

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
2016 DNCC Inc.

ADDRESS (number and street) 430 South Capitol Street, SE
Check if different than previously reported. (ACC) Washington DC 20003

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00571133 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [] / [] / [] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] / [] / [] in the State of []

5. Covering Period [11] / [29] / [2016] through [12] / [31] / [2016]

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

Signature of Treasurer Patel, Manisha, , , [Electronically Filed] Date [01] / [31] / [2017]

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

2016 DNCC Inc.

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="10587.88"/>	<input type="text" value="10587.88"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="309558.96"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="845.88"/>	<input type="text" value="17322619.05"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="310404.84"/>	<input type="text" value="17333206.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="109183.25"/>	<input type="text" value="17131985.34"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="201221.59"/>	<input type="text" value="201221.59"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on 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

Write or Type Committee Name

2016 DNCC Inc.

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	16770000.00
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).....	845.88	552619.05
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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)).....▶	845.88	17322619.05
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	845.88	17322619.05

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	109183.25	17131585.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	109183.25	17131585.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	400.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	109183.25	17131985.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	109183.25	17131985.34

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	109183.25	17131585.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	845.88	552619.05
38. Net Operating Expenditures (subtract Line 37 from Line 36)	108337.37	16578966.29

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

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

FOR LINE NUMBER: PAGE 6 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
2016 DNCC Inc.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HENDERSON, SEAN, , ,

Mailing Address 437 Markle Street

City Philadelphia State PA Zip Code 19128

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 845.88

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 12 / 2016

Transaction ID : SA15-3216

Amount of Each Receipt this Period
 845.88

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	845.88
TOTAL This Period (last page this line number only).....▶	845.88

**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"/> 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)
2016 DNCC Inc.

Full Name (Last, First, Middle Initial)
A. BERNARD, D'SHAWNA, , ,

Date of Disbursement: / /

Mailing Address: 11200 Lockwood Drive, Apt 1803

City: Silver Spring, State: MD, Zip Code: 20901

Purpose of Disbursement: Travel

Candidate Name: _____

Office Sought: House, Senate, President
State: _____ District: _____

Disbursement For: Primary, General, Other (specify) ▼

FEC Identification Number: _____
Transaction ID : SB21B-3141
Amount of Each Disbursement this Period:

Memo Item

Full Name (Last, First, Middle Initial)
B. Dan Klores Communications, LLC

Date of Disbursement: / /

Mailing Address: 261 Fifth Avenue, 2nd Floor

City: New York, State: NY, Zip Code: 10016

Purpose of Disbursement: Travel

Candidate Name: _____

Office Sought: House, Senate, President
State: _____ District: _____

Disbursement For: Primary, General, Other (specify) ▼

FEC Identification Number: _____
Transaction ID : SB21B-3142
Amount of Each Disbursement this Period:

Memo Item

Full Name (Last, First, Middle Initial)
C. T & M Protection Resources, LLC

Date of Disbursement: / /

Mailing Address: PO Box 5218

City: New York, State: NY, Zip Code: 10087-5218

Purpose of Disbursement: Travel

Candidate Name: _____

Office Sought: House, Senate, President
State: _____ District: _____

Disbursement For: Primary, General, Other (specify) ▼

FEC Identification Number: _____
Transaction ID : SB21B-3143
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"/> 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)
2016 DNCC Inc.

Full Name (Last, First, Middle Initial) A. T & M Protection Resources, LLC		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address PO Box 5218		FEC Identification Number C [] Transaction ID : SB21B-3144 Amount of Each Disbursement this Period [] 13500.00
City New York	State NY	Zip Code 10087-5218
Purpose of Disbursement Security		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. KELLY & ASSOCIATES INSURANCE GROUP		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address P.O. BOX 418926		FEC Identification Number C [] Transaction ID : SB21B-3146 Amount of Each Disbursement this Period [] 11030.39
City BOSTON	State MA	Zip Code 02241-8926
Purpose of Disbursement Benefits Cost		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FRARY, CASEY, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address 504 2nd Street, SE		FEC Identification Number C [] Transaction ID : SB21B-3137 Amount of Each Disbursement this Period [] 2749.78
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Salaries		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 27280.17
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
2016 DNCC Inc.

A. COLEMAN, DANIELLE, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
11 / 30 / 2016

Mailing Address: 729 NORTH HOLLY ST
APT 2

City: PHILADELPHIA State: PA Zip Code: 19104

Purpose of Disbursement: Salaries

Candidate Name:

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: C
Transaction ID : SB21B-3138
Amount of Each Disbursement this Period: 1386.42

Memo Item

B. DAUGHTRY, DANIELLE, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
11 / 30 / 2016

Mailing Address: 11 Merrywood Drive

City: West Orange State: NJ Zip Code: 07052

Purpose of Disbursement: Salaries

Candidate Name:

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: C
Transaction ID : SB21B-3139
Amount of Each Disbursement this Period: 5133.95

Memo Item

C. ADP, INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
11 / 30 / 2016

Mailing Address: P.O. BOX 9001007

City: Louisville State: KY Zip Code: 40290-1007

Purpose of Disbursement: Payroll Taxes

Candidate Name:

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: C
Transaction ID : SB21B-3140
Amount of Each Disbursement this Period: 4491.74

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11012.11

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
2016 DNCC Inc.

Full Name (Last, First, Middle Initial)
A. ADP, INC.

Date of Disbursement: / /

Mailing Address P.O. BOX 9001007

City: Louisville, State: KY, Zip Code: 40290-1007

Purpose of Disbursement: Payroll Taxes

Candidate Name: _____

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify) ▼

State: _____ District: _____

FEC Identification Number: _____

Transaction ID : **SB21B-3186**

Amount of Each Disbursement this Period:

Memo Item

Full Name (Last, First, Middle Initial)
B. BOOKER, TAMIA, , ,

Date of Disbursement: / /

Mailing Address 3465 23rd Street, SE

City: Washington, State: DC, Zip Code: 20020

Purpose of Disbursement: Travel

Candidate Name: _____

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify) ▼

State: _____ District: _____

FEC Identification Number: _____

Transaction ID : **SB21B-3147**

Amount of Each Disbursement this Period:

Memo Item

Full Name (Last, First, Middle Initial)
C. BOOKER, TAMIA, , ,

Date of Disbursement: / /

Mailing Address 3465 23rd Street, SE

City: Washington, State: DC, Zip Code: 20020

Purpose of Disbursement: Data Services Subscription

Candidate Name: _____

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify) ▼

State: _____ District: _____

FEC Identification Number: _____

Transaction ID : **SB21B-3148**

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"/> 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)
2016 DNCC Inc.

Full Name (Last, First, Middle Initial) A. BOOKER, TAMIA, , ,		Date of Disbursement MM / DD / YYYY 12 / 06 / 2016	
Mailing Address 3465 23rd Street, SE		FEC Identification Number C [] Transaction ID : SB21B-3149 Amount of Each Disbursement this Period [] 24.91	
City Washington	State DC	Zip Code 20020	Category/ Type []
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. BOOKER, TAMIA, , ,		Date of Disbursement MM / DD / YYYY 12 / 06 / 2016	
Mailing Address 3465 23rd Street, SE		FEC Identification Number C [] Transaction ID : SB21B-3150 Amount of Each Disbursement this Period [] 70.54	
City Washington	State DC	Zip Code 20020	Category/ Type []
Purpose of Disbursement Catering,Food & Beverage		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. BOTELHO, HANNAH, , ,		Date of Disbursement MM / DD / YYYY 12 / 06 / 2016	
Mailing Address 8904 Wooden Bridge Road		FEC Identification Number C [] Transaction ID : SB21B-3151 Amount of Each Disbursement this Period [] 137.38	
City Potomac	State MD	Zip Code 20854	Category/ Type []
Purpose of Disbursement Catering,Food & Beverage		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 232.83
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"/> 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)
2016 DNCC Inc.

Full Name (Last, First, Middle Initial) A. CRONIN, IAN, , ,		Date of Disbursement MM / DD / YYYY 12 / 06 / 2016
Mailing Address C/O Karen Cronin 811 Chicago Ave., #608		FEC Identification Number C [REDACTED] Transaction ID : SB21B-3152 Amount of Each Disbursement this Period [REDACTED] 81.66
City Evanston	State IL	Zip Code 60202
Purpose of Disbursement Travel		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Hotel Monaco Philadelphia		Date of Disbursement MM / DD / YYYY 12 / 07 / 2016
Mailing Address 433 Chestnut Street		FEC Identification Number C [REDACTED] Transaction ID : SB21B-3156 Amount of Each Disbursement this Period [REDACTED] 7571.94
City PHILADELPHIA	State PA	Zip Code 19106
Purpose of Disbursement Housing : Convention Week		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Philadelphia Airport Marriott		Date of Disbursement MM / DD / YYYY 12 / 07 / 2016
Mailing Address One Arrivals Road, Terminal B		FEC Identification Number C [REDACTED] Transaction ID : SB21B-3157 Amount of Each Disbursement this Period [REDACTED] 7657.24
City PHILADELPHIA	State PA	Zip Code 19153
Purpose of Disbursement Housing : Convention Week		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 15310.84
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
2016 DNCC Inc.

A. White, Vin, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1917 2nd Street, NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Housing : Convention Week

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 07 / 2016

FEC Identification Number: C

Transaction ID : SB21B-3158

Amount of Each Disbursement this Period: 977.73

Memo Item See Attached Memo Entry

B. WYNDHAM GARDEN PHILADELPHIA AIRPORT

Full Name (Last, First, Middle Initial)

Mailing Address 45 INDUSTRIAL HWY

City ESSINGTON State PA Zip Code 19029

Purpose of Disbursement
Housing : Convention Week

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 07 / 2016

FEC Identification Number: C

Transaction ID : SB21B-3158-1

Amount of Each Disbursement this Period: 977.73

Memo Item

C. FRARY, CASEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 504 2nd Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B-3171

Amount of Each Disbursement this Period: 2749.79

Memo Item

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

3727.52

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
2016 DNCC Inc.

Full Name (Last, First, Middle Initial) A. DAUGHTRY, DANIELLE, , ,		Date of Disbursement MM / DD / YYYY 12 / 15 / 2016	
Mailing Address 11 Merrywood Drive		FEC Identification Number C [] Transaction ID : SB21B-3172 Amount of Each Disbursement this Period [] 5133.95	
City West Orange	State NJ	Zip Code 07052	Category/ Type []
Purpose of Disbursement Salaries		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. ADP, INC.		Date of Disbursement MM / DD / YYYY 12 / 15 / 2016	
Mailing Address P.O. BOX 9001007		FEC Identification Number C [] Transaction ID : SB21B-3173 Amount of Each Disbursement this Period [] 3896.05	
City Louisville	State KY	Zip Code 40290-1007	Category/ Type []
Purpose of Disbursement Payroll Taxes		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. ADP, INC.		Date of Disbursement MM / DD / YYYY 12 / 16 / 2016	
Mailing Address P.O. BOX 9001007		FEC Identification Number C [] Transaction ID : SB21B-3187 Amount of Each Disbursement this Period [] 375.94	
City Louisville	State KY	Zip Code 40290-1007	Category/ Type []
Purpose of Disbursement Payroll Taxes		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 9405.94
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
2016 DNCC Inc.

Full Name (Last, First, Middle Initial) A. Alderson Reporting Company, Inc.		Date of Disbursement MM / DD / YYYY 12 / 20 / 2016
Mailing Address 1155 Connecticut Ave., NW Suite 200		FEC Identification Number C [REDACTED] Transaction ID : SB21B-3176 Amount of Each Disbursement this Period [REDACTED] 1925.10
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Catering, Food & Beverage		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Alderson Reporting Company, Inc.		Date of Disbursement MM / DD / YYYY 12 / 20 / 2016
Mailing Address 1155 Connecticut Ave., NW Suite 200		FEC Identification Number C [REDACTED] Transaction ID : SB21B-3177 Amount of Each Disbursement this Period [REDACTED] -3276.25 Voided
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Legal and Compliance Consulting		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. GOWA, TIM, , ,		Date of Disbursement MM / DD / YYYY 12 / 20 / 2016
Mailing Address 1445 Oak Street, NW, Unit B2		FEC Identification Number C [REDACTED] Transaction ID : SB21B-3178 Amount of Each Disbursement this Period [REDACTED] 3000.00
City Washington	State DC	Zip Code 20010
Purpose of Disbursement Event Consulting		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

[REDACTED] 1648.85

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
2016 DNCC Inc.

Full Name (Last, First, Middle Initial) A. BURKE, TIFFANY, , ,		Date of Disbursement MM / DD / YYYY 12 / 20 / 2016	
Mailing Address 1723 Pine Acres Blvd		FEC Identification Number C [] Transaction ID : SB21B-3180 Amount of Each Disbursement this Period [] 3333.33	
City Bay Shore	State NY	Zip Code 11706	Category/ Type []
Purpose of Disbursement Salaries		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. BURKE, TIFFANY, , ,		Date of Disbursement MM / DD / YYYY 12 / 20 / 2016	
Mailing Address 1723 Pine Acres Blvd		FEC Identification Number C [] Transaction ID : SB21B-3181 Amount of Each Disbursement this Period [] -1109.18 Voided	
City Bay Shore	State NY	Zip Code 11706	Category/ Type []
Purpose of Disbursement Payroll Taxes		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. AMALGAMATED BANK		Date of Disbursement MM / DD / YYYY 12 / 20 / 2016	
Mailing Address 275 7TH AVE		FEC Identification Number C [] Transaction ID : SB21B-3194 Amount of Each Disbursement this Period [] 235.69	
City NEW YORK	State NY	Zip Code 10001	Category/ Type []
Purpose of Disbursement Bank Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2459.84
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
2016 DNCC Inc.

A. LOOS, ANNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 926 POLK ST

City HOLLYWOOD State FL Zip Code 33019

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 20 / 2016

FEC Identification Number: C

Transaction ID : SB21B-3191

Amount of Each Disbursement this Period: 4000.00

Memo Item

B. ADP, INC.

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 9001007

City Louisville State KY Zip Code 40290-1007

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 23 / 2016

FEC Identification Number: C

Transaction ID : SB21B-3188

Amount of Each Disbursement this Period: 38.70

Memo Item

C. FRARY, CASEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 504 2nd Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 30 / 2016

FEC Identification Number: C

Transaction ID : SB21B-3182

Amount of Each Disbursement this Period: 2749.80

Memo Item

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

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

6788.50

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
2016 DNCC Inc.

Full Name (Last, First, Middle Initial) A. DAUGHTRY, DANIELLE, , ,		Date of Disbursement MM / DD / YYYY 12 / 30 / 2016	
Mailing Address 11 Merrywood Drive		FEC Identification Number C [] Transaction ID : SB21B-3183 Amount of Each Disbursement this Period 5133.96	
City West Orange	State NJ	Zip Code 07052	Category/ Type []
Purpose of Disbursement Salaries		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. ADP, INC.		Date of Disbursement MM / DD / YYYY 12 / 30 / 2016	
Mailing Address P.O. BOX 9001007		FEC Identification Number C [] Transaction ID : SB21B-3184 Amount of Each Disbursement this Period 5260.22	
City Louisville	State KY	Zip Code 40290-1007	Category/ Type []
Purpose of Disbursement Payroll Taxes		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. ADP, INC.		Date of Disbursement MM / DD / YYYY 12 / 31 / 2016	
Mailing Address P.O. BOX 9001007		FEC Identification Number C [] Transaction ID : SB21B-3189 Amount of Each Disbursement this Period 382.14	
City Louisville	State KY	Zip Code 40290-1007	Category/ Type []
Purpose of Disbursement Payroll Taxes		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	10776.32
TOTAL This Period (last page this line number only).....▶	109183.25