

# 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.

PAC for a Level Playing Field

ADDRESS (number and street)   
  
 Check if different than previously reported. (ACC)

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

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

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Type or Print Name of Treasurer Keith D. Lowey

Signature of Treasurer Keith D. Lowey [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

|                 |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**PAC for a Level Playing Field**

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

|  | COLUMN A<br>This Period                 | COLUMN B<br>Calendar Year-to-Date       |
|--|---|---|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2015"/>  | <input type="text" value="1061551.26"/> | <input type="text" value="1061551.26"/> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="1245306.28"/> |   |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="221035.19"/>  | <input type="text" value="643581.53"/>  |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="1466341.47"/> | <input type="text" value="1705132.79"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="286680.80"/>  | <input type="text" value="525472.12"/>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="1179660.67"/> | <input type="text" value="1179660.67"/> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>       |   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="0.00"/>       |   |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**PAC for a Level Playing Field**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 181150.00                     | 563350.00                         |
| (ii) Unitemized .....   | 2092.07                       | 8583.08                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 183242.07                     | 571933.08                         |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 30750.00                      | 63250.00                          |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 213992.07                     | 635183.08                         |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 5000.00                       | 5000.00                           |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 2043.12                       | 3398.45                           |
| 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))..... ▶                        | 221035.19                     | 643581.53                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 221035.19                     | 643581.53                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 129180.80                     | 255462.96                         |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 129180.80                     | 255462.96                         |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 112500.00                     | 225000.00                         |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 9.16                              |
| (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                          | 9.16                              |
| 29. Other Disbursements .....  | 45000.00                      | 45000.00                          |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 286680.80                     | 525472.12                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 286680.80                     | 525472.12                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 213992.07                     | 635183.08                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 9.16                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 213992.07                     | 635173.92                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 129180.80                     | 255462.96                         |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 129180.80                     | 255462.96                         |

**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 113 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
**PAC for a Level Playing Field**

|   |                                     |  |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Christiane Alsop</b>   |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>10 / 26 / 2015 |
| Mailing Address 675C Hale St  |                                     | <b>Transaction ID : C10810292A</b>                         |
| City<br>Beverly   | State<br>MA                         | Zip Code<br>01915-2166                                     |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Amount of Each Receipt this Period<br>5000.00              |
| Name of Employer<br>Self Employed   | Occupation<br>Writer                | * Earmarked Contribution: See Below                        |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ActBlue</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>11 / 02 / 2015                          |
| Mailing Address PO Box 382110   |  | <b>Transaction ID : C10810292AB</b>   |
| City<br>Cambridge   | State<br>MA                                      | Zip Code<br>02238   |
| FEC ID number of contributing federal political committee.<br>C C00401224   |  | Amount of Each Receipt this Period<br>5000.00                                       |
| Name of Employer  | Occupation<br>Conduit total listed in Agg. field | <b>[MEMO ITEM]</b><br>Note: Above Contribution earmarked through this organization. |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>102107.07            |   |

|   |                                     |  |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Robert Anderson</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>10 / 20 / 2015 |
| Mailing Address 2835 Broadway   |                                     | <b>Transaction ID : C10808453A</b>                         |
| City<br>San Francisco   | State<br>CA                         | Zip Code<br>94115  |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Amount of Each Receipt this Period<br>5000.00              |
| Name of Employer<br>Self Employed   | Occupation<br>Writer                | * Earmarked Contribution: See Below                        |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 10000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |          |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 7 OF 113                |
|   | <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)  
**PAC for a Level Playing Field**

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2015  
**Transaction ID : C10808453AB**

Amount of Each Receipt this Period  
5000.00

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

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

Mailing Address 38 Highland Avenue

City State Zip Code  
Winchester MA 01890

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

Name of Employer Occupation  
Oracle Corp Computer Programmer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2015  
**Transaction ID : C10754890A**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 01 / 2015  
**Transaction ID : C10754890AB**

Amount of Each Receipt this Period  
25.00

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

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 25.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 8 OF 113                |
|   | <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)  
**PAC for a Level Playing Field**

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

Mailing Address 38 Highland Avenue

City Winchester State MA Zip Code 01890

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

Name of Employer Oracle Corp Occupation Computer Programmer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **07 / 30 / 2015**

**Transaction ID : C10769234A**

Amount of Each Receipt this Period **25.00**

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **102107.07**

Date of Receipt **08 / 01 / 2015**

**Transaction ID : C10769234AB**

Amount of Each Receipt this Period **25.00**

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

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

Mailing Address 38 Highland Avenue

City Winchester State MA Zip Code 01890

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

Name of Employer Oracle Corp Occupation Computer Programmer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **08 / 30 / 2015**

**Transaction ID : C10777445A**

Amount of Each Receipt this Period **25.00**

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **50.00**

**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 9 OF 113                |
|   | <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)  
**PAC for a Level Playing Field**

**A. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    | / | 31    | / | 2015        |

**Transaction ID : C10777445AB**

Amount of Each Receipt this Period  

|       |
|-------|
| 25.00 |
|-------|

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

**B. Iain Bason**  
Full Name (Last, First, Middle Initial)  
Mailing Address 38 Highland Avenue

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Winchester | State<br>MA | Zip Code<br>01890 |
|--------------------|-------------|-------------------|

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

|                                 |                                    |
|---------------------------------|------------------------------------|
| Name of Employer<br>Oracle Corp | Occupation<br>Computer Programmer  |
|                                 | Conduit total listed in Agg. field |

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 30    | / | 2015        |

**Transaction ID : C10793244A**

Amount of Each Receipt this Period  

|       |
|-------|
| 25.00 |
|-------|

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 30    | / | 2015        |

**Transaction ID : C10793244AB**

Amount of Each Receipt this Period  

|       |
|-------|
| 25.00 |
|-------|

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

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 25.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 10 OF 113 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
**PAC for a Level Playing Field**

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

Mailing Address 38 Highland Avenue

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Winchester | State<br>MA | Zip Code<br>01890 |
|--------------------|-------------|-------------------|

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

|                                 |                                   |
|---------------------------------|-----------------------------------|
| Name of Employer<br>Oracle Corp | Occupation<br>Computer Programmer |
|---------------------------------|-----------------------------------|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2015  
**Transaction ID : C10810298A**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

|                  |  |
|------------------|--|
| Name of Employer | Occupation<br>Conduit total listed in Agg. field |
|------------------|--|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2015  
**Transaction ID : C10810298AB**

Amount of Each Receipt this Period  
25.00

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

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

Mailing Address 38 Highland Avenue

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Winchester | State<br>MA | Zip Code<br>01890 |
|--------------------|-------------|-------------------|

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

|                                 |                                   |
|---------------------------------|-----------------------------------|
| Name of Employer<br>Oracle Corp | Occupation<br>Computer Programmer |
|---------------------------------|-----------------------------------|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2015  
**Transaction ID : C10827462A**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 50.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 11 OF 113               |
|   | <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)  
**PAC for a Level Playing Field**

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 04 / 2015

**Transaction ID : C10827462AB**

Amount of Each Receipt this Period  
25.00

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

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

Mailing Address 1600 S Joyce St Apt 1014

City Arlington State VA Zip Code 22202

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

Name of Employer Occupation  
Rasky Baerlein SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 05 / 2015

**Transaction ID : C10800928**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 200 E 87th St Apt 9E

City New York State NY Zip Code 10128-3113

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

Name of Employer Occupation  
Weber Shandwick President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 21 / 2015

**Transaction ID : C10793232A**

Amount of Each Receipt this Period  
2500.00

\* Earmarked Contribution: See Below

**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 12 OF 113               |
|   | <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)  
**PAC for a Level Playing Field**

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2015

**Transaction ID : C10793232AB**

Amount of Each Receipt this Period  
2500.00

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

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

Mailing Address 59 Highland Ave.

City Sudbury State MA Zip Code 01776

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

Name of Employer Occupation  
Waterville Consulting Consultant

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  
07 / 10 / 2015

**Transaction ID : C10756377A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 13 / 2015

**Transaction ID : C10756377AB**

Amount of Each Receipt this Period  
5000.00

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

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 5000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 13 OF 113  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

**A. Justin Edward Dangel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 91 Beacon St Apt 1  
 City Boston State MA Zip Code 02108-3315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Consumer United Occupation CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : C10840350**  
 Amount of Each Receipt this Period  
 2500.00

**B. Bob Frankston**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 278 Lake Avenue  
 City Newton State MA Zip Code 02461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 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 / 09 / 2015  
**Transaction ID : C10781870A**  
 Amount of Each Receipt this Period  
 5000.00  
 \* Earmarked Contribution: See Below

**C. ActBlue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238  
 FEC ID number of contributing federal political committee. **C C00401224**  
 Name of Employer Occupation Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 102107.07

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 14 / 2015  
**Transaction ID : C10781870AB**  
 Amount of Each Receipt this Period  
 5000.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 7500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 14 OF 113  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

**A. David Glassco**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2001 Travis Heights Blvd  
 City Austin State TX Zip Code 78704-3640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Investor  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 2000.00

Date of Receipt 09 / 03 / 2015  
**Transaction ID : C10781326A**  
 Amount of Each Receipt this Period 2000.00  
 \* Earmarked Contribution: See Below

**B. ActBlue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 102107.07

Date of Receipt 09 / 08 / 2015  
**Transaction ID : C10781326AB**  
 Amount of Each Receipt this Period 2000.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C. Robert Glovsky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 Rowes Wharf Apt 901  
 City Boston State MA Zip Code 02110-3324  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation The Colony Group Wealth Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 5000.00

Date of Receipt 09 / 10 / 2015  
**Transaction ID : C10781873A**  
 Amount of Each Receipt this Period 5000.00  
 \* Earmarked Contribution: See Below

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

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

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

FOR LINE NUMBER: PAGE 15 OF 113  
(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)  
**PAC for a Level Playing Field**

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2015

**Transaction ID : C10781873AB**

Amount of Each Receipt this Period  
5000.00

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

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

Mailing Address 17760 Buckingham Ct

City State Zip Code  
Boca Raton FL 33496

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

Name of Employer Occupation  
Padam Corp CEO

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  
10 / 05 / 2015

**Transaction ID : C10800926**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 407 Connecticut St

City State Zip Code  
San Francisco CA 94107-2817

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

Name of Employer Occupation  
Falk Cornell and Associates Attorney

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  
10 / 17 / 2015

**Transaction ID : C10806800A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....▶ 10000.00

**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 16 OF 113  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

**A. ActBlue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 382110  
 City State Zip Code  
 Cambridge MA 02238  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 102107.07

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2015  
**Transaction ID : C10806800AB**  
 Amount of Each Receipt this Period  
 5000.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B. William Goldman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 407 Connecticut St  
 City State Zip Code  
 San Francisco CA 94107-2817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 University of San Francisco Professor  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2015  
**Transaction ID : C10806801A**  
 Amount of Each Receipt this Period  
 5000.00  
 \* Earmarked Contribution: See Below

**C. ActBlue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 382110  
 City State Zip Code  
 Cambridge MA 02238  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 102107.07

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2015  
**Transaction ID : C10806801AB**  
 Amount of Each Receipt this Period  
 5000.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 5000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |



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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 17 OF 113  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

**A. Jerome Goldstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 282 Buckminster Rd  
 City Brookline State MA Zip Code 02445-5801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 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 / 21 / 2015  
**Transaction ID : C10786182**  
 Amount of Each Receipt this Period  
 5000.00

**B. Marlene K. Goldstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 282 Buckminster Rd  
 City Brookline State MA Zip Code 02445-5801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 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 / 21 / 2015  
**Transaction ID : C10786183**  
 Amount of Each Receipt this Period  
 5000.00

**C. Kenneth Green**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 Eldorado Cir  
 City Santa Fe State NM Zip Code 87508-2210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2015  
**Transaction ID : C10756383A**  
 Amount of Each Receipt this Period  
 50.00  
 \* Earmarked Contribution: See Below

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 10050.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |          |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 18 OF 113               |
|   | <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)  
**PAC for a Level Playing Field**

**A. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 13 / 2015  
**Transaction ID : C10756383AB**

Amount of Each Receipt this Period  
50.00

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

**B. John A. Hastings Jr.**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 899

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Meridian | State<br>TX | Zip Code<br>76665 |
|------------------|-------------|-------------------|

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

|                                   |                        |
|-----------------------------------|------------------------|
| Name of Employer<br>Self Employed | Occupation<br>Attorney |
|-----------------------------------|------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2015  
**Transaction ID : C10810301**

Amount of Each Receipt this Period  
1500.00

**C. William Hurley**  
Full Name (Last, First, Middle Initial)  
Mailing Address 655 Cortona Drive

|                        |             |                   |
|------------------------|-------------|-------------------|
| City<br>Westlake Hills | State<br>TX | Zip Code<br>78746 |
|------------------------|-------------|-------------------|

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

|                                   |                   |
|-----------------------------------|-------------------|
| Name of Employer<br>Honest Dollar | Occupation<br>CEO |
|-----------------------------------|-------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 07 / 2015  
**Transaction ID : C10781877A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER: PAGE 19 OF 113  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)  
**A. ActBlue**  
 Mailing Address PO Box 382110  
 City State Zip Code  
 Cambridge MA 02238  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 102107.07

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 14 / 2015  
**Transaction ID : C10781877AB**  
 Amount of Each Receipt this Period  
 1000.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Philip W. Johnston**  
 Mailing Address 99 Summer St Ste 1550  
 City State Zip Code  
 Boston MA 02110-1213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Philip W. Johnston Associates CEO  
 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  
 10 / 05 / 2015  
**Transaction ID : C10804848A**  
 Amount of Each Receipt this Period  
 5000.00  
 \* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**C. ActBlue**  
 Mailing Address PO Box 382110  
 City State Zip Code  
 Cambridge MA 02238  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 102107.07

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2015  
**Transaction ID : C10804848AB**  
 Amount of Each Receipt this Period  
 5000.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**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 20 OF 113 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
**PAC for a Level Playing Field**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Russell Kelley</b> |   | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>10 / 08 / 2015<br><b>Transaction ID : C10800943</b> |
| Mailing Address 919 Congress Ave, Suite 950                         |   | Amount of Each Receipt this Period<br>2500.00   |
| City Austin State TX Zip Code 78701                                 | FEC ID number of contributing federal political committee. C  |   |
| Name of Employer Blackridge Occupation Consultant                   | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2500.00   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Karyl A Kinsey</b>         |   | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>11 / 25 / 2015<br><b>Transaction ID : C10824783</b> |
| Mailing Address 3004 Heady Dr   |   | Amount of Each Receipt this Period<br>100.00  |
| City Austin State TX Zip Code 78745-4712                                    | FEC ID number of contributing federal political committee. C  |   |
| Name of Employer City of Austin Fire Department Occupation Research Analyst | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>300.00  |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Clay K. Kirk</b> |   | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>07 / 23 / 2015<br><b>Transaction ID : C10760064</b> |
| Mailing Address 320 E 72nd St Apt 5C                              |   | Amount of Each Receipt this Period<br>5000.00   |
| City New York State NY Zip Code 10021-5251                        | FEC ID number of contributing federal political committee. C  |   |
| Name of Employer Self Employed Occupation Investor                | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 7600.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 21 OF 113               |
|   | <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)  
**PAC for a Level Playing Field**

**A. Garrett Kirk Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 320 E 72nd St  
Apt 5C

City New York State NY Zip Code 10021-4769

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

Name of Employer Self Employed Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
08 / 03 / 2015  
Transaction ID : **C10769239**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 1286 South East St.

City Amherst State MA Zip Code 01002

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

Name of Employer Univ of Connecticut School of Law Occupation Associate Professor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
07 / 22 / 2015  
Transaction ID : **C10766036A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
07 / 27 / 2015  
Transaction ID : **C10766036AB**

Amount of Each Receipt this Period  
5000.00

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

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10000.00

**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 113               |
|   | <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)  
**PAC for a Level Playing Field**

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

Mailing Address 322 W 57th Street  
Apt 43S

City New York State NY Zip Code 10019

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

Name of Employer Spinnaker Capital Occupation Fund Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
07 / 13 / 2015  
**Transaction ID : C10760057A**

Amount of Each Receipt this Period  
2500.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
07 / 20 / 2015  
**Transaction ID : C10760057AB**

Amount of Each Receipt this Period  
2500.00

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

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

Mailing Address 983 Memorial Dr Apt 402

City Cambridge State MA Zip Code 02138-5742

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

Name of Employer The Baffler Occupation Publisher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 20 / 2015  
**Transaction ID : C10808457A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7500.00

**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 113               |
|   | <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)  
**PAC for a Level Playing Field**

**A. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 26    | / | 2015        |

**Transaction ID : C10808457AB**

Amount of Each Receipt this Period  

|         |
|---------|
| 5000.00 |
|---------|

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

**B. David J. McMorris**  
Full Name (Last, First, Middle Initial)  
Mailing Address 89 Doane Street

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>Cohasset | State<br>MA | Zip Code<br>02025 |
|------------------|-------------|-------------------|

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

|                                       |                                    |
|---------------------------------------|------------------------------------|
| Name of Employer<br>Thornton Law Firm | Occupation<br>Attorney             |
|                                       | Conduit total listed in Agg. field |

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 11    | / | 2015        |

**Transaction ID : C10823223A**

Amount of Each Receipt this Period  

|         |
|---------|
| 5000.00 |
|---------|

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 16    | / | 2015        |

**Transaction ID : C10823223AB**

Amount of Each Receipt this Period  

|         |
|---------|
| 5000.00 |
|---------|

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

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 5000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 24 OF 113               |
|   | <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)  
**PAC for a Level Playing Field**

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

Mailing Address 89 Doane Street

City Cohasset State MA Zip Code 02025

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

Name of Employer Darilynn's Occupation Retail

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 10 / 2015

**Transaction ID : C10823237A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2015

**Transaction ID : C10823237AB**

Amount of Each Receipt this Period  
5000.00

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

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

Mailing Address 98 San Jacinto Blvd, FSR-PH

City Austin State TX Zip Code 78701

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

Name of Employer Meritage Capital Occupation Co-Founder

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  
 09 / 14 / 2015

**Transaction ID : C10786175A**

Amount of Each Receipt this Period  
2700.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7700.00

**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 25 OF 113               |
|   | <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)  
**PAC for a Level Playing Field**

**A. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 21    | / | 2015        |

**Transaction ID : C10786175AB**

Amount of Each Receipt this Period  

|         |
|---------|
| 2700.00 |
|---------|

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

**B. Nicola Miner**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2835 Broadway St

|                       |             |                        |
|-----------------------|-------------|------------------------|
| City<br>San Francisco | State<br>CA | Zip Code<br>94115-1060 |
|-----------------------|-------------|------------------------|

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

|   |                                    |
|---|------------------------------------|
| Name of Employer<br>Quotidian Gallery Corporation | Occupation<br>Real Estate          |
|   | Conduit total listed in Agg. field |

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 |
| 10    | / | 20    | / | 2015        |

**Transaction ID : C10808458A**

Amount of Each Receipt this Period  

|         |
|---------|
| 5000.00 |
|---------|

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 26    | / | 2015        |

**Transaction ID : C10808458AB**

Amount of Each Receipt this Period  

|         |
|---------|
| 5000.00 |
|---------|

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

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 5000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 26 OF 113               |
|   | <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)  
**PAC for a Level Playing Field**

**A. Mary Scott Nabers**  
Full Name (Last, First, Middle Initial)

Mailing Address 901 S Mopac Expressway  
Bldg 100

City Austin State TX Zip Code 78746-5776

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

Name of Employer Strategic Partnerships, Inc. Occupation President/CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
09 / 09 / 2015  
**Transaction ID : C10781883A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
09 / 14 / 2015  
**Transaction ID : C10781883AB**

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 156 Woodland Ave

City San Francisco State CA Zip Code 94117-3861

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

Name of Employer Occupation  
Craigslis, Inc. Software Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 20 / 2015  
**Transaction ID : C10808459A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 5500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 27 OF 113               |
|   | <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)  
**PAC for a Level Playing Field**

**A. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 26    | / | 2015        |

**Transaction ID : C10808459AB**

Amount of Each Receipt this Period  
5000.00

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

**B. Patrick O'Connell**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5408 Hurlock Dr.

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>Austin | State<br>TX | Zip Code<br>78731 |
|----------------|-------------|-------------------|

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

|                                   |                        |
|-----------------------------------|------------------------|
| Name of Employer<br>Self Employed | Occupation<br>Attorney |
|-----------------------------------|------------------------|

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 |
| 09    | / | 01    | / | 2015        |

**Transaction ID : C10781327A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 08    | / | 2015        |

**Transaction ID : C10781327AB**

Amount of Each Receipt this Period  
500.00

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

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 28 OF 113               |
|   | <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)  
**PAC for a Level Playing Field**

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

Mailing Address 241 Perkins St Unit C402

City State Zip Code  
Jamaica Plain MA 02130-4010

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

Name of Employer Occupation  
Rasky Baerlein, Inc. Chairman

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  
10 / 05 / 2015

**Transaction ID : C10800929**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 1411 West Ave Ste 200

City State Zip Code  
Austin TX 78701

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

Name of Employer Occupation  
Ruggero Law Firm PC Attorney

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  
09 / 12 / 2015

**Transaction ID : C10781891A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2015

**Transaction ID : C10781891AB**

Amount of Each Receipt this Period  
1000.00

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

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 6000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 29 OF 113  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

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

Mailing Address 776 Boylston St Unit E12B

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>Boston | State<br>MA | Zip Code<br>02199-7851 |
|----------------|-------------|------------------------|

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

|                         |                              |
|-------------------------|------------------------------|
| Name of Employer<br>N/A | Occupation<br>Philanthropist |
|-------------------------|------------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2015

**Transaction ID : C10756393A**

Amount of Each Receipt this Period  
2500.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

|                  |  |
|------------------|--|
| Name of Employer | Occupation<br>Conduit total listed in Agg. field |
|------------------|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 13 / 2015

**Transaction ID : C10756393AB**

Amount of Each Receipt this Period  
2500.00

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

Full Name (Last, First, Middle Initial)  
**c. Arthur I. Segel**

Mailing Address 118 Dean Rd

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>Brookline | State<br>MA | Zip Code<br>02445-4212 |
|-------------------|-------------|------------------------|

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

|  |                         |
|--|-------------------------|
| Name of Employer<br>Harvard University | Occupation<br>Professor |
|--|-------------------------|

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  
 08 / 19 / 2015

**Transaction ID : C10773255**

Amount of Each Receipt this Period  
5000.00

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 7500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 30 OF 113  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)  
**A. Graham D. Shalgian**

Mailing Address 273 Franklin St

City Braintree State MA Zip Code 02184-5544

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

Name of Employer Rasky Baerlein Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : C10800927**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 776 Boylston St Unit E10E

City Boston State MA Zip Code 02199-7847

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

Name of Employer Global Petroleum Corp. Occupation Executive

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 / 11 / 2015

**Transaction ID : C10781328**

Amount of Each Receipt this Period  
 5000.00

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

Mailing Address 776 Boylston St Unit E10E

City Boston State MA Zip Code 02199

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

Name of Employer None Occupation Homemaker

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 / 11 / 2015

**Transaction ID : C10781329**

Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 12500.00

**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 113               |
|   | <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)  
**PAC for a Level Playing Field**

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

Mailing Address PO Box 403

City State Zip Code  
Cape Neddick ME 03902

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

Name of Employer Occupation  
Marsh & McLennan Companies IT Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2015

**Transaction ID : C10769232A**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 01 / 2015

**Transaction ID : C10769232AB**

Amount of Each Receipt this Period  
25.00

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

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

Mailing Address PO Box 403

City State Zip Code  
Cape Neddick ME 03902

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

Name of Employer Occupation  
Marsh & McLennan Companies IT Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 27 / 2015

**Transaction ID : C10777440A**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 50.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 32 OF 113               |
|   | <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)  
**PAC for a Level Playing Field**

**A. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    | / | 31    | / | 2015        |

**Transaction ID : C10777440AB**

Amount of Each Receipt this Period  

|       |
|-------|
| 25.00 |
|-------|

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

**B. Richard Sommers**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 403

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Cape Neddick | State<br>ME | Zip Code<br>03902 |
|----------------------|-------------|-------------------|

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

|  |                                    |
|--|------------------------------------|
| Name of Employer<br>Marsh & McLennan Companies | Occupation<br>IT Manager           |
|  | Conduit total listed in Agg. field |

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 27    | / | 2015        |

**Transaction ID : C10793237A**

Amount of Each Receipt this Period  

|       |
|-------|
| 25.00 |
|-------|

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02238 |
|-------------------|-------------|-------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 28    | / | 2015        |

**Transaction ID : C10793237AB**

Amount of Each Receipt this Period  

|       |
|-------|
| 25.00 |
|-------|

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

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 25.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |



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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 33 OF 113               |
|   | <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)  
**PAC for a Level Playing Field**

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

Mailing Address PO Box 403

City State Zip Code  
Cape Neddick ME 03902

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

Name of Employer Occupation  
Marsh & McLennan Companies IT Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

**Transaction ID : C10810297A**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

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

**Transaction ID : C10810297AB**

Amount of Each Receipt this Period  
25.00

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

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

Mailing Address PO Box 403

City State Zip Code  
Cape Neddick ME 03902

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

Name of Employer Occupation  
Marsh & McLennan Companies IT Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 27 / 2015

**Transaction ID : C10827467A**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 50.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 34 OF 113  |
| <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)  
**PAC for a Level Playing Field**

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2015

**Transaction ID : C10827467AB**

Amount of Each Receipt this Period  
25.00

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

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

Mailing Address PO Box 403

City State Zip Code  
Cape Neddick ME 03902

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

Name of Employer Occupation  
Marsh & McLennan Companies IT Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 27 / 2015

**Transaction ID : C10836948A**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 28 / 2015

**Transaction ID : C10836948AB**

Amount of Each Receipt this Period  
25.00

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

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 25.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |       |

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 35 OF 113               |
|   | (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)  
**PAC for a Level Playing Field**

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

Mailing Address 250 West 55th Street

City State Zip Code  
New York NY 10019

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

Name of Employer Occupation  
N/A Student

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  
08 / 26 / 2015

**Transaction ID : C10775345**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 250 West 55th Street

City State Zip Code  
New York NY 10019

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

Name of Employer Occupation  
Soros Fund Management Business Executive

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  
08 / 26 / 2015

**Transaction ID : C10775346**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 1515 Murray Ln

City State Zip Code  
Austin TX 78703-3410

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

Name of Employer Occupation  
University of Texas Professor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 11 / 2015

**Transaction ID : C10781885A**

Amount of Each Receipt this Period  
1500.00

\* Earmarked Contribution: See Below

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

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

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

FOR LINE NUMBER: PAGE 36 OF 113  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)  
**A. ActBlue**  
 Mailing Address PO Box 382110  
 City State Zip Code  
 Cambridge MA 02238  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 102107.07

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2015  
**Transaction ID : C10781885AB**  
 Amount of Each Receipt this Period  
 1500.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. R. Gary Stephens**  
 Mailing Address 6310 Olde Pecan Drive Suite 200  
 City State Zip Code  
 Richmond TX 77406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Stephens & Stephens Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2015  
**Transaction ID : C10800933**  
 Amount of Each Receipt this Period  
 1500.00

Full Name (Last, First, Middle Initial)  
**C. Steven Tomlinson**  
 Mailing Address 3114 Wheeler St  
 City State Zip Code  
 Austin TX 78705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Acton School of Business Founder  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2015  
**Transaction ID : C10781892A**  
 Amount of Each Receipt this Period  
 1000.00  
 \* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00  
**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 113               |
|   | <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)  
**PAC for a Level Playing Field**

**A. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110  
City Cambridge State MA Zip Code 02238  
FEC ID number of contributing federal political committee. **C** C00401224  
Name of Employer Occupation  
Conduit total listed in Agg. field  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 102107.07

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2015  
**Transaction ID : C10781892AB**  
Amount of Each Receipt this Period  
1000.00  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B. Susie Tompkins Buell**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 29921  
City San Francisco State CA Zip Code 94129  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Retired Retired  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2015  
**Transaction ID : C10810300**  
Amount of Each Receipt this Period  
5000.00

**C. Sidney Topol**  
Full Name (Last, First, Middle Initial)  
Mailing Address 33 Commonwealth Ave  
City Boston State MA Zip Code 02116  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
The Topol Group LLC President  
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 / 21 / 2015  
**Transaction ID : C10793239A**  
Amount of Each Receipt this Period  
5000.00  
**\* Earmarked Contribution: See Below**

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 10000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |          |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 38 OF 113  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

**A. ActBlue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 102107.07

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2015  
**Transaction ID : C10793239AB**  
 Amount of Each Receipt this Period  
 5000.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B. Katherine S. Villers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 Whits End Rd  
 City Concord State MA Zip Code 01742-5411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Community Catalyst President  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 08 / 2015  
**Transaction ID : C10823245**  
 Amount of Each Receipt this Period  
 5000.00

**C. Susan Whitehead**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 505 Tremont St Unit 901  
 City Boston State MA Zip Code 02116-6355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2015  
**Transaction ID : C10819882A**  
 Amount of Each Receipt this Period  
 2500.00  
 \* Earmarked Contribution: See Below

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 7500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 39 OF 113  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
102107.07

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2015  
**Transaction ID : C10819882AB**

Amount of Each Receipt this Period  
2500.00

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

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

Mailing Address 304 Hillcrest Ct

City West Lake Hills State TX Zip Code 78746-5491

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

Name of Employer Occupation  
Calendar Club LLC Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2015  
**Transaction ID : C10800932**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 88 Pine Grove Street

City Needham State MA Zip Code 02494

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

Name of Employer Occupation  
Self Employed Software

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 18 / 2015  
**Transaction ID : C10824780A**

Amount of Each Receipt this Period  
5000.00

\* Earmarked Contribution: See Below

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 7500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER: PAGE 40 OF 113  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

**A. ActBlue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 102107.07

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : C10824780AB**  
 Amount of Each Receipt this Period  
 5000.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

|  |           |
|--|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 0.00      |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 181150.00 |



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

|   |                              |   |   |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one)       | PAGE 41 OF 113  |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)  
**A. Bakery Confectionery Tobacco Wkrs & Grain Millers Int'l Union PAC**

Mailing Address 10401 Connecticut Ave

City Kensington State MD Zip Code 20895

FEC ID number of contributing federal political committee. **C** C00127621

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2015  
**Transaction ID : C10758371**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**B. Brotherhood of Locomotive Engineers & Trainmen PAC Fund**

Mailing Address 1370 Ontario St

City Cleveland State OH Zip Code 44113-1744

FEC ID number of contributing federal political committee. **C** C00099234

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2015  
**Transaction ID : C10789952**

Amount of Each Receipt this Period  
 1250.00

Full Name (Last, First, Middle Initial)  
**C. Communications Workers of America-Cope Political Contributions Committee**

Mailing Address 501 Third Street, NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2015  
**Transaction ID : C10789951**

Amount of Each Receipt this Period  
 5000.00

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 8750.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |                              |   |   |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one)       | PAGE 42 OF 113  |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)  
**A. International Brotherhood of Electrical Workers PAC (IBEW PAC)**

Mailing Address 900 Seventh Street, NW

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Washington | State<br>DC | Zip Code<br>20001 |
|--------------------|-------------|-------------------|

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

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    | / | 28    | / | 2015        |

**Transaction ID : C10836956**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. Iron Mountain Incorporated Employees PAC**

Mailing Address 1 Federal St

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>Boston | State<br>MA | Zip Code<br>02110-2012 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00523936

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 05    | / | 2015        |

**Transaction ID : C10800930**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. National Postal Mail Handlers Union-Division of Laborers' Int'l Union of North America**

Mailing Address 905 16th Street NW  
2nd Floor

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Washington | State<br>DC | Zip Code<br>20006 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00345306

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    | / | 21    | / | 2015        |

**Transaction ID : C10831114**

Amount of Each Receipt this Period  
5000.00

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 15000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |          |

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

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

FOR LINE NUMBER: PAGE 43 OF 113  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

**A. Realtors Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 N. Michigan Ave  
 City Chicago State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C** C00030718  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2015  
**Transaction ID : C10831133**  
 Amount of Each Receipt this Period  
 2000.00

**B. United Association Political Education Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Three Park Place  
 City Annapolis State MD Zip Code 21401  
 FEC ID number of contributing federal political committee. **C** C00012476  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2015  
**Transaction ID : C10758370**  
 Amount of Each Receipt this Period  
 5000.00

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

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 7000.00  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 30750.00 |

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 44 OF 113 |
|   | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
**PAC for a Level Playing Field**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Cambridge Trust Company</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>07 / 17 / 2015<br><b>Transaction ID : C10773287</b> |
| Mailing Address 1336 Massachusetts Ave  |                                     | Amount of Each Receipt this Period<br>329.74  |
| City Cambridge  | State MA                            | Zip Code 02138-3842   |
| FEC ID number of contributing federal political committee.  | C                                   |   |
| Name of Employer  | Occupation                          |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3398.45 | * Interest  |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Cambridge Trust Company</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>07 / 31 / 2015<br><b>Transaction ID : C10773288</b> |
| Mailing Address 1336 Massachusetts Ave  |                                     | Amount of Each Receipt this Period<br>6.07  |
| City Cambridge  | State MA                            | Zip Code 02138-3842   |
| FEC ID number of contributing federal political committee.  | C                                   |   |
| Name of Employer  | Occupation                          |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3398.45 | * Interest  |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Cambridge Trust Company</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 17 / 2015<br><b>Transaction ID : C10776601</b> |
| Mailing Address 1336 Massachusetts Ave  |                                     | Amount of Each Receipt this Period<br>340.96  |
| City Cambridge  | State MA                            | Zip Code 02138-3842   |
| FEC ID number of contributing federal political committee.  | C                                   |   |
| Name of Employer  | Occupation                          |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3398.45 | * Interest  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 676.77 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

FOR LINE NUMBER: PAGE 45 OF 113  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)  
**A. Cambridge Trust Company**

Mailing Address 1336 Massachusetts Ave

City State Zip Code  
 Cambridge MA 02138-3842

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3398.45

Date of Receipt  
 08 / 31 / 2015  
**Transaction ID : C1077602**

Amount of Each Receipt this Period  
 4.27

\* Interest

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

Mailing Address 1336 Massachusetts Ave

City State Zip Code  
 Cambridge MA 02138-3842

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3398.45

Date of Receipt  
 09 / 17 / 2015  
**Transaction ID : C10804739**

Amount of Each Receipt this Period  
 341.19

\* Interest

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

Mailing Address 1336 Massachusetts Ave

City State Zip Code  
 Cambridge MA 02138-3842

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3398.45

Date of Receipt  
 09 / 30 / 2015  
**Transaction ID : C10804738**

Amount of Each Receipt this Period  
 4.20

\* Interest

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 349.66

**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 113                         |
| <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)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)  
**A. Cambridge Trust Company**

Mailing Address 1336 Massachusetts Ave

City Cambridge State MA Zip Code 02138-3842

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3398.45

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 17 / 2015  
**Transaction ID : C10816751**

Amount of Each Receipt this Period  
330.40

\* Interest

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

Mailing Address 1336 Massachusetts Ave

City Cambridge State MA Zip Code 02138-3842

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3398.45

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 31 / 2015  
**Transaction ID : C10816752**

Amount of Each Receipt this Period  
4.59

\* Interest

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

Mailing Address 1336 Massachusetts Ave

City Cambridge State MA Zip Code 02138-3842

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3398.45

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 17 / 2015  
**Transaction ID : C10836754**

Amount of Each Receipt this Period  
341.65

\* Interest

|   |   |        |
|---|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | ▶ | 676.64 |
| <b>TOTAL</b> This Period (last page this line number only)..... | ▶ |        |

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

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

FOR LINE NUMBER: PAGE 47 OF 113  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)  
**A. Cambridge Trust Company**

Mailing Address 1336 Massachusetts Ave

City State Zip Code  
 Cambridge MA 02138-3842

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3398.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : C10836755**

Amount of Each Receipt this Period  
 4.61

\* Interest

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

Mailing Address 1336 Massachusetts Ave

City State Zip Code  
 Cambridge MA 02138-3842

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3398.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 17 / 2015

**Transaction ID : C10841656**

Amount of Each Receipt this Period  
 330.84

\* Interest

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

Mailing Address 1336 Massachusetts Ave

City State Zip Code  
 Cambridge MA 02138-3842

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3398.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : C10841655**

Amount of Each Receipt this Period  
 4.60

\* Interest

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 340.05  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 2043.12 |

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

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

FOR LINE NUMBER: PAGE 48 OF 113  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

**A.** Full Name (Last, First, Middle Initial)  
**Friends for Harry Reid**

Mailing Address PO Box 19163

City Las Vegas State NV Zip Code 89132-0163

FEC ID number of contributing federal political committee. **C** C00204370

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2015

**Transaction ID : C10758373**

Amount of Each Receipt this Period  
 5000.00

Refund of 2016 General Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 5000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 5000.00 |



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2015

Transaction ID : D765483

Amount of Each Disbursement this Period

1.98

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 13 / 2015

Transaction ID : D766041

Amount of Each Disbursement this Period

301.72

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 20 / 2015

Transaction ID : D766237

Amount of Each Disbursement this Period

100.18

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

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

403.88

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2015

Transaction ID : D766357

Amount of Each Disbursement this Period

199.30

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2015

Transaction ID : D766677

Amount of Each Disbursement this Period

3.69

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2015

Transaction ID : D767094

Amount of Each Disbursement this Period

2.24

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

205.23

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2015

Transaction ID : D767095

Amount of Each Disbursement this Period

4.55

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 24 / 2015

Transaction ID : D767185

Amount of Each Disbursement this Period

1.60

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2015

Transaction ID : D767650

Amount of Each Disbursement this Period

4.09

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

10.24

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

**Transaction ID : D768001**

Amount of Each Disbursement this Period

99.94

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2015

**Transaction ID : D768145**

Amount of Each Disbursement this Period

595.52

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2015

**Transaction ID : D768337**

Amount of Each Disbursement this Period

108.08

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

803.54

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D768803**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D768804**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D769697**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2015

Transaction ID : D769874

Amount of Each Disbursement this Period

404.75

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 26 / 2015

Transaction ID : D769987

Amount of Each Disbursement this Period

791.40

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

Transaction ID : D770451

Amount of Each Disbursement this Period

201.59

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

1397.74

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2015

**Transaction ID : D770952**

Amount of Each Disbursement this Period

98.75

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2015

**Transaction ID : D771078**

Amount of Each Disbursement this Period

398.08

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 25 / 2015

**Transaction ID : D771431**

Amount of Each Disbursement this Period

198.81

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

695.64

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2015

**Transaction ID : D771837**

Amount of Each Disbursement this Period

3.50

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 04 / 2015

**Transaction ID : D771838**

Amount of Each Disbursement this Period

0.99

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 14 / 2015

**Transaction ID : D772102**

Amount of Each Disbursement this Period

1.71

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

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

6.20



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 21 / 2015

Transaction ID : D772246

Amount of Each Disbursement this Period

0.07

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 28 / 2015

Transaction ID : D772247

Amount of Each Disbursement this Period

3.30

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement  
Merchant Service Fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : D772469

Amount of Each Disbursement this Period

6.92

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

10.29

**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)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Big Sky, Inc.**

Mailing Address PO Box 4835

City Vineyard Haven State MA Zip Code 02568

Purpose of Disbursement  
Reception - Event Supplies

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 14 / 2015

Transaction ID : D766381

Amount of Each Disbursement this Period

273.83

Full Name (Last, First, Middle Initial)

**B. Cambridge Trust Company**

Mailing Address 1336 Massachusetts Ave

City Cambridge State MA Zip Code 02138-3842

Purpose of Disbursement  
Bank Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 22 / 2015

Transaction ID : D767096

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Cambridge Trust Company**

Mailing Address 1336 Massachusetts Ave

City Cambridge State MA Zip Code 02138-3842

Purpose of Disbursement  
Bank Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2015

Transaction ID : D767097

Amount of Each Disbursement this Period

30.00

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

328.83

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Cambridge Trust Company**

Mailing Address 1336 Massachusetts Ave

City Cambridge State MA Zip Code 02138-3842

Purpose of Disbursement  
Bank Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D767098**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Cambridge Trust Company**

Mailing Address 1336 Massachusetts Ave

City Cambridge State MA Zip Code 02138-3842

Purpose of Disbursement  
Bank Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D769668**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Cambridge Trust Company**

Mailing Address 1336 Massachusetts Ave

City Cambridge State MA Zip Code 02138-3842

Purpose of Disbursement  
Bank Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D767525**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Cambridge Trust Company**

Mailing Address 1336 Massachusetts Ave

City Cambridge State MA Zip Code 02138-3842

Purpose of Disbursement  
Bank Fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D772172**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Cambridge Trust Company**

Mailing Address 1336 Massachusetts Ave

City Cambridge State MA Zip Code 02138-3842

Purpose of Disbursement  
Bank Fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D770841**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Cambridge Trust Company**

Mailing Address 1336 Massachusetts Ave

City Cambridge State MA Zip Code 02138-3842

Purpose of Disbursement  
Bank Fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D772943**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Colleen M. Coffey**

Mailing Address 41 West Second Street  
Unit 7

City Boston State MA Zip Code 02127

Purpose of Disbursement  
Fundraising Consulting Services

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2015

Transaction ID : D769688

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Colleen M. Coffey**

Mailing Address 41 West Second Street  
Unit 7

City Boston State MA Zip Code 02127

Purpose of Disbursement  
Fundraising Consulting Services

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2015

Transaction ID : D772173

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Colleen M. Coffey**

Mailing Address 41 West Second Street  
Unit 7

City Boston State MA Zip Code 02127

Purpose of Disbursement  
Fundraising Consulting Services

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2015

Transaction ID : D772206

Amount of Each Disbursement this Period

12500.00

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

22500.00

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Colleen M. Coffey**

Mailing Address 41 West Second Street  
Unit 7

City Boston State MA Zip Code 02127

Purpose of Disbursement  
Fundraising Consulting Services

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 24 / 2015

Transaction ID : D767534

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Colleen M. Coffey**

Mailing Address 41 West Second Street  
Unit 7

City Boston State MA Zip Code 02127

Purpose of Disbursement  
Fundraising Consulting Services

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 28 / 2015

Transaction ID : D767099

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Lucky Strike Philadelphia**

Mailing Address 1336 Chestnut Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement  
Reception - Catering & Facilities

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2015

Transaction ID : D772207

Amount of Each Disbursement this Period

13387.20

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

23387.20

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Mailing Address 1101 15th St NW Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement Database Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D772174**

Amount of Each Disbursement this Period

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 Database Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D767101**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Perkins Coie**

Mailing Address 700 13th St NW Ste 600

City Washington State DC Zip Code 20005-3960

Purpose of Disbursement Legal Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D772188**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie**

Mailing Address 700 13th St NW Ste 600

City Washington State DC Zip Code 20005-3960

Purpose of Disbursement  
Legal Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2015

Transaction ID : D769676

Amount of Each Disbursement this Period

258.00

Full Name (Last, First, Middle Initial)

**B. Perkins Coie**

Mailing Address 700 13th St NW Ste 600

City Washington State DC Zip Code 20005-3960

Purpose of Disbursement  
Legal Services

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2015

Transaction ID : D772222

Amount of Each Disbursement this Period

172.00

Full Name (Last, First, Middle Initial)

**C. Michael Pratt**

Mailing Address 6 Peter Cooper Rd  
Apt 3E

City New York State NY Zip Code 10010

Purpose of Disbursement  
Fundraising Consulting Services

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2015

Transaction ID : D770843

Amount of Each Disbursement this Period

5000.00

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

5430.00

**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)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Michael Pratt**

Mailing Address 6 Peter Cooper Rd  
Apt 3E

City New York State NY Zip Code 10010

Purpose of Disbursement  
Fundraising Consulting Services

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : D772189

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Michael Pratt**

Mailing Address 6 Peter Cooper Rd  
Apt 3E

City New York State NY Zip Code 10010

Purpose of Disbursement  
Fundraising Consulting Services

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : D772214

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

**C. Michael Pratt**

Mailing Address 6 Peter Cooper Rd  
Apt 3E

City New York State NY Zip Code 10010

Purpose of Disbursement  
Fundraising Consulting Services

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2015

Transaction ID : D767539

Amount of Each Disbursement this Period

5000.00

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

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

22500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

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

Date of Disbursement: MM / DD / YYYY  
07 / 28 / 2015

Mailing Address: 6 Peter Cooper Rd Apt 3E

City: New York State: NY Zip Code: 10010

Purpose of Disbursement: Fundraising Consulting Services

Candidate Name:

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **D767100**

Amount of Each Disbursement this Period: 5000.00

Category/Type: 003

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

Date of Disbursement: MM / DD / YYYY  
07 / 14 / 2015

Mailing Address: 3711 Huntington Street NW

City: Washington State: DC Zip Code: 20015

Purpose of Disbursement: General PAC Consulting

Candidate Name:

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **D766380**

Amount of Each Disbursement this Period: 2000.00

Category/Type: 001

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

Date of Disbursement: MM / DD / YYYY  
09 / 14 / 2015

Mailing Address: 3711 Huntington Street NW

City: Washington State: DC Zip Code: 20015

Purpose of Disbursement: General PAC Consulting

Candidate Name:

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **D767543**

Amount of Each Disbursement this Period: 2000.00

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9000.00

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Ripple Point Consulting**

Mailing Address 3711 Huntington Street NW

City Washington State DC Zip Code 20015

Purpose of Disbursement  
General PAC Consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D772204**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Ripple Point Consulting**

Mailing Address 3711 Huntington Street NW

City Washington State DC Zip Code 20015

Purpose of Disbursement  
General PAC Consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D770890**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Ripple Point Consulting**

Mailing Address 3711 Huntington Street NW

City Washington State DC Zip Code 20015

Purpose of Disbursement  
General PAC Consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D769689**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Ripple Point Consulting**

Mailing Address 3711 Huntington Street NW

City Washington State DC Zip Code 20015

Purpose of Disbursement  
General PAC Consulting

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D772221**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Verdolino & Lowey**

Mailing Address 124 Washington St Ste 101

City Foxboro State MA Zip Code 02035-1368

Purpose of Disbursement  
Professional Services - Accounting & Compliance

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D770891**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Verdolino & Lowey**

Mailing Address 124 Washington St Ste 101

City Foxboro State MA Zip Code 02035-1368

Purpose of Disbursement  
Professional Services - Accounting & Compliance

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D770842**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Verdolino &amp; Lowey</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 01 / 2015 |
| Mailing Address 124 Washington St Ste 101   |  | <b>Transaction ID : D772205</b>                          |
| City<br>Foxboro   | State<br>MA  |  |
| Purpose of Disbursement<br>Professional Services - Accounting & Compliance  |  | Amount of Each Disbursement this Period                  |
| Candidate Name  |  | 791.17   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: _____  | District: _____  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Verdolino &amp; Lowey</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 24 / 2015 |
| Mailing Address 124 Washington St Ste 101   |  | <b>Transaction ID : D767544</b>                          |
| City<br>Foxboro   | State<br>MA  |  |
| Purpose of Disbursement<br>Professional Services - Accounting & Compliance  |  | Amount of Each Disbursement this Period                  |
| Candidate Name  |  | 1337.58  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: _____  | District: _____  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Verdolino &amp; Lowey</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 20 / 2015 |
| Mailing Address 124 Washington St Ste 101   |  | <b>Transaction ID : D766394</b>                          |
| City<br>Foxboro   | State<br>MA  |  |
| Purpose of Disbursement<br>Professional Services - Accounting & Compliance  |  | Amount of Each Disbursement this Period                  |
| Candidate Name  |  | 1111.01  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: _____  | District: _____  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 3239.76 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card - See Below if Itemized

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 / 06 / 2015

Transaction ID : D766363

Amount of Each Disbursement this Period

178.64

Full Name (Last, First, Middle Initial)

**B. Avis**

Mailing Address Phoenix Sky Harbor  
1805 East Sky Harbor Circle South

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

002  
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 / 06 / 2015

Transaction ID : D766364

Amount of Each Disbursement this Period

178.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Citi Cards**

Mailing Address Processing Center

City Des Moines State IA Zip Code 50363

Purpose of Disbursement  
Credit Card - See Below if Itemized

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 / 07 / 2015

Transaction ID : D766365

Amount of Each Disbursement this Period

606.21

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

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

784.85

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Hilton Hartford**

Mailing Address 315 Trumbull Street

City Hartford State CT Zip Code 06103

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D766366**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Colleen M. Coffey**

Mailing Address 41 West Second Street  
Unit 7

City Boston State MA Zip Code 02127

Purpose of Disbursement  
Postage Reimbursement - See Below if Itemized

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D766378**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Cambridge Trust Company Cardmember Service**

Mailing Address PO Box 790408

City Saint Louis State MO Zip Code 63179

Purpose of Disbursement  
Credit Card - See Below if Itemized

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D766382**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address PO Box 619616

City Dallas State TX Zip Code 75261-9616

Purpose of Disbursement  
Travel

**002**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : D766383**

Amount of Each Disbursement this Period

667.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address PO Box 619616

City Dallas State TX Zip Code 75261-9616

Purpose of Disbursement  
Travel

**002**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : D766384**

Amount of Each Disbursement this Period

516.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Charles Hotel**

Mailing Address 1 Bennett St

City Cambridge State MA Zip Code 02138-5707

Purpose of Disbursement  
Reception - Catering

**003**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : D766390**

Amount of Each Disbursement this Period

2236.88

[MEMO ITEM]

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Hotels.com**

Mailing Address 5400 Lyndon B Johnson Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : D766389

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Hotels.com**

Mailing Address 5400 Lyndon B Johnson Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : D766392

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : D766391

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. US Airways**

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D766385

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D766386

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. US Airways**

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D766387

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

**A. US Airways**

Full Name (Last, First, Middle Initial)

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 20 / 2015

**Transaction ID : D766388**

Amount of Each Disbursement this Period: 306.10

**[MEMO ITEM]**

Category/Type: 002

**B. Colleen M. Coffey**

Full Name (Last, First, Middle Initial)

Mailing Address 41 West Second Street Unit 7

City Boston State MA Zip Code 02127

Purpose of Disbursement Travel & Meals Reimbursement - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 20 / 2015

**Transaction ID : D766395**

Amount of Each Disbursement this Period: 129.63

Category/Type: 001

**C. American Express**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement Credit Card - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 03 / 2015

**Transaction ID : D767517**

Amount of Each Disbursement this Period: 371.59

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 501.22

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Avis**

Mailing Address Phoenix Sky Harbor  
1805 East Sky Harbor Circle South

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D767518**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Cambridge Trust Company Cardmember Service**

Mailing Address PO Box 790408

City Saint Louis State MO Zip Code 63179

Purpose of Disbursement  
Credit Card - See Below if Itemized

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D767528**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D767532**

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D767533**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Black Sheep Charcuterie**

Mailing Address 18 North Summer Street

City Edgartown State MA Zip Code 02539

Purpose of Disbursement  
Reception - Catering

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D767530**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Vineyard Square Hotel**

Mailing Address 38 North Water Street

City Edgartown State MA Zip Code 02539

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D767531**

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Colleen M. Coffey**

Mailing Address 41 West Second Street  
Unit 7

City Boston State MA Zip Code 02127

Purpose of Disbursement  
Travel Reimbursement - See Below if Itemized

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D767536**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Citi Cards**

Mailing Address Processing Center

City Des Moines State IA Zip Code 50363

Purpose of Disbursement  
Credit Card - See Below if Itemized

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D769670**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D769673**

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D769674**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Cambridge Trust Company Cardmember Service**

Mailing Address PO Box 790408

City Saint Louis State MO Zip Code 63179

Purpose of Disbursement  
Credit Card - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D769677**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address PO Box 619616

City Dallas State TX Zip Code 75261-9616

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D769679**

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address PO Box 619616

City Dallas State TX Zip Code 75261-9616

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : D769680**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : D769678**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Hotels.com**

Mailing Address 5400 Lyndon B Johnson Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : D769683**

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Hotels.com**

Mailing Address 5400 Lyndon B Johnson Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D769684**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D769681**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D769682**

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card - See Below if Itemized

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : D770840**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Avis**

Mailing Address 4000 International Lane

City Madison State WI Zip Code 53704

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : D770897**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Hertz Car Rental**

Mailing Address 14501 Hertz Quail Springs Pkwy

City Oklahoma City State OK Zip Code 73134-2628

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : D770892**

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Citi Cards**

Mailing Address Processing Center

City Des Moines State IA Zip Code 50363

Purpose of Disbursement Credit Card - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2015

Transaction ID : D770844

Amount of Each Disbursement this Period: 369.55

Category/Type: 001

Full Name (Last, First, Middle Initial)

**B. Hilton Garden Inn**

Mailing Address 63 West 35th Street

City New York State NY Zip Code 10001

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2015

Transaction ID : D770845

Amount of Each Disbursement this Period: 369.55

Category/Type: 002

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Colleen M. Coffey**

Mailing Address 41 West Second Street Unit 7

City Boston State MA Zip Code 02127

Purpose of Disbursement Postage Reimbursement - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 13 / 2015

Transaction ID : D770848

Amount of Each Disbursement this Period: 20.67

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 390.22

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Cambridge Trust Company Cardmember Service**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 7 |   | 2 | 0 | 1 | 5 |

Mailing Address PO Box 790408

**Transaction ID : D770851**

City State Zip Code  
Saint Louis MO 63179

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| 5 | 7 | 6 | 1 | . | 5 | 8 |
|---|---|---|---|---|---|---|

Purpose of Disbursement  
Credit Card - See Below if Itemized

|                   |
|-------------------|
| 001               |
| Category/<br>Type |

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 7 |   | 2 | 0 | 1 | 5 |

Mailing Address PO Box 619616

**Transaction ID : D770872**

City State Zip Code  
Dallas TX 75261-9616

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 3 | 5 | 9 | . | 6 | 0 |
|---|---|---|---|---|---|

Purpose of Disbursement  
Travel

|                   |
|-------------------|
| 002               |
| Category/<br>Type |

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 7 |   | 2 | 0 | 1 | 5 |

Mailing Address PO Box 619616

**Transaction ID : D770873**

City State Zip Code  
Dallas TX 75261-9616

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 2 | 3 | 5 | . | 6 | 0 |
|---|---|---|---|---|---|

Purpose of Disbursement  
Travel

|                   |
|-------------------|
| 002               |
| Category/<br>Type |

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**[MEMO ITEM]**

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

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

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| 5 | 7 | 6 | 1 | . | 5 | 8 |
|---|---|---|---|---|---|---|

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| 5 | 7 | 6 | 1 | . | 5 | 8 |
|---|---|---|---|---|---|---|

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D770852**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D770853**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D770854**

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 27 |   |   | 2015 |   |   |   |

**Transaction ID : D770855**

Amount of Each Disbursement this Period

|       |
|-------|
| 53.00 |
|-------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 27 |   |   | 2015 |   |   |   |

**Transaction ID : D770856**

Amount of Each Disbursement this Period

|        |
|--------|
| 158.00 |
|--------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 27 |   |   | 2015 |   |   |   |

**Transaction ID : D770857**

Amount of Each Disbursement this Period

|        |
|--------|
| 158.00 |
|--------|

[MEMO ITEM]

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

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

|      |
|------|
| 0.00 |
|------|

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

|   |                |  |
|---|----------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amtrak</b>   |                | Date of Disbursement<br>MM / DD / YYYY<br>10 / 27 / 2015   |
| Mailing Address 50 Massachusetts Ave NE   |                | <b>Transaction ID : D770858</b>  |
| City<br>Washington  | State<br>DC    |  |
| Purpose of Disbursement<br>Travel   | Candidate Name | Amount of Each Disbursement this Period<br>123.00  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: District:  |                |  |

|   |                |  |
|---|----------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Amtrak</b>   |                | Date of Disbursement<br>MM / DD / YYYY<br>10 / 27 / 2015   |
| Mailing Address 50 Massachusetts Ave NE   |                | <b>Transaction ID : D770859</b>  |
| City<br>Washington  | State<br>DC    |  |
| Purpose of Disbursement<br>Travel   | Candidate Name | Amount of Each Disbursement this Period<br>61.00   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: District:  |                |  |

|   |                |  |
|---|----------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Amtrak</b>   |                | Date of Disbursement<br>MM / DD / YYYY<br>10 / 27 / 2015   |
| Mailing Address 50 Massachusetts Ave NE   |                | <b>Transaction ID : D770860</b>  |
| City<br>Washington  | State<br>DC    |  |
| Purpose of Disbursement<br>Travel   | Candidate Name | Amount of Each Disbursement this Period<br>225.00  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: District:  |                |  |

|  |      |
|--|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |      |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel Credit

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D770861

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D770862

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Carey International**

Mailing Address PO Box 842350

City Boston State MA Zip Code 02284

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D770885

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 27 / 2015

Transaction ID : D770865

Amount of Each Disbursement this Period: 293.60

Category/Type: 002

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 27 / 2015

Transaction ID : D770866

Amount of Each Disbursement this Period: 293.60

Category/Type: 002

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 27 / 2015

Transaction ID : D770867

Amount of Each Disbursement this Period: 35.00

Category/Type: 002

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 27 |   |   | 2015 |   |   |   |

**Transaction ID : D770868**

Amount of Each Disbursement this Period

|       |
|-------|
| 25.00 |
|-------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Hotels.com**

Mailing Address 5400 Lyndon B Johnson Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 27 |   |   | 2015 |   |   |   |

**Transaction ID : D770869**

Amount of Each Disbursement this Period

|        |
|--------|
| 447.76 |
|--------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Hotels.com**

Mailing Address 5400 Lyndon B Johnson Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 27 |   |   | 2015 |   |   |   |

**Transaction ID : D770870**

Amount of Each Disbursement this Period

|        |
|--------|
| 247.26 |
|--------|

[MEMO ITEM]

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

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

|      |
|------|
| 0.00 |
|------|

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Hotels.com**

Mailing Address 5400 Lyndon B Johnson Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 27 / 2015

Transaction ID : **D770871**

Amount of Each Disbursement this Period: 483.56

**[MEMO ITEM]**

Category/Type: 002

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 27 / 2015

Transaction ID : **D770863**

Amount of Each Disbursement this Period: 486.00

**[MEMO ITEM]**

Category/Type: 002

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 27 / 2015

Transaction ID : **D770864**

Amount of Each Disbursement this Period: 544.00

**[MEMO ITEM]**

Category/Type: 002

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Cambridge Trust Company Cardmember Service**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 0 |   | 2 | 0 | 1 | 5 |

Mailing Address PO Box 790408

**Transaction ID : D772175**

City State Zip Code  
Saint Louis MO 63179

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| 3 | 8 | 8 | 3 | . | 6 | 1 |
|---|---|---|---|---|---|---|

Purpose of Disbursement  
Credit Card - See Below if Itemized

|                   |
|-------------------|
| 001               |
| Category/<br>Type |

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 0 |   | 2 | 0 | 1 | 5 |

Mailing Address 50 Massachusetts Ave NE

**Transaction ID : D772180**

City State Zip Code  
Washington DC 20002-4214

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 2 | 1 | 5 | . | 0 | 0 |
|---|---|---|---|---|---|

Purpose of Disbursement  
Travel

|                   |
|-------------------|
| 002               |
| Category/<br>Type |

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 0 |   | 2 | 0 | 1 | 5 |

Mailing Address 50 Massachusetts Ave NE

**Transaction ID : D772181**

City State Zip Code  
Washington DC 20002-4214

Amount of Each Disbursement this Period

|   |   |   |   |   |
|---|---|---|---|---|
| 5 | 8 | . | 0 | 0 |
|---|---|---|---|---|

Purpose of Disbursement  
Travel

|                   |
|-------------------|
| 002               |
| Category/<br>Type |

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**[MEMO ITEM]**

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

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

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 3 | 8 | 8 | . | 6 | 1 |
|---|---|---|---|---|---|

|  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
|--|--|--|--|--|--|

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 10 / 2015

**Transaction ID : D772182**

Amount of Each Disbursement this Period: 214.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 10 / 2015

**Transaction ID : D772183**

Amount of Each Disbursement this Period: 34.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Charles Hotel**

Mailing Address 1 Bennett St

City Cambridge State MA Zip Code 02138-5707

Purpose of Disbursement Reception - Catering

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 10 / 2015

**Transaction ID : D772176**

Amount of Each Disbursement this Period: 1940.00

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D772184

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Hotels.com**

Mailing Address 5400 Lyndon B Johnson Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D772185

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D772187

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Virgin America**

Mailing Address 555 Airport Blvd

City Burlingame State CA Zip Code 94010

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 10 / 2015

**Transaction ID : D772177**

Amount of Each Disbursement this Period: 235.10

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Virgin America**

Mailing Address 555 Airport Blvd

City Burlingame State CA Zip Code 94010

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 10 / 2015

**Transaction ID : D772178**

Amount of Each Disbursement this Period: 50.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Virgin America**

Mailing Address 555 Airport Blvd

City Burlingame State CA Zip Code 94010

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 10 / 2015

**Transaction ID : D772179**

Amount of Each Disbursement this Period: 532.10

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**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)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Michael Pratt**

Mailing Address 6 Peter Cooper Rd  
Apt 3E

City New York State NY Zip Code 10010

Purpose of Disbursement  
Reimbursement - See Below if Itemized

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 10 / 2015

**Transaction ID : D772190**

Amount of Each Disbursement this Period

3116.90

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address PO Box 619616

City Dallas State TX Zip Code 75261-9616

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 10 / 2015

**Transaction ID : D772200**

Amount of Each Disbursement this Period

253.60

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. JetBlue Airways**

Mailing Address 6322 S 300 W  
Ste G10

City Salt Lake City State UT Zip Code 84107-7032

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 10 / 2015

**Transaction ID : D772202**

Amount of Each Disbursement this Period

396.20

**[MEMO ITEM]**

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

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

3116.90



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. NYC Taxi**

Mailing Address 4250 24th St

City Long Island City State NY Zip Code 11101-4608

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D772201

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. NYC Taxi**

Mailing Address 4250 24th St

City Long Island City State NY Zip Code 11101-4608

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D772193

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. NYC Taxi**

Mailing Address 4250 24th St

City Long Island City State NY Zip Code 11101-4608

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D772194

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Union Square Cafe**

Mailing Address 21 E 16th St

City New York State NY Zip Code 10003-3104

Purpose of Disbursement Meals

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 10 / 2015

Transaction ID : D772195

Amount of Each Disbursement this Period: 207.40

Category/Type: 001

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 10 / 2015

Transaction ID : D772198

Amount of Each Disbursement this Period: 221.60

Category/Type: 002

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 10 / 2015

Transaction ID : D772191

Amount of Each Disbursement this Period: 560.60

Category/Type: 002

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D772192

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. W New York Union Square**

Mailing Address 201 Park Ave S

City New York State NY Zip Code 10003-1634

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D772197

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Michael Pratt**

Mailing Address 6 Peter Cooper Rd  
Apt 3E

City New York State NY Zip Code 10010

Purpose of Disbursement  
Reimbursement - See Below if Itemized

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D772208

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address PO Box 619616

City Dallas State TX Zip Code 75261-9616

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : D772212

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address PO Box 619616

City Dallas State TX Zip Code 75261-9616

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : D772213

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Cambridge Trust Company Cardmember Service**

Mailing Address PO Box 790408

City Saint Louis State MO Zip Code 63179

Purpose of Disbursement  
Credit Card - See Below if Itemized

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : D772223

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                              |                             |                              |
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| <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)  
**PAC for a Level Playing Field**

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

Date of Disbursement:  /  /

Mailing Address: 1 Bennett St

City: Cambridge State: MA Zip Code: 02138-5707

Purpose of Disbursement: Reception - Catering

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : **D772224**

Amount of Each Disbursement this Period:

**[MEMO ITEM]**

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

Date of Disbursement:  /  /

Mailing Address: PO Box 1270

City: Newark State: NJ Zip Code: 07101-1270

Purpose of Disbursement: Credit Card - See Below if Itemized

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : **D772233**

Amount of Each Disbursement this Period:

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

Date of Disbursement:  /  /

Mailing Address: 4000 International Lane

City: Madison State: WI Zip Code: 53704

Purpose of Disbursement: Travel

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : **D772235**

Amount of Each Disbursement this Period:

**[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)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Hilton New York**

Mailing Address 1335 Avenue of the Americas

City New York State NY Zip Code 10019

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 04 / 2015

**Transaction ID : D772237**

Amount of Each Disbursement this Period

403.98

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. NYC Taxi**

Mailing Address 4250 24th St

City Long Island City State NY Zip Code 11101-4608

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 04 / 2015

**Transaction ID : D772238**

Amount of Each Disbursement this Period

19.10

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 04 / 2015

**Transaction ID : D772239**

Amount of Each Disbursement this Period

936.75

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

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

936.75

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Hertz Car Rental**

Mailing Address 14501 Hertz Quail Springs Pkwy

City Oklahoma City State OK Zip Code 73134-2628

Purpose of Disbursement  
Travel Credit

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D772241

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Hyatt Regency**

Mailing Address 2799 Jefferson Davis Highway

City Arlington State VA Zip Code 22202

Purpose of Disbursement  
Meals Credit

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D772242

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Hyatt Regency**

Mailing Address 2799 Jefferson Davis Highway

City Arlington State VA Zip Code 22202

Purpose of Disbursement  
Meals Credit

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : D772243

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Hyatt Regency**

Mailing Address 2799 Jefferson Davis Highway

City State Zip Code  
Arlington VA 22202

Purpose of Disbursement  
Meals

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D772244**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Hyatt Regency**

Mailing Address 2799 Jefferson Davis Highway

City State Zip Code  
Arlington VA 22202

Purpose of Disbursement  
Meals

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D772245**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Bennet Colorado Victory**

Mailing Address 1776 Platte St

City State Zip Code  
Denver CO 80202-1039

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District: 2015 Contribution

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2015

Transaction ID : D772231

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Catherine Cortez Masto for Senate**

Mailing Address 8020 S Rainbow Blvd  
# 100-112

City State Zip Code  
Las Vegas NV 89139-6483

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

**Catherine Cortez Masto**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NV District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2015

Transaction ID : D761962

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Catherine Cortez Masto for Senate**

Mailing Address 8020 S Rainbow Blvd  
# 100-112

City State Zip Code  
Las Vegas NV 89139-6483

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

**Catherine Cortez Masto**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NV District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2015

Transaction ID : D761963

Amount of Each Disbursement this Period

5000.00

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

15000.00

**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"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Connecticut Democratic State Central Committee**

Mailing Address 30 Arbor St  
Ste 404

City Hartford State CT Zip Code 06106

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District: 2015 Contribution

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2015

Transaction ID : D772229

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Democratic Party of Wisconsin**

Mailing Address 15 N Pinckney St  
Ste 200

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District: 2015 Contribution

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2015

Transaction ID : D772226

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Kirkpatrick for Senate**

Mailing Address PO Box 34421

City Phoenix State AZ Zip Code 85067-4421

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: AZ District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2015

Transaction ID : D769685

Amount of Each Disbursement this Period

5000.00

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

15000.00

**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"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Kirkpatrick for Senate</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 22 / 2015 |
| Mailing Address PO Box 34421   |  | <b>Transaction ID : D769686</b>                          |
| City<br>Phoenix  | State<br>AZ  |  |
| Zip Code<br>85067-4421   | Purpose of Disbursement<br>Contribution  | Amount of Each Disbursement this Period<br>5000.00       |
| Candidate Name<br><b>Ann Leila Kirkpatrick</b>   | Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Category/<br>Type<br>011                                 |
| Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: AZ District: 00   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Maggie for NH</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 09 / 2015 |
| Mailing Address PO Box 298   |  | <b>Transaction ID : D770846</b>                          |
| City<br>Concord  | State<br>NH  |  |
| Zip Code<br>03302-0298   | Purpose of Disbursement<br>Contribution  | Amount of Each Disbursement this Period<br>5000.00       |
| Candidate Name<br><b>Margaret Wood Hassan</b>  | Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Category/<br>Type<br>011                                 |
| Disbursement For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: NH District: 00   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Maggie for NH</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 09 / 2015 |
| Mailing Address PO Box 298   |  | <b>Transaction ID : D770847</b>                          |
| City<br>Concord  | State<br>NH  |  |
| Zip Code<br>03302-0298   | Purpose of Disbursement<br>Contribution  | Amount of Each Disbursement this Period<br>5000.00       |
| Candidate Name<br><b>Margaret Wood Hassan</b>  | Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Category/<br>Type<br>011                                 |
| Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: NH District: 00   |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 15000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |          |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Missouri Democratic State Committee**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12    |   | 22    |   | 2015      |

Mailing Address PO Box 719

**Transaction ID : D772230**

City State Zip Code  
Jefferson City MO 65102

Amount of Each Disbursement this Period

|          |
|----------|
| 5,000.00 |
|----------|

Purpose of Disbursement  
Contribution

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
2015 Contribution

State: District:

Full Name (Last, First, Middle Initial)

**B. Missourians for Kander**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 30    |   | 2015      |

Mailing Address PO Box 548

**Transaction ID : D767102**

City State Zip Code  
Columbia MO 65205-0548

Amount of Each Disbursement this Period

|          |
|----------|
| 5,000.00 |
|----------|

Purpose of Disbursement  
Contribution

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Candidate Name

**Jason Kander**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MO District: 00

Full Name (Last, First, Middle Initial)

**C. Missourians for Kander**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 30    |   | 2015      |

Mailing Address PO Box 548

**Transaction ID : D767103**

City State Zip Code  
Columbia MO 65205-0548

Amount of Each Disbursement this Period

|          |
|----------|
| 5,000.00 |
|----------|

Purpose of Disbursement  
Contribution

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Candidate Name

**Jason Kander**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MO District: 00

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

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

|          |
|----------|
| 15000.00 |
|----------|

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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"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Moulton for Congress Committee**

Mailing Address PO Box 2013

City Salem State MA Zip Code 01970-6213

Purpose of Disbursement  
Contribution

011

Candidate Name

**Seth Moulton**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MA District: 06

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2015

**Transaction ID : D769669**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Nevada State Democratic Party**

Mailing Address 409 Horn St

City Las Vegas State NV Zip Code 89107

Purpose of Disbursement  
Contribution

011

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District: 2015 Contribution

Date of Disbursement

MM / DD / YYYY  
12 / 22 / 2015

**Transaction ID : D772232**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. New Hampshire Democratic Party**

Mailing Address 105 N State St

City Concord State NH Zip Code 03301

Purpose of Disbursement  
Contribution

011

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District: 2015 Contribution

Date of Disbursement

MM / DD / YYYY  
12 / 22 / 2015

**Transaction ID : D772225**

Amount of Each Disbursement this Period

5000.00

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

12500.00

**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"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. People for Patty Murray**

Mailing Address PO Box 3662

City State Zip Code  
Seattle WA 98124-3662

Purpose of Disbursement  
Contribution

011

Candidate Name

**Patty Murray**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WA District: 00

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 5 |   | 2 | 0 | 1 | 5 |

**Transaction ID : D772217**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. People for Patty Murray**

Mailing Address PO Box 3662

City State Zip Code  
Seattle WA 98124-3662

Purpose of Disbursement  
Contribution

011

Candidate Name

**Patty Murray**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WA District: 00

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 5 |   | 2 | 0 | 1 | 5 |

**Transaction ID : D772218**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. Schatz for Senate**

Mailing Address PO Box 3828

City State Zip Code  
Honolulu HI 96812

Purpose of Disbursement  
Contribution

011

Candidate Name

**Brian Schatz**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: HI District: 00

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 5 |   | 2 | 0 | 1 | 5 |

**Transaction ID : D772215**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Strickland for Senate**

Mailing Address 545 E Town St

City Columbus State OH Zip Code 43215-4801

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ted Strickland**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OH District: 00

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 09 |   |   | 22 |   |   | 2015 |   |   |   |

**Transaction ID : D769687**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Strickland Ohio Victory Fund 2016**

Mailing Address 611 Pennsylvania Ave SE  
Ste 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement  
Contribution

011

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District: 2015 Contribution

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 22 |   |   | 2015 |   |   |   |

**Transaction ID : D772227**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. Vermont State Democratic Federal Campaign Committee**

Mailing Address PO Box 1220

City Montpelier State VT Zip Code 05601

Purpose of Disbursement  
Contribution

011

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District: 2015 Contribution

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 22 |   |   | 2015 |   |   |   |

**Transaction ID : D772228**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

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

|          |
|----------|
| 15000.00 |
|----------|

**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"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Wyden for Senate**

Mailing Address 232 NE 9th Ave

City Portland State OR Zip Code 97232-2915

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ronald L Wyden**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 15 / 2015

**Transaction ID : D772219**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Wyden for Senate**

Mailing Address 232 NE 9th Ave

City Portland State OR Zip Code 97232-2915

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ronald L Wyden**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 15 / 2015

**Transaction ID : D772220**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

10000.00

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

112500.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PAC for a Level Playing Field**

Full Name (Last, First, Middle Initial)

**A. Democratic Senatorial Campaign Committee**

Mailing Address 120 Maryland Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution to Headquarters Account

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
Headquarters

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 15 / 2015

Transaction ID : D772216

Amount of Each Disbursement this Period

45000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

45000.00

45000.00