MCEACHIN, ASTON DONALD MR., , ,

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

State: VA District: 04

Date of Disbursement: 09 / 29 / 2016

FEC Identification Number: **C00610964**
Transaction ID : **VNV499TNGE**
Amount of Each Disbursement this Period: 2000.00

Memo Item

B. RUSS FOR WISCONSIN

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 620061

City Middleton State WI Zip Code 53562-0061

Purpose of Disbursement Conduit Contribution

Candidate Name
FEINGOLD, RUSSELL DANA, , ,

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

State: WI District: 00

Date of Disbursement: 09 / 21 / 2016

FEC Identification Number: **C00578013**
Transaction ID : **VNW3HETD5**
Amount of Each Disbursement this Period: 1000.00
Earmarked by Alix L Ritchie

Memo Item

C. RUSS FOR WISCONSIN

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 620061

City Middleton State WI Zip Code 53562-0061

Purpose of Disbursement Contribution

Candidate Name
FEINGOLD, RUSSELL DANA, , ,

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

State: WI District: 00

Date of Disbursement: 09 / 29 / 2016

FEC Identification Number: **C00578013**
Transaction ID : **VNV499TP4N**
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. TAMMY FOR ILLINOIS		Date of Disbursement MM / DD / YYYY 09 / 21 / 2016
Mailing Address PO Box 10793		FEC Identification Number C C00574889 Transaction ID : VNW3HETD5
City Chicago	State IL	Zip Code 60610-0793
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name DUCKWORTH, L TAMMY, , ,		Earmarked by Alix L Ritchie
Office Sought: <input checked="" 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) ▼	<input checked="" type="checkbox"/> Memo Item
State: IL	District: 00	

Full Name (Last, First, Middle Initial) B. VAL DEMINGS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 21 / 2016
Mailing Address PO Box 536926		FEC Identification Number C C00590489 Transaction ID : VNW3HETD5
City Orlando	State FL	Zip Code 32853-6926
Purpose of Disbursement Conduit Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name DEMINGS, VALDEZ 'VAL', , ,		Earmarked by Alix L Ritchie
Office Sought: <input checked="" 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) ▼	<input checked="" type="checkbox"/> Memo Item
State: FL	District: 10	

Full Name (Last, First, Middle Initial) C. VAL DEMINGS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 29 / 2016
Mailing Address PO Box 536926		FEC Identification Number C C00590489 Transaction ID : VNV499TP4C
City Orlando	State FL	Zip Code 32853-6926
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name DEMINGS, VALDEZ 'VAL', , ,		Earmarked by Alix L Ritchie
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 10	

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

2000.00

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

53023.60

**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"/> 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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement MM / DD / YYYY 09 / 14 / 2016
Mailing Address 4333 Amon Carter Blvd # MD5675		FEC Identification Number C Transaction ID : VNV499TN20 Amount of Each Disbursement this Period 389.40 Non-Contribution Account <input type="checkbox"/> Memo Item
City Fort Worth	State TX	
Zip Code 76155-2605	Purpose of Disbursement Travel	Category/ Type
Candidate Name	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. American Airlines		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 4333 Amon Carter Blvd # MD5675		FEC Identification Number C Transaction ID : VNV499TN21I Amount of Each Disbursement this Period 25.00 Non-Contribution Account <input type="checkbox"/> Memo Item
City Fort Worth	State TX	
Zip Code 76155-2605	Purpose of Disbursement Travel	Category/ Type
Candidate Name	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. Amsterdam Hotels		Date of Disbursement MM / DD / YYYY 08 / 05 / 2016
Mailing Address 226 W 50th St		FEC Identification Number C Transaction ID : VNV499TDGI Amount of Each Disbursement this Period 254.84 Non-Contribution Account <input type="checkbox"/> Memo Item
City New York	State NY	
Zip Code 10019-6702	Purpose of Disbursement Lodging	Category/ Type
Candidate Name	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)..... ▶

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

669.24

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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Aureole Restaurant			Date of Disbursement MM / DD / YYYY 07 / 01 / 2016	
Mailing Address 135 W 42nd St			FEC Identification Number C [REDACTED]	
City New York	State NY	Zip Code 10036-6509	Transaction ID : VNV499T3JV	
Purpose of Disbursement Event space rental		Category/ Type 001	Amount of Each Disbursement this Period 5655.01	
Candidate Name		Non-Contribution Account		
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) ▼		Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) B. Authorize.net			Date of Disbursement MM / DD / YYYY 07 / 05 / 2016	
Mailing Address PO Box 8999			FEC Identification Number C [REDACTED]	
City San Francisco	State CA	Zip Code 94128-8999	Transaction ID : VNV499TAH8	
Purpose of Disbursement Credit card processing fee		Category/ Type	Amount of Each Disbursement this Period 40.70	
Candidate Name		Non-Contribution Account		
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) ▼		Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) C. Authorize.net			Date of Disbursement MM / DD / YYYY 08 / 02 / 2016	
Mailing Address PO Box 8999			FEC Identification Number C [REDACTED]	
City San Francisco	State CA	Zip Code 94128-8999	Transaction ID : VNV499TCB1	
Purpose of Disbursement Credit card processing fee		Category/ Type	Amount of Each Disbursement this Period 40.70	
Candidate Name		Non-Contribution Account		
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) ▼		Memo Item	
State: District:				

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

5736.41

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement MM / DD / YYYY 09 / 02 / 2016
Mailing Address PO Box 8999		FEC Identification Number C [REDACTED] Transaction ID : VNV499TN23
City San Francisco	State CA	Zip Code 94128-8999
Purpose of Disbursement Credit card processing fee		Amount of Each Disbursement this Period 40.70
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016
Mailing Address 700 13th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499T88V
City Washington	State DC	Zip Code 20005-3950
Purpose of Disbursement Bank fee		Amount of Each Disbursement this Period 2168.15
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Bank of America		Date of Disbursement MM / DD / YYYY 08 / 01 / 2016
Mailing Address 700 13th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499TCB1
City Washington	State DC	Zip Code 20005-3950
Purpose of Disbursement Bank fee		Amount of Each Disbursement this Period 811.45
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3020.30
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement MM / DD / YYYY 08 / 05 / 2016
Mailing Address 700 13th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499TDHA
City Washington	State DC	Zip Code 20005-3950
Purpose of Disbursement Bank fee		Amount of Each Disbursement this Period [REDACTED] 15.00
Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement MM / DD / YYYY 08 / 18 / 2016
Mailing Address 700 13th St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499TDHC
City Washington	State DC	Zip Code 20005-3950
Purpose of Disbursement Bank fee		Amount of Each Disbursement this Period [REDACTED] 99.00
Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. BLS Limos		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016
Mailing Address 2401 M St NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499T88V
City Washington	State DC	Zip Code 20037-1408
Purpose of Disbursement Travel		Amount of Each Disbursement this Period [REDACTED] 1919.42
Candidate Name		Category/Type [REDACTED]
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) ▼	Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2033.42
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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

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NAME OF COMMITTEE (In Full)
L PAC

A. BLS Limos

Full Name (Last, First, Middle Initial)

Mailing Address 2401 M St NW

City Washington State DC Zip Code 20037-1408

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2016

FEC Identification Number: C

Transaction ID : VNV499T88X

Amount of Each Disbursement this Period: - 138.91

Memo Item

B. Boston Taxi

Full Name (Last, First, Middle Initial)

Mailing Address 72 Kilmarnock St

City Boston State MA Zip Code 02215-4822

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2016

FEC Identification Number: C

Transaction ID : VNV499T88Y

Amount of Each Disbursement this Period: 174.00

Memo Item

C. Boston Taxi

Full Name (Last, First, Middle Initial)

Mailing Address 72 Kilmarnock St

City Boston State MA Zip Code 02215-4822

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

Transaction ID : VNV499TN28

Amount of Each Disbursement this Period: 42.62

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 77.71

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. BTC Revolutions		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 304 Arlington Rd		FEC Identification Number C [REDACTED] Transaction ID : VNV499T3K2 Amount of Each Disbursement this Period 3139.15
City Brookville	State OH	Zip Code 45309-1323
Purpose of Disbursement Consulting: Social media		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 3139.15
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) ▼	<input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. BTC Revolutions		Date of Disbursement MM / DD / YYYY 07 / 20 / 2016
Mailing Address 304 Arlington Rd		FEC Identification Number C [REDACTED] Transaction ID : VNV499T7XJ Amount of Each Disbursement this Period 10000.00
City Brookville	State OH	Zip Code 45309-1323
Purpose of Disbursement Consulting: Fundraising Services		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 10000.00
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) ▼	<input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. BTC Revolutions		Date of Disbursement MM / DD / YYYY 08 / 09 / 2016
Mailing Address 304 Arlington Rd		FEC Identification Number C [REDACTED] Transaction ID : VNV499TCC Amount of Each Disbursement this Period 5746.22
City Brookville	State OH	Zip Code 45309-1323
Purpose of Disbursement Consulting: Social Media		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 5746.22
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) ▼	<input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	18885.37
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)
A. California Secretary of State

Mailing Address 1500 11th St
Rm 495

City Sacramento State CA Zip Code 95814-5701

Purpose of Disbursement Filing fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 06 / 2016

FEC Identification Number: C
Transaction ID : VNV499TESD
Amount of Each Disbursement this Period: 520.00
Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)
B. Carefirst Bluecross/Blueshield

Mailing Address 840 1st St NE

City Washington State DC Zip Code 20065-0002

Purpose of Disbursement Health Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 11 / 2016

FEC Identification Number: C
Transaction ID : VNV499T88Z
Amount of Each Disbursement this Period: 777.43
Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)
C. Carefirst Bluecross/Blueshield

Mailing Address 840 1st St NE

City Washington State DC Zip Code 20065-0002

Purpose of Disbursement Health Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 08 / 2016

FEC Identification Number: C
Transaction ID : VNV499TCC:
Amount of Each Disbursement this Period: 777.43
Non-Contribution Account Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2074.86

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Carefirst Bluecross/Blueshield

Full Name (Last, First, Middle Initial)

Mailing Address 840 1st St NE

City Washington State DC Zip Code 20065-0002

Purpose of Disbursement Health Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 09 / 2016

FEC Identification Number: C

Transaction ID : VNV499TN2A

Amount of Each Disbursement this Period: 777.43

Memo Item

B. Carr Workplace

Full Name (Last, First, Middle Initial)

Mailing Address 1101 Connecticut Ave NW Ste 450

City Washington State DC Zip Code 20036-4359

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2016

FEC Identification Number: C

Transaction ID : VNV499T890E

Amount of Each Disbursement this Period: 2745.01

Memo Item

C. Carr Workplace

Full Name (Last, First, Middle Initial)

Mailing Address 1101 Connecticut Ave NW Ste 450

City Washington State DC Zip Code 20036-4359

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2016

FEC Identification Number: C

Transaction ID : VNV499TCC!

Amount of Each Disbursement this Period: 2824.67

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6347.11

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)

A. Carr Workplace

Mailing Address 1101 Connecticut Ave NW
Ste 450

City Washington State DC Zip Code 20036-4359

Purpose of Disbursement
Rent

001
Category/
Type

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 Y
09 / 02 / 2016

FEC Identification Number

C
Transaction ID : VNV499TN2B
Amount of Each Disbursement this Period
 2754.58

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

B. ClickMeeting

Mailing Address ul. Arkonska 6

City Gdansk State A4 Zip Code 80387

Purpose of Disbursement
Software

Category/
Type

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 Y
09 / 06 / 2016

FEC Identification Number

C
Transaction ID : VNV499TN2C
Amount of Each Disbursement this Period
 81.37

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

C. Collective Conscience, LLC

Mailing Address 2112 8th St NW
Apt 524

City Washington State DC Zip Code 20001-8208

Purpose of Disbursement
Digital consultanting sevices

001
Category/
Type

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 Y
07 / 01 / 2016

FEC Identification Number

C
Transaction ID : VNV499T3K4
Amount of Each Disbursement this Period
 12377.78

Memo Item Non-Contribution Account

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

15213.73

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Collective Conscience, LLC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2016
Mailing Address 2112 8th St NW Apt 524		FEC Identification Number C Transaction ID : VNV499TCC6 Amount of Each Disbursement this Period 7767.19 Non-Contribution Account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Digital consultant	Zip Code 20001-8208	FEC Identification Number C Transaction ID : VNV499TCC7 Amount of Each Disbursement this Period 237.50 Non-Contribution Account <input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
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) ▼	FEC Identification Number C Transaction ID : VNV499TN2E Amount of Each Disbursement this Period 415.00 Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Collective Conscience, LLC		Date of Disbursement MM / DD / YYYY 08 / 09 / 2016
Mailing Address 2112 8th St NW Apt 524		FEC Identification Number C Transaction ID : VNV499TCC7 Amount of Each Disbursement this Period 237.50 Non-Contribution Account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Digital consultant	Zip Code 20001-8208	FEC Identification Number C Transaction ID : VNV499TN2E Amount of Each Disbursement this Period 415.00 Non-Contribution Account <input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
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) ▼	FEC Identification Number C Transaction ID : VNV499TN2E Amount of Each Disbursement this Period 415.00 Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Collective Conscience, LLC		Date of Disbursement MM / DD / YYYY 09 / 12 / 2016
Mailing Address 2112 8th St NW Apt 524		FEC Identification Number C Transaction ID : VNV499TN2E Amount of Each Disbursement this Period 415.00 Non-Contribution Account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Digital consultant	Zip Code 20001-8208	FEC Identification Number C Transaction ID : VNV499TN2E Amount of Each Disbursement this Period 415.00 Non-Contribution Account <input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
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) ▼	FEC Identification Number C Transaction ID : VNV499TN2E Amount of Each Disbursement this Period 415.00 Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

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

8419.69

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Collective Conscience, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 2112 8th St NW
Apt 524

City Washington State DC Zip Code 20001-8208

Purpose of Disbursement Digital consultant

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 12 / 2016

FEC Identification Number: C

Transaction ID : VNV499TN2E

Amount of Each Disbursement this Period: 6000.00

Memo Item

B. Dentegra

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1850

City Alpharetta State GA Zip Code 30023-1850

Purpose of Disbursement Dental Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 05 / 2016

FEC Identification Number: C

Transaction ID : VNV499T87R:

Amount of Each Disbursement this Period: 39.95

Memo Item

C. Dentegra

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1850

City Alpharetta State GA Zip Code 30023-1850

Purpose of Disbursement Dental Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 18 / 2016

FEC Identification Number: C

Transaction ID : VNV499T87S

Amount of Each Disbursement this Period: 39.95

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6079.90

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Dentegra		Date of Disbursement MM / DD / YYYY 08 / 19 / 2016
Mailing Address PO Box 1850		FEC Identification Number C [REDACTED] Transaction ID : VNV499TCC9
City Alpharetta	State GA	Zip Code 30023-1850
Purpose of Disbursement Dental Insurance		Amount of Each Disbursement this Period [REDACTED] 39.95
Candidate Name		Non-Contribution Account <input type="checkbox"/> Memo Item
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. Dentegra		Date of Disbursement MM / DD / YYYY 09 / 19 / 2016
Mailing Address PO Box 1850		FEC Identification Number C [REDACTED] Transaction ID : VNV499TNFD
City Alpharetta	State GA	Zip Code 30023-1850
Purpose of Disbursement Dental Insurance		Amount of Each Disbursement this Period [REDACTED] 39.95
Candidate Name		Non-Contribution Account <input type="checkbox"/> Memo Item
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. Direct Printing Impressions		Date of Disbursement MM / DD / YYYY 08 / 11 / 2016
Mailing Address 33 Fairfield Pl		FEC Identification Number C [REDACTED] Transaction ID : VNV499TCCI
City West Caldwell	State NJ	Zip Code 07006-6206
Purpose of Disbursement Printing		Amount of Each Disbursement this Period [REDACTED] 420.00
Candidate Name		Non-Contribution Account <input type="checkbox"/> Memo Item
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).....▶	[REDACTED] 499.90
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Elephant Walk Inn		Date of Disbursement MM / DD / YYYY 08 / 01 / 2016
Mailing Address 156 Bradford St		FEC Identification Number C [REDACTED] Transaction ID : VNV499TCCC Amount of Each Disbursement this Period [REDACTED] 1051.08 Non-Contribution Account <input type="checkbox"/> Memo Item
City Provincetown	State MA	Zip Code 02657-2343
Purpose of Disbursement Lodging		Category/ Type [REDACTED]
Candidate Name		
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. Enterprise Rent a Car		Date of Disbursement MM / DD / YYYY 07 / 25 / 2016
Mailing Address 801 W Dekalb Pike		FEC Identification Number C [REDACTED] Transaction ID : VNV499T87T Amount of Each Disbursement this Period [REDACTED] 357.39 Non-Contribution Account <input type="checkbox"/> Memo Item
City King Of Prussia	State PA	Zip Code 19406-3172
Purpose of Disbursement Travel		Category/ Type 001
Candidate Name		
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. Enterprise Rent a Car		Date of Disbursement MM / DD / YYYY 07 / 26 / 2016
Mailing Address 801 W Dekalb Pike		FEC Identification Number C [REDACTED] Transaction ID : VNV499T87V Amount of Each Disbursement this Period [REDACTED] - 142.04 Non-Contribution Account <input type="checkbox"/> Memo Item
City King Of Prussia	State PA	Zip Code 19406-3172
Purpose of Disbursement Travel		Category/ Type 001
Candidate Name		
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).....▶	[REDACTED] 1266.43
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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

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NAME OF COMMITTEE (In Full)
L PAC

A. Enterprise Rent a Car

Full Name (Last, First, Middle Initial)

Mailing Address 801 W Dekalb Pike

City King Of Prussia State PA Zip Code 19406-3172

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2016

FEC Identification Number: C

Transaction ID : VNV499TCCE

Amount of Each Disbursement this Period: 213.31

Memo Item

B. Enterprise Rent a Car

Full Name (Last, First, Middle Initial)

Mailing Address 801 W Dekalb Pike

City King Of Prussia State PA Zip Code 19406-3172

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 06 / 2016

FEC Identification Number: C

Transaction ID : VNV499TNFF

Amount of Each Disbursement this Period: 110.00

Memo Item

C. Evert, Patricia, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 550 W 45th St Apt 704

City New York State NY Zip Code 10036-3786

Purpose of Disbursement Event expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2016

FEC Identification Number: C

Transaction ID : VNV499T3K0

Amount of Each Disbursement this Period: 1637.13

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1960.44

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Feminist Majority Foundation

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Wilson Blvd

City
Arlington

State
VA

Zip Code
22209-2511

Purpose of Disbursement
Donation

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : VNV499T87X
Amount of Each Disbursement this Period

Non-Contribution Account

Memo Item

B. First Data

Full Name (Last, First, Middle Initial)

Mailing Address 1 Western Maryland Pkwy

City
Hagerstown

State
MD

Zip Code
21740-5146

Purpose of Disbursement
Credit card processing fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : VNV499TNFQ
Amount of Each Disbursement this Period

Non-Contribution Account

Memo Item

C. Fredericks, Laura, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 130 Barrow St
Apt 215

City
New York

State
NY

Zip Code
10014-2857

Purpose of Disbursement
Consulting

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : VNV499TNGI
Amount of Each Disbursement this Period

Non-Contribution Account

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Amtrak

Full Name (Last, First, Middle Initial)

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement Train travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 19 / 2016

FEC Identification Number: C

Transaction ID : VNV499T7XW

Amount of Each Disbursement this Period: 299.20

* Non-Contribution Account

Memo Item

B. Renaissance New York Midtown Hotel

Full Name (Last, First, Middle Initial)

Mailing Address 218 W 35th St

City New York State NY Zip Code 10001-2562

Purpose of Disbursement Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 19 / 2016

FEC Identification Number: C

Transaction ID : VNV499T7XYI

Amount of Each Disbursement this Period: 287.16

* Non-Contribution Account

Memo Item

C. Google

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Internet

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 06 / 2016

FEC Identification Number: C

Transaction ID : VNV499T880

Amount of Each Disbursement this Period: 35.00

Non-Contribution Account

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 35.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement MM / DD / YYYY 08 / 08 / 2016
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] Transaction ID : VNV499TCCF Amount of Each Disbursement this Period [REDACTED] 35.00 Non-Contribution Account <input type="checkbox"/> Memo Item
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Internet		Category/ Type [REDACTED]
Candidate Name		
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. Google		Date of Disbursement MM / DD / YYYY 09 / 06 / 2016
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] Transaction ID : VNV499TNFR Amount of Each Disbursement this Period [REDACTED] 35.00 Non-Contribution Account <input type="checkbox"/> Memo Item
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Internet		Category/ Type [REDACTED]
Candidate Name		
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. Grant, Jaime, M, ,		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 623 Rock Creek Rd NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499T3K1 Amount of Each Disbursement this Period [REDACTED] 9975.00 Non-Contribution Account <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20010
Purpose of Disbursement Consulting: Fundraising Services		Category/ Type 001
Candidate Name		
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)..... ▶

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

[REDACTED] 10045.00
[REDACTED]

**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"/> 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

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NAME OF COMMITTEE (In Full)
L PAC

A. Grant, Jaime, M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 623 Rock Creek Rd NW

City Washington State DC Zip Code 20010

Purpose of Disbursement Consulting: Fundraising Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 08 / 09 / 2016

FEC Identification Number C

Transaction ID : VNV499TCCN

Amount of Each Disbursement this Period 3259.00

Memo Item

B. Harmon, Curran, Spielberg & Eisenberg, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1726 M St NW Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement Legal services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 07 / 01 / 2016

FEC Identification Number C

Transaction ID : VNV499T3JP

Amount of Each Disbursement this Period 2707.53

Memo Item

C. Harmon, Curran, Spielberg & Eisenberg, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1726 M St NW Ste 600

City Washington State DC Zip Code 20036-4523

Purpose of Disbursement Legal services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 08 / 09 / 2016

FEC Identification Number C

Transaction ID : VNV499TCCI

Amount of Each Disbursement this Period 555.23

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6521.76

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Harmon, Curran, Spielberg & Eisenberg, LLC			Date of Disbursement MM / DD / YYYY 08 / 26 / 2016	
Mailing Address 1726 M St NW Ste 600			FEC Identification Number C [REDACTED] Transaction ID : VNV499TD3S	
City Washington	State DC	Zip Code 20036-4523	Amount of Each Disbursement this Period 872.10	
Purpose of Disbursement Legal services		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Non-Contribution Account <input type="checkbox"/>	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type 001	

Full Name (Last, First, Middle Initial) B. Harmon, Curran, Spielberg & Eisenberg, LLC			Date of Disbursement MM / DD / YYYY 09 / 28 / 2016	
Mailing Address 1726 M St NW Ste 600			FEC Identification Number C [REDACTED] Transaction ID : VNV499TNFY	
City Washington	State DC	Zip Code 20036-4523	Amount of Each Disbursement this Period 1745.59	
Purpose of Disbursement Legal services		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Non-Contribution Account <input type="checkbox"/>	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type 001	

Full Name (Last, First, Middle Initial) C. Hyatt Hotels			Date of Disbursement MM / DD / YYYY 07 / 21 / 2016	
Mailing Address 71 S Wacker Dr FI 12			FEC Identification Number C [REDACTED] Transaction ID : VNV499T881	
City Chicago	State IL	Zip Code 60606-4637	Amount of Each Disbursement this Period 3875.04	
Purpose of Disbursement Lodging		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Non-Contribution Account <input type="checkbox"/>	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type 001	

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

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

6492.73
[REDACTED]

**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"/> 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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Hyatt Hotels		Date of Disbursement MM / DD / YYYY 07 / 22 / 2016
Mailing Address 71 S Wacker Dr FI 12		FEC Identification Number C Transaction ID : VNV499T882! Amount of Each Disbursement this Period 1291.68 Non-Contribution Account <input type="checkbox"/> Memo Item
City Chicago	State IL	
Zip Code 60606-4637	Purpose of Disbursement Lodging	Category/ Type 001
Candidate Name	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. Hyatt Hotels		Date of Disbursement MM / DD / YYYY 07 / 28 / 2016
Mailing Address 71 S Wacker Dr FI 12		FEC Identification Number C Transaction ID : VNV499TAHA Amount of Each Disbursement this Period 429.84 Non-Contribution Account <input type="checkbox"/> Memo Item
City Chicago	State IL	
Zip Code 60606-4637	Purpose of Disbursement Lodging	Category/ Type 001
Candidate Name	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. Hyatt Hotels		Date of Disbursement MM / DD / YYYY 08 / 02 / 2016
Mailing Address 71 S Wacker Dr FI 12		FEC Identification Number C Transaction ID : VNV499TCCI Amount of Each Disbursement this Period 1002.74 Non-Contribution Account <input type="checkbox"/> Memo Item
City Chicago	State IL	
Zip Code 60606-4637	Purpose of Disbursement Lodging	Category/ Type 001
Candidate Name	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).....▶	2724.26
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Kaiser HPS

Full Name (Last, First, Middle Initial)

Mailing Address 1615 L St NW

City Washington State DC Zip Code 20036-5610

Purpose of Disbursement Health Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2016

FEC Identification Number: C

Transaction ID : VNV499TCCF

Amount of Each Disbursement this Period: 209.66

Memo Item

B. Kaiser HPS

Full Name (Last, First, Middle Initial)

Mailing Address 1615 L St NW

City Washington State DC Zip Code 20036-5610

Purpose of Disbursement Health Insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2016

FEC Identification Number: C

Transaction ID : VNV499TDHE

Amount of Each Disbursement this Period: 209.66

Memo Item

C. Karlsberg, Michele, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 101 Lexington Ave

City Staten Island State NY Zip Code 10302-2025

Purpose of Disbursement Event marketing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2016

FEC Identification Number: C

Transaction ID : VNV499T3JZ

Amount of Each Disbursement this Period: 3000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3419.32

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Khoo, Emily, , ,		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 405 W 55th St		FEC Identification Number C Transaction ID : VNV499T3K3 Amount of Each Disbursement this Period 600.00 Non-Contribution Account <input type="checkbox"/> Memo Item
City New York	State NY	
Purpose of Disbursement Event expense - design	Zip Code 10019-4402	FEC Identification Number C Transaction ID : VNV499T3HX Amount of Each Disbursement this Period 1278.15 Non-Contribution Account <input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
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) ▼	FEC Identification Number C Transaction ID : VNV499T3K5 Amount of Each Disbursement this Period 39.83 Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Kight, Kate, , ,		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 1629 L St NE Unit 303		FEC Identification Number C Transaction ID : VNV499T3K5 Amount of Each Disbursement this Period 1917.98 Non-Contribution Account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Payroll	Zip Code 20002-3055	FEC Identification Number C Transaction ID : VNV499T3K5 Amount of Each Disbursement this Period 39.83 Non-Contribution Account <input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
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) ▼	FEC Identification Number C Transaction ID : VNV499T3K5 Amount of Each Disbursement this Period 39.83 Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Kight, Kate, , ,		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 1629 L St NE Unit 303		FEC Identification Number C Transaction ID : VNV499T3K5 Amount of Each Disbursement this Period 39.83 Non-Contribution Account <input type="checkbox"/> Memo Item
City Washington	State DC	
Purpose of Disbursement Reimbursemnt, unitemized	Zip Code 20002-3055	FEC Identification Number C Transaction ID : VNV499T3K5 Amount of Each Disbursement this Period 39.83 Non-Contribution Account <input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
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) ▼	FEC Identification Number C Transaction ID : VNV499T3K5 Amount of Each Disbursement this Period 39.83 Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1917.98
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Kight, Kate, , ,			Date of Disbursement MM / DD / YYYY 07 / 15 / 2016	
Mailing Address 1629 L St NE Unit 303			FEC Identification Number C [REDACTED] Transaction ID : VNV499T76Y Amount of Each Disbursement this Period [REDACTED] 1278.14	
City Washington	State DC	Zip Code 20002-3055	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Payroll		Category/Type 001	Non-Contribution Account <input type="checkbox"/>	
Candidate Name	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. Kight, Kate, , ,			Date of Disbursement MM / DD / YYYY 07 / 29 / 2016	
Mailing Address 1629 L St NE Unit 303			FEC Identification Number C [REDACTED] Transaction ID : VNV499TAHB Amount of Each Disbursement this Period [REDACTED] 1278.14	
City Washington	State DC	Zip Code 20002-3055	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Payroll		Category/Type 001	Non-Contribution Account <input type="checkbox"/>	
Candidate Name	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. Kight, Kate, , ,			Date of Disbursement MM / DD / YYYY 08 / 11 / 2016	
Mailing Address 1629 L St NE Unit 303			FEC Identification Number C [REDACTED] Transaction ID : VNV499TCCI Amount of Each Disbursement this Period [REDACTED] 138.17	
City Washington	State DC	Zip Code 20002-3055	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Travel reimbursemnt (all unitemized)		Category/Type 001	Non-Contribution Account <input type="checkbox"/>	
Candidate Name	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)..... ▶

2694.45

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Kight, Kate, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1629 L St NE
Unit 303

City Washington State DC Zip Code 20002-3055

Purpose of Disbursement Payroll 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement 08 / 15 / 2016

FEC Identification Number **C**

Transaction ID : **VNV499TB92**

Amount of Each Disbursement this Period 1278.14

Memo Item

B. Kight, Kate, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1629 L St NE
Unit 303

City Washington State DC Zip Code 20002-3055

Purpose of Disbursement Payroll 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement 08 / 30 / 2016

FEC Identification Number **C**

Transaction ID : **VNV499TDG8**

Amount of Each Disbursement this Period 1278.14

Memo Item

C. Kight, Kate, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1629 L St NE
Unit 303

City Washington State DC Zip Code 20002-3055

Purpose of Disbursement Payroll 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement 09 / 15 / 2016

FEC Identification Number **C**

Transaction ID : **VNV499TNG**

Amount of Each Disbursement this Period 1278.14

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3834.42

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Kight, Kate, , ,			Date of Disbursement MM / DD / YYYY 09 / 30 / 2016	
Mailing Address 1629 L St NE Unit 303			FEC Identification Number C	
City Washington	State DC	Zip Code 20002-3055	Transaction ID : VNV499TNG3	
Purpose of Disbursement Payroll		Category/ Type 001	Amount of Each Disbursement this Period 1278.14	
Candidate Name			Non-Contribution Account <input type="checkbox"/> Memo Item	
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. Life in Provincetown, Inc			Date of Disbursement MM / DD / YYYY 07 / 01 / 2016	
Mailing Address PO Box 1446			FEC Identification Number C	
City Provincetown	State MA	Zip Code 02657-5446	Transaction ID : VNV499T3JT!	
Purpose of Disbursement Event expense		Category/ Type 001	Amount of Each Disbursement this Period 300.00	
Candidate Name			Non-Contribution Account <input type="checkbox"/> Memo Item	
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. Mavrikakis, Kathy, , ,			Date of Disbursement MM / DD / YYYY 07 / 01 / 2016	
Mailing Address 228 Aspen St			FEC Identification Number C	
City Floral Park	State NY	Zip Code 11001-3636	Transaction ID : VNV499T3JW	
Purpose of Disbursement Event expense		Category/ Type 001	Amount of Each Disbursement this Period 511.71	
Candidate Name			Non-Contribution Account <input type="checkbox"/> Memo Item	
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)..... ▶

2089.85

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Mida, Jason, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 526 12th St NE

City Washington State DC Zip Code 20002-6310

Purpose of Disbursement Fundraising consultant

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 13 / 2016

FEC Identification Number: C

Transaction ID : VNV499TP4X

Amount of Each Disbursement this Period: 5000.00

Memo Item

B. Midstate Printing Group LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1 Bank St Ste 401

City Stamford State CT Zip Code 06901-3074

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2016

FEC Identification Number: C

Transaction ID : VNV499T3JY1

Amount of Each Disbursement this Period: 4064.00

Memo Item

C. Mission Control Inc

Full Name (Last, First, Middle Initial)

Mailing Address 624 Hebron Ave Bldg 200

City Glastonbury State CT Zip Code 06033-2470

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 09 / 2016

FEC Identification Number: C

Transaction ID : VNV499TCC1

Amount of Each Disbursement this Period: 4453.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 13517.40

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Mission Control Inc		Date of Disbursement MM / DD / YYYY 08 / 26 / 2016
Mailing Address 624 Hebron Ave Bldg 200		FEC Identification Number C [REDACTED] Transaction ID : VNV499TD3P
City Glastonbury	State CT	Zip Code 06033-2470
Purpose of Disbursement Printing	Candidate Name	Amount of Each Disbursement this Period 800.00
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) ▼	Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. New York Times		Date of Disbursement MM / DD / YYYY 07 / 26 / 2016
Mailing Address 620 8th Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV499T887E
City New York	State NY	Zip Code 10018-1618
Purpose of Disbursement Subscription	Candidate Name	Amount of Each Disbursement this Period 37.01
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) ▼	Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. New York Times		Date of Disbursement MM / DD / YYYY 08 / 23 / 2016
Mailing Address 620 8th Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV499TDG!
City New York	State NY	Zip Code 10018-1618
Purpose of Disbursement Subscription	Candidate Name	Amount of Each Disbursement this Period 37.01
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) ▼	Non-Contribution Account <input type="checkbox"/> Memo Item
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	874.02
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)
A. New York Times

Mailing Address **620 8th Ave**

City **New York** State **NY** Zip Code **10018-1618**

Purpose of Disbursement
Subscription

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **09 / 20 / 2016**

FEC Identification Number: **C**
Transaction ID : VNV499TNGC
Amount of Each Disbursement this Period: **37.01**
 Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)
B. NGP VAN, Inc.

Mailing Address **1101 15th St NW Ste 500**

City **Washington** State **DC** Zip Code **20005-5006**

Purpose of Disbursement
Software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **08 / 02 / 2016**

FEC Identification Number: **C**
Transaction ID : VNV499TCCZ
Amount of Each Disbursement this Period: **150.00**
 Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)
C. NGP VAN, Inc.

Mailing Address **1101 15th St NW Ste 500**

City **Washington** State **DC** Zip Code **20005-5006**

Purpose of Disbursement
Software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **08 / 09 / 2016**

FEC Identification Number: **C**
Transaction ID : VNV499TCD
Amount of Each Disbursement this Period: **1050.00**
 Memo Item Non-Contribution Account

SUBTOTAL of Disbursements This Page (optional)..... ▶ **1237.01**

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Olive Street Design

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2016

FEC Identification Number: C

Transaction ID : VNV499T3JQ

Amount of Each Disbursement this Period: 799.00

Memo Item

B. Olive Street Design

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 09 / 2016

FEC Identification Number: C

Transaction ID : VNV499TCD2

Amount of Each Disbursement this Period: 1046.00

Memo Item

C. Olive Street Design

Full Name (Last, First, Middle Initial)

Mailing Address 264 E Kenilworth Ave

City Villa Park State IL Zip Code 60181-5502

Purpose of Disbursement Website services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 12 / 2016

FEC Identification Number: C

Transaction ID : VNV499TNGI

Amount of Each Disbursement this Period: 895.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2740.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Olive Street Design		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016
Mailing Address 264 E Kenilworth Ave		FEC Identification Number C [REDACTED] Transaction ID : VNV499TNGE Amount of Each Disbursement this Period 850.00
City Villa Park	State IL	Zip Code 60181-5502
Purpose of Disbursement Website services		Category/ Type 001
Candidate Name		
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: _____	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV499T88A Amount of Each Disbursement this Period 2646.43
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll taxes		Category/ Type 001
Candidate Name		
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: _____	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV499T88B Amount of Each Disbursement this Period 95.25
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll processing fee		Category/ Type 001
Candidate Name		
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: _____	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3591.68
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV499T76X Amount of Each Disbursement this Period 114.81
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll processing fee		Category/Type 001
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV499T8894 Amount of Each Disbursement this Period 2646.43
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll taxes		Category/Type 001
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 07 / 29 / 2016
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED] Transaction ID : VNV499TAH Amount of Each Disbursement this Period 2646.44
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll taxes		Category/Type 001
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	5407.68
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement MM / DD / YYYY 07 / 29 / 2016
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED]
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll processing fee		001
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:	Transaction ID : VNV499TAHE Amount of Each Disbursement this Period 95.25 Non-Contribution Account <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement MM / DD / YYYY 08 / 15 / 2016
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED]
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll processing fee		001
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:	Transaction ID : VNV499TB8Z Amount of Each Disbursement this Period 95.25 Non-Contribution Account <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement MM / DD / YYYY 08 / 15 / 2016
Mailing Address 911 Panorama Trl S		FEC Identification Number C [REDACTED]
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll taxes		001
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:	Transaction ID : VNV499TB90 Amount of Each Disbursement this Period 2646.44 Non-Contribution Account <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2836.94
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2016

FEC Identification Number: C

Transaction ID : VNV499TDH8

Amount of Each Disbursement this Period: 2646.42

Memo Item

B. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll processing fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2016

FEC Identification Number: C

Transaction ID : VNV499TDH9

Amount of Each Disbursement this Period: 95.25

Memo Item

C. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2016

FEC Identification Number: C

Transaction ID : VNV499TNGI

Amount of Each Disbursement this Period: 2646.44

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5388.11

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll processing fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2016

FEC Identification Number: C

Transaction ID : VNV499TNGS

Amount of Each Disbursement this Period: 98.20

Memo Item

B. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll processing fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

Transaction ID : VNV499TNGS

Amount of Each Disbursement this Period: 98.20

Memo Item

C. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2396

Purpose of Disbursement Payroll taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

Transaction ID : VNV499TNGS

Amount of Each Disbursement this Period: 2646.44

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2842.84

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial)

A. PCMS, LLC

Mailing Address 1050 17th St NW
Ste 590

City Washington State DC Zip Code 20036-5592

Purpose of Disbursement
Accounting services

001
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
07 / 15 / 2016

FEC Identification Number
C
Transaction ID : VNV499T88C
Amount of Each Disbursement this Period
1790.00

Non-Contribution Account
 Memo Item

Full Name (Last, First, Middle Initial)

B. Practice Makes Progress

Mailing Address 1875 Connecticut Ave NW
FI 10

City Washington State DC Zip Code 20009-5728

Purpose of Disbursement
Digital strategy consultant

001
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
07 / 01 / 2016

FEC Identification Number
C
Transaction ID : VNV499T3JR
Amount of Each Disbursement this Period
5000.00

Non-Contribution Account
 Memo Item

Full Name (Last, First, Middle Initial)

C. Practice Makes Progress

Mailing Address 1875 Connecticut Ave NW
FI 10

City Washington State DC Zip Code 20009-5728

Purpose of Disbursement
Digital strategy consultant

001
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
07 / 15 / 2016

FEC Identification Number
C
Transaction ID : VNV499TNH
Amount of Each Disbursement this Period
5000.00

Non-Contribution Account
 Memo Item

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

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

11790.00

**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"/> 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

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NAME OF COMMITTEE (In Full)
L PAC

A. Practice Makes Progress

Full Name (Last, First, Middle Initial)

Mailing Address 1875 Connecticut Ave NW
FI 10

City Washington State DC Zip Code 20009-5728

Purpose of Disbursement Digital strategy consultant

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 09 / 2016

FEC Identification Number: C

Transaction ID : VNV499TCCN

Amount of Each Disbursement this Period: 5000.00

Memo Item

B. Practice Makes Progress

Full Name (Last, First, Middle Initial)

Mailing Address 1875 Connecticut Ave NW
FI 10

City Washington State DC Zip Code 20009-5728

Purpose of Disbursement Digital strategy consultant

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 12 / 2016

FEC Identification Number: C

Transaction ID : VNV499TNH0

Amount of Each Disbursement this Period: 5000.00

Memo Item

C. Shipp, Elizabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15955 Frederick Rd
Apt 1308

City Rockville State MD Zip Code 20855-2295

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 01 / 2016

FEC Identification Number: C

Transaction ID : VNV499T3HY

Amount of Each Disbursement this Period: 3485.33

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 13485.33

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Shipp, Elizabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15955 Frederick Rd
Apt 1308

City Rockville State MD Zip Code 20855-2295

Purpose of Disbursement Travel Reimbursements see below if itemized

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement 07 / 01 / 2016

FEC Identification Number C

Transaction ID : VNV499T3JN

Amount of Each Disbursement this Period 412.84

Memo Item

B. Shipp, Elizabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15955 Frederick Rd
Apt 1308

City Rockville State MD Zip Code 20855-2295

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement 07 / 15 / 2016

FEC Identification Number C

Transaction ID : VNV499T76Zf

Amount of Each Disbursement this Period 3485.34

Memo Item

C. Shipp, Elizabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15955 Frederick Rd
Apt 1308

City Rockville State MD Zip Code 20855-2295

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement 07 / 29 / 2016

FEC Identification Number C

Transaction ID : VNV499TAHf

Amount of Each Disbursement this Period 3485.33

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7383.51

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Shipp, Elizabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15955 Frederick Rd
Apt 1308

City Rockville State MD Zip Code 20855-2295

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 11 / 2016

FEC Identification Number: C [REDACTED]
Transaction ID : VNV499TCC0
Amount of Each Disbursement this Period: 302.58
Non-Contribution Account Memo Item

B. Shipp, Elizabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15955 Frederick Rd
Apt 1308

City Rockville State MD Zip Code 20855-2295

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 15 / 2016

FEC Identification Number: C [REDACTED]
Transaction ID : VNV499TB91!
Amount of Each Disbursement this Period: 3485.33
Non-Contribution Account Memo Item

C. Shipp, Elizabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15955 Frederick Rd
Apt 1308

City Rockville State MD Zip Code 20855-2295

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 30 / 2016

FEC Identification Number: C [REDACTED]
Transaction ID : VNV499TDG;
Amount of Each Disbursement this Period: 3485.35
Non-Contribution Account Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7273.26

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. Shipp, Elizabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15955 Frederick Rd
Apt 1308

City Rockville State MD Zip Code 20855-2295

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2016

FEC Identification Number: C

Transaction ID : VNV499TN26

Amount of Each Disbursement this Period: 3485.33

Memo Item

B. Shipp, Elizabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15955 Frederick Rd
Apt 1308

City Rockville State MD Zip Code 20855-2295

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

Transaction ID : VNV499TN24

Amount of Each Disbursement this Period: 3485.33

Memo Item

C. Shipp, Elizabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15955 Frederick Rd
Apt 1308

City Rockville State MD Zip Code 20855-2295

Purpose of Disbursement Admin expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

Transaction ID : VNV499TN25

Amount of Each Disbursement this Period: 69.78

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7040.44

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. SkipJack		Date of Disbursement MM / DD / YYYY 08 / 18 / 2016
Mailing Address 10150 York Rd FI 5		FEC Identification Number C [REDACTED] Transaction ID : VNV499TCD5
City Hunt Valley	State MD	Zip Code 21030-3354
Purpose of Disbursement Insurance	Candidate Name	Amount of Each Disbursement this Period 3441.75
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:	Category/Type 001	Non-Contribution Account <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Staples Inc.		Date of Disbursement MM / DD / YYYY 07 / 25 / 2016
Mailing Address 500 Staples Dr		FEC Identification Number C [REDACTED] Transaction ID : VNV499T88E
City Framingham	State MA	Zip Code 01702-4478
Purpose of Disbursement Office Supplies	Candidate Name	Amount of Each Disbursement this Period 24.87
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:	Category/Type 001	Non-Contribution Account <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Suburban Station		Date of Disbursement MM / DD / YYYY 07 / 25 / 2016
Mailing Address 1600 John F Kennedy Blvd		FEC Identification Number C [REDACTED] Transaction ID : VNV499T88F
City Philadelphia	State PA	Zip Code 19103-2804
Purpose of Disbursement Travel and meetings	Candidate Name	Amount of Each Disbursement this Period 218.00
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:	Category/Type 001	Non-Contribution Account <input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3684.62
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. The Dupont Hotel		Date of Disbursement MM / DD / YYYY 09 / 20 / 2016
Mailing Address 1500 New Hampshire Ave NW		FEC Identification Number C [REDACTED] Transaction ID : VNV499TP51! Amount of Each Disbursement this Period 34892.00
City Washington	State DC	Zip Code 20036-1204
Purpose of Disbursement Event space rental		Category/ Type [REDACTED]
Candidate Name		
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:	<input type="checkbox"/> Memo Item Non-Contribution Account	

Full Name (Last, First, Middle Initial) B. The Smoot Tewes Group		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 818 Connecticut Ave NW Ste 200		FEC Identification Number C [REDACTED] Transaction ID : VNV499T88G! Amount of Each Disbursement this Period 2500.00
City Washington	State DC	Zip Code 20006-2742
Purpose of Disbursement Communications consulting		Category/ Type 001
Candidate Name		
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:	<input type="checkbox"/> Memo Item Non-Contribution Account	

Full Name (Last, First, Middle Initial) C. The Smoot Tewes Group		Date of Disbursement MM / DD / YYYY 09 / 12 / 2016
Mailing Address 818 Connecticut Ave NW Ste 200		FEC Identification Number C [REDACTED] Transaction ID : VNV499TP52 Amount of Each Disbursement this Period 5000.00
City Washington	State DC	Zip Code 20006-2742
Purpose of Disbursement Communications consulting		Category/ Type 001
Candidate Name		
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:	<input type="checkbox"/> Memo Item Non-Contribution Account	

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

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

42392.00
[REDACTED]

**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"/> 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

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NAME OF COMMITTEE (In Full)
L PAC

A. The Smoot Tewes Group

Full Name (Last, First, Middle Initial)

Mailing Address 818 Connecticut Ave NW
Ste 200

City Washington State DC Zip Code 20006-2742

Purpose of Disbursement Communications consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 28 / 2016

FEC Identification Number: C

Transaction ID : VNV499TP53

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. The Verb Hotel

Full Name (Last, First, Middle Initial)

Mailing Address 1271 Boylston St

City Boston State MA Zip Code 02215-3410

Purpose of Disbursement Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 29 / 2016

FEC Identification Number: C

Transaction ID : VNV499TP5A

Amount of Each Disbursement this Period: 684.42

Memo Item

C. Tina Podlodowki for Secretary of State

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 20655

City Seattle State WA Zip Code 98102-1655

Purpose of Disbursement Non-federal contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 28 / 2016

FEC Identification Number: C

Transaction ID : VNV499TP54

Amount of Each Disbursement this Period: 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5184.42

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

A. US Post Office

Full Name (Last, First, Middle Initial)

Mailing Address 1400 L St NW
Frnt 2

City Washington State DC Zip Code 20005-3509

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 26 / 2016

FEC Identification Number: C

Transaction ID : VNV499TP58I

Amount of Each Disbursement this Period: 94.00

Memo Item

B. US Post Office

Full Name (Last, First, Middle Initial)

Mailing Address 1400 L St NW
Frnt 2

City Washington State DC Zip Code 20005-3509

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

Transaction ID : VNV499TP59I

Amount of Each Disbursement this Period: 1.41

Memo Item

C. VSP

Full Name (Last, First, Middle Initial)

Mailing Address 3333 Quality Dr

City Rancho Cordova State CA Zip Code 95670-7985

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 18 / 2016

FEC Identification Number: C

Transaction ID : VNV499T88M

Amount of Each Disbursement this Period: 28.88

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	124.29
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
L PAC

Full Name (Last, First, Middle Initial) A. VSP		Date of Disbursement MM / DD / YYYY 08 / 17 / 2016
Mailing Address 3333 Quality Dr		FEC Identification Number C [REDACTED] Transaction ID : VNV499TCDE
City Rancho Cordova	State CA	Zip Code 95670-7985
Purpose of Disbursement Insurance		Amount of Each Disbursement this Period [REDACTED] 28.88
Candidate Name		Non-Contribution Account <input type="checkbox"/> Memo Item
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. VSP		Date of Disbursement MM / DD / YYYY 09 / 19 / 2016
Mailing Address 3333 Quality Dr		FEC Identification Number C [REDACTED] Transaction ID : VNV499TP5C
City Rancho Cordova	State CA	Zip Code 95670-7985
Purpose of Disbursement Insurance		Amount of Each Disbursement this Period [REDACTED] 28.88
Candidate Name		Non-Contribution Account <input type="checkbox"/> Memo Item
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. W. Douglas Wingo Inc		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 350 7th Ave Rm 1603		FEC Identification Number C [REDACTED] Transaction ID : VNV499T3JS
City New York	State NY	Zip Code 10001-1934
Purpose of Disbursement Fundraising consultant		Amount of Each Disbursement this Period [REDACTED] 9134.23
Candidate Name		Non-Contribution Account <input type="checkbox"/> Memo Item
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).....▶	[REDACTED] 9191.99
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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

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NAME OF COMMITTEE (In Full)
L PAC

A. W. Douglas Wingo Inc

Full Name (Last, First, Middle Initial)

Mailing Address 350 7th Ave
Rm 1603

City New York State NY Zip Code 10001-1934

Purpose of Disbursement Fundraising consultant

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 15 / 2016

FEC Identification Number: C

Transaction ID : VNV499T88N

Amount of Each Disbursement this Period: 126.89

Memo Item

B. W. Douglas Wingo Inc

Full Name (Last, First, Middle Initial)

Mailing Address 350 7th Ave
Rm 1603

City New York State NY Zip Code 10001-1934

Purpose of Disbursement Fundraising consultant

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 09 / 2016

FEC Identification Number: C

Transaction ID : VNV499TCDF

Amount of Each Disbursement this Period: 84.34

Memo Item

C. Woo, Jacqueline, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 145 W 11th St

City New York State NY Zip Code 10011-8394

Purpose of Disbursement Refund of contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 18 / 2016

FEC Identification Number: C

Transaction ID : VNV499T7Y1

Amount of Each Disbursement this Period: 408.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 619.23

TOTAL This Period (last page this line number only)..... ▶ 263272.47