

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12FE4M5

CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

ADDRESS (number and street)

PO BOX 1631

Check if different than previously reported. (ACC)

BALTIMORE

MD

21203

2. FEC IDENTIFICATION NUMBER

C C00310318

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT NEW OR AMENDED

MD

07

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)
Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on MM/DD/YYYY in the State of

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

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

Election on MM/DD/YYYY in the State of

5. Covering Period

MM/DD/YYYY through MM/DD/YYYY

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 Ronald Thompson

Signature of Treasurer Ronald Thompson

[Electronically Filed]

Date

MM/DD/YYYY 09/30/2016

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

Table with 8 columns for Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	148065.00	239190.00
(b) Total Contribution Refunds (from Line 20(d))	5000.00	5000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	143065.00	234190.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	97811.02	155038.94
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	5000.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	97811.02	150038.94
8. Cash on Hand at Close of Reporting Period (from Line 27).....	918248.94	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 3 (Revised 12/2003)

Write or Type Committee Name

CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	102300.00	127300.00
(ii) Unitemized.....	1265.00	6690.00
(iii) TOTAL of contributions from individuals ▶	103565.00	133990.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	44500.00	105200.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	148065.00	239190.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	5000.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	116.28
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	148065.00	244306.28

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	97811.02	155038.94
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	5000.00	5000.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	5000.00	5000.00
21. OTHER DISBURSEMENTS	12970.00	70005.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	115781.02	230043.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	885964.96
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	148065.00
25. SUBTOTAL (add Line 23 and Line 24).....	1034029.96
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	115781.02
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	918248.94

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Deborah Ancel

Mailing Address 3332 Gilman Terrace

City Baltimore State MD Zip Code 21211

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11Al.16824

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 408 Bosley Ave

City Towson State MD Zip Code 21204

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

Name of Employer James Angcel, Inc Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11Al.16798

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Shawn Auffarth

Mailing Address 7037 Eastern Ave

City Baltimore State MD Zip Code 21224

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

Name of Employer A/C Power, Inc Occupation Electrician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11Al.16788

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

7500.00

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

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

FOR LINE NUMBER: PAGE 6 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Sandhya Bachu

Mailing Address 2864 Deerfield Dr

City Ellicott City State MD Zip Code 21043

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

Name of Employer Quasars, Inc. Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

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

Transaction ID : SA11AI.16701

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Sandra Barnhart

Mailing Address 700 Quincy Street, NE, Apt 2

City Washington State DC Zip Code 20017

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

Name of Employer Sydar Printing Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2015

Transaction ID : SA11AI.16765

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
William Blanchet

Mailing Address 764 Stacy Oak Way

City Millersville State MD Zip Code 21108

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

Name of Employer Brunage-Bowe-Blanchet Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11AI.16857

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

_____ 1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
William Blanchet

Mailing Address 764 Stacy Oak Way

City Millersville State MD Zip Code 21108

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

Name of Employer Brunage-Bowe-Blanchet Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11A1.16925

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Pierre Blemur

Mailing Address 10940 SW 106th Ave

City Miami State FL Zip Code 33176

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2015

Transaction ID : SA11A1.16870

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Roger Blunt

Mailing Address 5716 Kenfield Ln

City Upper Marlboro State MD Zip Code 20772

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11A1.16888

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Gary Bosley

Mailing Address 2115 Sterling CT

City State Zip Code
Hampstead MD 21074

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

Name of Employer Occupation
Bosley Construction Construction

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11Al.16816

Amount of Each Receipt this Period
2250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Gerald Brown

Mailing Address 108 Clagett Crossing PL

City State Zip Code
Gathesburg MD 20878

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

Name of Employer Occupation
Supply Chain Vision, Inc Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11Al.16851

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Howard Brown

Mailing Address 100 Painters Mill Rd, Suite 900

City State Zip Code
Owings Mills MD 21117

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

Name of Employer Occupation
David S. Brown Enterprises Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11Al.16895

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3750.00

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

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

FOR LINE NUMBER: PAGE 9 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Thomas Bundy

Mailing Address 114201 Hunt Crossing CT

City State Zip Code
Ellicott City MD 21042

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

Name of Employer Occupation
Sutherland Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : SA11AI.16693

Amount of Each Receipt this Period
 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Constance Caplan

Mailing Address 701 Cathedral St

City State Zip Code
Baltimore MD 21201

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

Name of Employer Occupation
The Time Group Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2015

Transaction ID : SA11AI.16780

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mark Caplan

Mailing Address 6 Cotswold Rd

City State Zip Code
Baltimore MD 21210

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

Name of Employer Occupation
The Time Group CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11AI.16855

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5250.00

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

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

FOR LINE NUMBER: PAGE 10 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Eleanor Carey

Mailing Address 15 W Barre Street

City Baltimore State MD Zip Code 21201

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

Name of Employer Synergies Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11AI.16893

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Suzanne Cohen

Mailing Address 2 Wyndhurst Ave

City Baltimore State MD Zip Code 21210

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015

Transaction ID : SA11AI.16847

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
David Cordish

Mailing Address 601 E. Pratt St, 6th flr

City Baltimore State MD Zip Code 21202

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

Name of Employer The Cordish Co Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11AI.16885

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

_____ 1500.00

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

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

FOR LINE NUMBER: PAGE 11 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Kevin Cosby

Mailing Address 342 Athen Dr

City Edgewood State MD Zip Code 21040

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

Name of Employer A/C Power, Inc Occupation Electrician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11Al.16786

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
H. R. Crawford

Mailing Address 916 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003

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

Name of Employer Crawford Associates Occupation Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2015

Transaction ID : SA11Al.16772

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Lorenzo Creighton

Mailing Address 157 Fleet ST, PH 9

City Oxon Hill State MD Zip Code 20745

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

Name of Employer MGM National Harbor Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015

Transaction ID : SA11Al.16836

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

_____ 4000.00

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

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

FOR LINE NUMBER: PAGE 12 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

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

Mailing Address 6013 13th St, NW

City Washington State DC Zip Code 20005

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

Name of Employer L88 Companies Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 15 / 2015

Transaction ID : SA11Al.16877

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Dr. Grady Dale

Mailing Address 5128 Yellowwood Ave

City Baltimore State MD Zip Code 21209

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

Name of Employer Urban Psychological Services Occupation Doctor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11Al.16890

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Michael Davidson

Mailing Address 2924 Cameron Dr

City Manchester State MD Zip Code 21102

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

Name of Employer Bosley Construction Occupation Construction

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11Al.16812

Amount of Each Receipt this Period
 _____ 2250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

_____ 5000.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 13 OF 69

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Joseph DeMattos

Mailing Address 18 Chasemount Ct

City Baltimore State MD Zip Code 21209

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

Name of Employer HFAM Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2015

Transaction ID : SA11AI.16714

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Neil Didriksen

Mailing Address 11659 St Davids Lane

City Lutherville State MD Zip Code 21093

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

Name of Employer Philanthropic Ventures Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 22 / 2015

Transaction ID : SA11AI.16923

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Francine Diggs

Mailing Address 7401 Los Pinos Blvd

City Coral Gables State FL Zip Code 33143

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

Name of Employer Requested Occupation Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

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

Transaction ID : SA11AI.16683

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Thomas Downey

Mailing Address 1225 I Street, NW, Ste 600

City Washington State DC Zip Code 20005

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

Name of Employer Downey McGrath Group Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11AI.16896

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
A. Harold Dubois

Mailing Address 8203 Maxine Circle

City Baltimore State MD Zip Code 21208

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

Name of Employer Verderailles & Dubois Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11AI.16887

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 4520 East West Highway, Ste 615

City Bethesda State MD Zip Code 20814

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

Name of Employer Housing Capital Advisors, LLC Occupation Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11AI.16860

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Elizabeth Etzel

Mailing Address 801 Key Hwy, Unit 220

City Baltimore State MD Zip Code 21230

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

Name of Employer Self Occupation Construction

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11AI.16820

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Linda Fassett

Mailing Address 3507 Berwyn Ave

City Baltimore State MD Zip Code 21203

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

Name of Employer Sojourner-Douglas College Occupation Educator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11AI.16802

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Enrique Fernandez

Mailing Address 12401 SW 43rd St

City Miami State FL Zip Code 33173

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

Name of Employer Ross University School of Med Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2015

Transaction ID : SA11AI.16868

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Joseph Flaherty

Mailing Address 1504 Bay Rd, #1607

City	State	Zip Code
Miami Beach	FL	33139

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

Name of Employer	Occupation
Ross University School of Med	Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2015

Transaction ID : SA11AI.16864

Amount of Each Receipt this Period
 _____ 1500.00

Memo Item

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

Mailing Address 203 Severn River Rd

City	State	Zip Code
Severna Park	MD	21146

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

Name of Employer	Occupation
American Salvage Assoc	Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.16928

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Scott Gardner

Mailing Address 3803 E. Diehl Rd

City	State	Zip Code
Taneytown	MD	21787

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

Name of Employer	Occupation
Heer Brothers, Inc	Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11AI.16806

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

_____ 4500.00

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

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

FOR LINE NUMBER: PAGE 17 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
HERBERT GARTEN

Mailing Address **36 S. CHARLES**

City **BALTIMORE** State **MD** Zip Code **21201**

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

Name of Employer **FEDDER & GARTEN** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 05 / 2015

Transaction ID : SA11AI.16846

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Amsale Geletu

Mailing Address **5 Honeyspring Court**

City **Timonium** State **MD** Zip Code **21093**

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

Name of Employer **PMS Parking Inc.** Occupation **President**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 13 / 2015

Transaction ID : SA11AI.16892

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Paul Glass

Mailing Address **301 Avalon Lane**

City **Westminster** State **MD** Zip Code **21158**

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

Name of Employer **Bosley Construction** Occupation **Construction**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2015

Transaction ID : SA11AI.16818

Amount of Each Receipt this Period
2250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

3250.00

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

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

FOR LINE NUMBER: PAGE 18 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Paul Graziano

Mailing Address 148
W. Lanvale Street

City Baltimore State MD Zip Code 21217

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

Name of Employer City of Baltimore Occupation Housing Commissioner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11AI.16894

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Harvey Harris

Mailing Address 8940 Harkate Way

City Randallstown State MD Zip Code 21133

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

Name of Employer Self Occupation Construction

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11AI.16796

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Michael Herson

Mailing Address 8709 Burning Tree Rd

City Bethesda State MD Zip Code 20817

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

Name of Employer American Defense International Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2015

Transaction ID : SA11AI.16781

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4500.00

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

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

FOR LINE NUMBER: PAGE 19 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Melody Hobson

Mailing Address 330 N. Wabash Ave, Ste 1650

City Chicago State IL Zip Code 60611

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

Name of Employer Mosaic Financial Group, LLC Occupation Business

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015

Transaction ID : SA11Al.16844

Amount of Each Receipt this Period
 _____ 2250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Steven Hutchinson

Mailing Address 1032 Emmerick Dr

City Joppa State MD Zip Code 21085

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

Name of Employer Project Control Services Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11Al.16810

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Michele Jean-Gilles

Mailing Address 12880 Maple Road

City North Miami State FL Zip Code 33181

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

Name of Employer Requested Occupation Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2015

Transaction ID : SA11Al.16873

Amount of Each Receipt this Period
 _____ 2600.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

_____ 7350.00

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

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

FOR LINE NUMBER: PAGE 20 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Michele Jean-Gilles

Mailing Address 12880 Maple Road

City North Miami State FL Zip Code 33181

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

Name of Employer Requested Occupation Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 16 / 2015

Transaction ID : SA11AI.16874

Amount of Each Receipt this Period
2600.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MARK JOSEPH

Mailing Address 218 N. CHARLES ST, SUITE 500

City BALTIMORE State MD Zip Code 21201

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

Name of Employer Requested Occupation Requested
 Shelter Development Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 22 / 2015

Transaction ID : SA11AI.16930

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Steven Klein

Mailing Address 7127 Via Marbella

City Boca Raton State FL Zip Code 33333

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

Name of Employer Requested Occupation Requested
 Not employed Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 22 / 2015

Transaction ID : SA11AI.16926

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

7100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
M Lapointe

Mailing Address 16246 SW 18th Street

City Miramar State FL Zip Code 33027

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

Name of Employer Requested Occupation Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2015

Transaction ID : SA11AI.16872

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Morris Little

Mailing Address 11003 Spring Forest Way

City FT Washington State MD Zip Code 20744

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

Name of Employer Requested Occupation Requested
 B & W Solutions, Incorporated President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015

Transaction ID : SA11AI.16834

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Ancelmo Lopes

Mailing Address 212 Lambeth Rd

City Baltimore State MD Zip Code 21218

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

Name of Employer Requested Occupation Requested
 Ameritox, Ltd CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11AI.16822

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Anwar Masood

Mailing Address 12647 Granite Rock Rd

City Clarsburg State MD Zip Code 20871

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

Name of Employer Self Occupation Pediatrician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015

Transaction ID : SA11AI.16832

Amount of Each Receipt this Period
 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Aries Melissaratos

Mailing Address 317 School Lane

City Linthicum State MD Zip Code 21090

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

Name of Employer John Hopkins University Occupation Enterprise Development

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2015

Transaction ID : SA11AI.16783

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Neil Meyerhoff

Mailing Address 9 Meadow Rd

City Baltimore State MD Zip Code 21212

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

Name of Employer Henderson - Webb, Inc Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11AI.16826

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
John Pare

Mailing Address 1746 Webster Street

City Baltimore State MD Zip Code 21230

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

Name of Employer National Federation of the Bli Occupation Exec Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11AI.16858

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Bhailal Patel

Mailing Address 1711 Sadole Dr

City Gambrills State MD Zip Code 21054

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

Name of Employer Pioneer CCJ Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11AI.16804

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Rajroop Ramkhelawan

Mailing Address 7320 Orleans St

City Hollolywood State FL Zip Code 33023

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

Name of Employer GMHETC, Inc Occupation Financial Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2015

Transaction ID : SA11AI.16866

Amount of Each Receipt this Period
2600.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

7600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ellen Ratner

Mailing Address 25 Central Park W. Unit 10 V

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
VPE - Squared Community Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015

Transaction ID : SA11Al.16840

Amount of Each Receipt this Period
 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
John Robinson

Mailing Address 8116 Riverside Dr

City State Zip Code
Pasadena MD 21122

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

Name of Employer Occupation
Lessons, Praby & McCormick Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2015

Transaction ID : SA11Al.16774

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Tarar Sagid

Mailing Address 6600 Amberton Dr

City State Zip Code
Elkridge MD 21075

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

Name of Employer Occupation
Center for Social Change CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11Al.16883

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4000.00

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

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

FOR LINE NUMBER: PAGE 25 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

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

Mailing Address P.O. Box 245

City Baltimore State MD Zip Code 21203

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

Name of Employer Scott Welington, Inc Occupation Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11AI.16800

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Gwen Siebert

Mailing Address 12679 Perchance Ter

City Woodbridge State VA Zip Code 22192

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

Name of Employer National Association of Commun Occupation Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015

Transaction ID : SA11AI.16829

Amount of Each Receipt this Period
 _____ 1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Safiya Simmons

Mailing Address 1841 Bruce PL SE

City Washington State DC Zip Code 20020

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

Name of Employer Self Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

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

Transaction ID : SA11AI.16698

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

_____ 4250.00

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

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

FOR LINE NUMBER: PAGE 26 OF 69
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Graylin Smith

Mailing Address 12204 Highgrove CT

City Reisterstown State MD Zip Code 21136

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

Name of Employer SB, LLC Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11AI.16891

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Dr. Steven Sobelman

Mailing Address 26 Allegheny Ave, Ste 1208

City Towson State MD Zip Code 21204

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

Name of Employer Self Employed Occupation Psychologist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.16929

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Kathleen Townsend

Mailing Address P O BOX 305

City Shady Side State MD Zip Code 20764

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015

Transaction ID : SA11AI.16838

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 69
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Jeffry Turfle		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 02 / 2015	
Mailing Address 2400 Faters Care Dr		Transaction ID : SA11Al.16814	
City Westminster	State MD	Amount of Each Receipt this Period _____ 2250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Bosley Construction	Occupation Estimator		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2250.00		

Full Name (Last, First, Middle Initial) B. Joseph Tydings		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2015	
Mailing Address 2101 L Street, NW		Transaction ID : SA11Al.16775	
City Washington	State DC	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Self	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) C. Nancy Van Coverden		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 05 / 2015	
Mailing Address 4782 Wellesley Dr		Transaction ID : SA11Al.16842	
City Woodbridge	State VA	Amount of Each Receipt this Period _____ 2000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 4750.00
TOTAL This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 28 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
Jeffrey Waters

Mailing Address 1027 Emmerick Drive

City State Zip Code
Joppa MD 21085

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11AI.16808

Amount of Each Receipt this Period
 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Glenda White

Mailing Address 11490 Corinthia CT

City State Zip Code
Woodbridge VA 11191

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

Name of Employer Occupation
Requested Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015

Transaction ID : SA11AI.16843

Amount of Each Receipt this Period
 1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Tanya Williams - Harris

Mailing Address 8940 Harkate Way

City State Zip Code
Randallstown MD 21133

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

Name of Employer Occupation
Lady About Children Event Planner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

Transaction ID : SA11AI.16790

Amount of Each Receipt this Period
 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

6500.00

102300.00

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

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

FOR LINE NUMBER: PAGE 29 OF 69
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
AIRCRAFT OWNERS AND PILOTS ASSOCIATION (POLITICAL ACTION COMMITTEE)

Mailing Address 421 AVIATION WAY

City State Zip Code
FREDERICK MD 21701

FEC ID number of contributing federal political committee. **C** C70004585

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11C.16709

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION BANKPAC

Mailing Address 1120 CONN. AVE., NW SUITE 851

City State Zip Code
WASHINGTON DC 20036

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11C.16898

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 101 NORTH THIRD STREET

City State Zip Code
MOORHEAD MN 56560

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015

Transaction ID : SA11C.16849

Amount of Each Receipt this Period
 5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

7000.00

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

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

FOR LINE NUMBER: PAGE 30 OF 69
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND

Mailing Address 2 West Dixie Highway

City State Zip Code
Dania Beach FL 33004

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11C.16937

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN SUGAR CANE LEAGUE POLITICAL ACTION COMMITTEE

Mailing Address P O BOX 938

City State Zip Code
THIBODAUX LA 70302

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11C.16936

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ASSOCIATION OF AMERICAN RAILROADS POLITICAL ACTION COMMITTEE (RAIL PAC)

Mailing Address 50 F STREET NW

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 02 / 2015

Transaction ID : SA11C.16763

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4500.00

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

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

FOR LINE NUMBER: PAGE 31 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 175 E. Houston Street
Room 7-A-50

City San Antonio State TX Zip Code 78205

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11C.16761

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
BURLINGTON NORTHERN SANTA FE CORPORATION RAILPAC (BNSF RAILPAC)

Mailing Address POST OFFICE BOX 961039
3017 LOU MENK DRIVE

City FORT WORTH State TX Zip Code 76102

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11C.16759

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
CAREFIRST ASSOCIATES' FEDERAL PAC

Mailing Address 10455 Mill Run Circle

City Owings Mills State MD Zip Code 21117

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11C.16863

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

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

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FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA

Mailing Address 805 15TH STREET NW SUITE 300

City State Zip Code
 WASHINGTON DC 20005

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11C.16828

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
CSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1331 PENNSYLVANIA AVE NW SUITE 560

City State Zip Code
 WASHINGTON DC 20004

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11C.16718

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION POLITICAL ACTION COMMITTEE (ENGPAC)

Mailing Address 520 S GRAND AVE STE 700

City State Zip Code
 LOS ANGELES CA 90071

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11C.16771

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

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

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

FOR LINE NUMBER: PAGE 33 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELON PAC)

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 400 EAST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11C.16935

Amount of Each Receipt this Period
 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GRIDIRON-PAC

Mailing Address 280 Park Avenue

City New York State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C** C00451153

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : SA11C.16710

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1725 JEFFERSON DAVIS HIGHWAY
CRYSTAL SQUARE TWO SUITE 300

City ARLINGTON State VA Zip Code 22202

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2015

Transaction ID : SA11C.16769

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 69
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1725 JEFFERSON DAVIS HIGHWAY
CRYSTAL SQUARE TWO SUITE 300

City ARLINGTON State VA Zip Code 22202

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11C.16899

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MCDONALDS CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 2111 MCDONALDS DR
DEPT 213

City OAK BROOK State IL Zip Code 60523

FEC ID number of contributing federal political committee. **C** C00063164

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11C.16711

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF POSTAL SUPERVISORS POLITICAL ACTION COMMITTEE

Mailing Address 1727 KING ST STE 400

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

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

Transaction ID : SA11C.16708

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 69
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY AND MEDICARE - PAC

Mailing Address 10TH G STREET N.E.
SUITE 600

City WASHINGTON State DC Zip Code 20002

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 16 / 2015

Transaction ID : SA11C.16778

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 100 Daingerfield Road

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 15 / 2015

Transaction ID : SA11C.16882

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

Mailing Address THREE COMMERCIAL PLACE

City NORFOLK State VA Zip Code 23510

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 02 / 2015

Transaction ID : SA11C.16760

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 69
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVE

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing federal political committee.

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11C.16881

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVE

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing federal political committee.

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11C.16934

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
SHEET METAL AND AIR CONDITIONING CONTRACTORS POLITICAL ACTION COMMITTEE

Mailing Address 4201 LAFAYETTE CENTER DRIVE

City	State	Zip Code
CHANTILLY	VA	20151

FEC ID number of contributing federal political committee.

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11C.16776

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 69
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC

Mailing Address 601 THIRTEENTH STREET NW
STE 910 S

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00542365

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2015

Transaction ID : SA11C.16770

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 600 13th St. NW
Suite 340

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2015

Transaction ID : SA11C.16762

Amount of Each Receipt this Period
2500.00

Memo Item

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)

Election Cycle-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).....

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

3500.00

44500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2015
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 146.39
City Cambridge	State MA	
Zip Code 02238	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16707
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2015
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 9.98
City Cambridge	State MA	
Zip Code 02238	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16719
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2015
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 0.20
City Cambridge	State MA	
Zip Code 02238	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16785
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	156.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 59.25
City Cambridge	State MA	
Zip Code 02238	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16784
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2015
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 0.20
City Cambridge	State MA	
Zip Code 02238	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16850
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2015
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 98.75
City Cambridge	State MA	
Zip Code 02238	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16862
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	158.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 207.38
City Cambridge	State MA	
Zip Code 02238	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16931
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AKIN, GUMP, STRAUSS, HAUER & FELD LLP CIVIC ACTION COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address 1333 NEW HAMPSHIRE AVE/NW STE 400		Amount of Each Disbursement this Period 409.60
City WASHINGTON	State DC	
Zip Code 20036	Purpose of Disbursement Catering	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16744
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Charm City Catering		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 600 W. North Ave		Amount of Each Disbursement this Period 2760.00
City Baltimore	State MD	
Zip Code 21217	Purpose of Disbursement Catering	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16741
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3376.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 69			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 20				

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Michael Christinanson			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015		
Mailing Address 189 Edgewater Road, RR 14			Amount of Each Disbursement this Period 500.00		
City Pasadena	State MD	Zip Code 21122	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Campaign Services		Category/ Type			
Candidate Name		Transaction ID : SB17.16649			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Michael Christinanson			Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2015		
Mailing Address 189 Edgewater Road, RR 14			Amount of Each Disbursement this Period 200.00		
City Pasadena	State MD	Zip Code 21122	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Campaign Services		Category/ Type			
Candidate Name		Transaction ID : SB17.16752			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Michael Christinanson			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2015		
Mailing Address 189 Edgewater Road, RR 14			Amount of Each Disbursement this Period 200.00		
City Pasadena	State MD	Zip Code 21122	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Campaign Services		Category/ Type			
Candidate Name		Transaction ID : SB17.16903			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Class Act Catering, Inc			Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2015	
Mailing Address 626 N. Chester Street			Amount of Each Disbursement this Period 1300.00	
City Baltimore	State MD	Zip Code 21205	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Catering		Category/ Type		
Candidate Name		Transaction ID : SB17.16676		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Comcast			Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2015	
Mailing Address PO Box 3005			Amount of Each Disbursement this Period 75.22	
City Southeastern	State PA	Zip Code 19398	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Internet		Category/ Type		
Candidate Name		Transaction ID : SB17.16682		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Comcast			Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015	
Mailing Address PO Box 3005			Amount of Each Disbursement this Period 75.22	
City Southeastern	State PA	Zip Code 19398	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Internet		Category/ Type		
Candidate Name		Transaction ID : SB17.16748		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1450.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address PO Box 3005		Amount of Each Disbursement this Period 3.95
City Southeastern	State PA	
Zip Code 19398	Purpose of Disbursement Internet	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16880
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2015
Mailing Address PO Box 3005		Amount of Each Disbursement this Period 75.22
City Southeastern	State PA	
Zip Code 19398	Purpose of Disbursement Internet	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16939
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Elijah Cummings		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 2901 Druid Park Drive Suite 203		Amount of Each Disbursement this Period 26.00
City Baltimore	State MD	
Zip Code 21215	Purpose of Disbursement Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16673
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	105.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Denise DeLeaver		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 3523 Lynchester Rd		Amount of Each Disbursement this Period 500.00
City Baltimore	State MD	
Purpose of Disbursement Campaign Services		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.16920
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Falls Road Carroll Fuel		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 4422 Falls Rd		Amount of Each Disbursement this Period 41.59
City Baltimore	State MD	
Purpose of Disbursement Fuel		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.16661
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Falls Road Carroll Fuel		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 4422 Falls Rd		Amount of Each Disbursement this Period 80.00
City Baltimore	State MD	
Purpose of Disbursement Fuel		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.16728
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	621.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Falls Road Carroll Fuel			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015	
Mailing Address 4422 Falls Rd			Amount of Each Disbursement this Period 137.03	
City Baltimore	State MD	Zip Code 21211	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fuel		Candidate Name	Transaction ID : SB17.16908	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	Category/Type		

Full Name (Last, First, Middle Initial) B. Florida Ave BP			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015	
Mailing Address 306 RHODE ISLAND AVE NW,			Amount of Each Disbursement this Period 42.69	
City Washington	State DC	Zip Code 20001	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fuel		Candidate Name	Transaction ID : SB17.16662	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	Category/Type		

Full Name (Last, First, Middle Initial) c. Ford Credit			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015	
Mailing Address Box 220564			Amount of Each Disbursement this Period 649.81	
City Pittsburg	State PA	Zip Code 15257	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Auto Payment		Candidate Name	Transaction ID : SB17.16654	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	Category/Type		

SUBTOTAL of Disbursements This Page (optional).....	829.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address Box 220564		Amount of Each Disbursement this Period 649.81
City Pittsburg	State PA	
Zip Code 15257	Purpose of Disbursement Auto Payment	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16724
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2015
Mailing Address Box 220564		Amount of Each Disbursement this Period 649.81
City Pittsburg	State PA	
Zip Code 15257	Purpose of Disbursement Auto Payment	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16900
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Fresh Connections		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 1114 Herndon Pkwy		Amount of Each Disbursement this Period 496.56
City Herndon	State VA	
Zip Code 20170	Purpose of Disbursement Catering	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16740
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1796.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. GEICO		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address One GEICO Plaza		Amount of Each Disbursement this Period 1148.70
City Washington	State DC	
Zip Code 20076	Purpose of Disbursement Insurance	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16747
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. LTI Worldwide Limousine		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 35 Bow Street		Amount of Each Disbursement this Period 242.43
City Everett	State MA	
Zip Code 02149	Purpose of Disbursement Transportation	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16738
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Marriott Hotel		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 907 Massachusetts Ave, NW		Amount of Each Disbursement this Period 35.00
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Parking	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16668
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1426.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Mayor & City Council of Baltimore		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2015
Mailing Address 2223 Wheatley Drive		Amount of Each Disbursement this Period 832.49 <input type="checkbox"/> Memo Item Transaction ID : SB17.16681
City Baltimore	State MD	
Zip Code 21207	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Mayor & City Council of Baltimore		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 2223 Wheatley Drive		Amount of Each Disbursement this Period 832.49 <input type="checkbox"/> Memo Item Transaction ID : SB17.16749
City Baltimore	State MD	
Zip Code 21207	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Mayor & City Council of Baltimore		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2015
Mailing Address 2223 Wheatley Drive		Amount of Each Disbursement this Period 834.49 <input type="checkbox"/> Memo Item Transaction ID : SB17.16938
City Baltimore	State MD	
Zip Code 21207	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2499.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Media Support Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2015
Mailing Address 2901 Druid Park Dr, C-105		Amount of Each Disbursement this Period 1170.00
City Baltimore	State MD	
Zip Code 21215	Purpose of Disbursement Audio services	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16743
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. New York Times		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 229 West 43rd Street		Amount of Each Disbursement this Period 76.97
City New York	State NY	
Zip Code 10036	Purpose of Disbursement Publications	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16669
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. New York Times		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 229 West 43rd Street		Amount of Each Disbursement this Period 69.19
City New York	State NY	
Zip Code 10036	Purpose of Disbursement Publications	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16735
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1316.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. New York Times			Date of Disbursement MM / DD / YYYY 06 / 15 / 2015	
Mailing Address 229 West 43rd Street			Amount of Each Disbursement this Period 55.00	
City New York	State NY	Zip Code 10036	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Publications		Category/ Type		
Candidate Name		Transaction ID : SB17.16914		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PayChex Payroll			Date of Disbursement MM / DD / YYYY 04 / 01 / 2015	
Mailing Address 700 Red Brook Blvd, Suite 200			Amount of Each Disbursement this Period 342.29	
City Owings Mills	State MD	Zip Code 21117	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Payroll Taxes		Category/ Type		
Candidate Name		Transaction ID : SB17.16642		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. PayChex Payroll			Date of Disbursement MM / DD / YYYY 04 / 10 / 2015	
Mailing Address 700 Red Brook Blvd, Suite 200			Amount of Each Disbursement this Period 90.55	
City Owings Mills	State MD	Zip Code 21117	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Payroll Services		Category/ Type		
Candidate Name		Transaction ID : SB17.16645		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	487.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. PayChex Payroll		Date of Disbursement
Mailing Address 700 Red Brook Blvd, Suite 200		M M / D D / Y Y Y Y 04 / 14 / 2015
City Owings Mills	State MD	Zip Code 21117
Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 734.21	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Transaction ID : SB17.16644	

Full Name (Last, First, Middle Initial) B. PayChex Payroll		Date of Disbursement
Mailing Address 700 Red Brook Blvd, Suite 200		M M / D D / Y Y Y Y 04 / 15 / 2015
City Owings Mills	State MD	Zip Code 21117
Purpose of Disbursement Payroll Taxes	Amount of Each Disbursement this Period 342.29	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Transaction ID : SB17.16643	

Full Name (Last, First, Middle Initial) C. PayChex Payroll		Date of Disbursement
Mailing Address 700 Red Brook Blvd, Suite 200		M M / D D / Y Y Y Y 05 / 01 / 2015
City Owings Mills	State MD	Zip Code 21117
Purpose of Disbursement Payroll Taxes	Amount of Each Disbursement this Period 342.29	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Transaction ID : SB17.16754	

SUBTOTAL of Disbursements This Page (optional).....	1418.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. PayChex Payroll		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 700 Red Brook Blvd, Suite 200		Amount of Each Disbursement this Period 239.74
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Services	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.16755

Full Name (Last, First, Middle Initial) B. PayChex Payroll		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 700 Red Brook Blvd, Suite 200		Amount of Each Disbursement this Period 734.21
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Salaries	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.16756

Full Name (Last, First, Middle Initial) C. PayChex Payroll		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2015
Mailing Address 700 Red Brook Blvd, Suite 200		Amount of Each Disbursement this Period 342.29
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Taxes	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.16757

SUBTOTAL of Disbursements This Page (optional).....	1316.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. PayChex Payroll		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2015
Mailing Address 700 Red Brook Blvd, Suite 200		Amount of Each Disbursement this Period 734.21
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Salaries	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.16758
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. PayChex Payroll		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 700 Red Brook Blvd, Suite 200		Amount of Each Disbursement this Period 342.29
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Taxes	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.16941
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. PayChex Payroll		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2015
Mailing Address 700 Red Brook Blvd, Suite 200		Amount of Each Disbursement this Period 159.46
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Services	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.16942
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1235.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 69			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. PayChex Payroll		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2015
Mailing Address 700 Red Brook Blvd, Suite 200		Amount of Each Disbursement this Period 734.21
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Salaries	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.16943
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. PayChex Payroll		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 700 Red Brook Blvd, Suite 200		Amount of Each Disbursement this Period 342.29
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Taxes	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.16944
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. PayChex Payroll		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2015
Mailing Address 700 Red Brook Blvd, Suite 200		Amount of Each Disbursement this Period 734.21
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Salaries	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.16946
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1810.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 900 E. Fayette Street		Amount of Each Disbursement this Period 490.00
City Baltimore	State MD Zip Code 21284	
Purpose of Disbursement Postage	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.16674
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Route 40 BP		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 5612 Baltimore National Pike		Amount of Each Disbursement this Period 109.05
City Catonsville	State MD Zip Code 21228	
Purpose of Disbursement Fuel	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.16664
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Route 40 BP		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 5612 Baltimore National Pike		Amount of Each Disbursement this Period 160.23
City Catonsville	State MD Zip Code 21228	
Purpose of Disbursement Fuel	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.16730
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	759.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Route 40 BP		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 5612 Baltimore National Pike		Amount of Each Disbursement this Period 121.11
City Catonsville	State MD	
Zip Code 21228	Purpose of Disbursement Fuel	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16912
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Royal Farms		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 1530 Russell Street		Amount of Each Disbursement this Period 40.09
City Baltimore	State MD	
Zip Code 21202	Purpose of Disbursement Fuel	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16663
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Royal Farms		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 1530 Russell Street		Amount of Each Disbursement this Period 115.53
City Baltimore	State MD	
Zip Code 21202	Purpose of Disbursement Fuel	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16729
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	276.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Royal Farms		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address 1530 Russell Street		Amount of Each Disbursement this Period 125.04
City Baltimore	State MD	
Zip Code 21202	Purpose of Disbursement Fuel	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16909
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Russell Street BP		Date of Disbursement MM / DD / YYYY 04 / 15 / 2015
Mailing Address 2000 Haines Street		Amount of Each Disbursement this Period 86.93
City Baltimore	State MD	
Zip Code 21230	Purpose of Disbursement Fuel	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16665
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Russell Street BP		Date of Disbursement MM / DD / YYYY 05 / 14 / 2015
Mailing Address 2000 Haines Street		Amount of Each Disbursement this Period 35.20
City Baltimore	State MD	
Zip Code 21230	Purpose of Disbursement Fuel	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16731
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	247.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Ruth Chris Steak House			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015	
Mailing Address 724 9th Street, NW			Amount of Each Disbursement this Period 2483.03	
City Washington	State DC	Zip Code 20001	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fundraising		Category/ Type		
Candidate Name		Transaction ID : SB17.16675		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Shearton Boston			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015	
Mailing Address 39 Dalton Street			Amount of Each Disbursement this Period 307.87	
City Boston	State MA	Zip Code 02199	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Lodging		Category/ Type		
Candidate Name		Transaction ID : SB17.16736		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Shearton Columbia Town Center			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015	
Mailing Address 10207 Wincopin Circle			Amount of Each Disbursement this Period 6200.00	
City Columbia	State MD	Zip Code 21044	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fundraising Facility		Category/ Type		
Candidate Name		Transaction ID : SB17.16660		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	8990.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Shearton Columbia Town Center			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015	
Mailing Address 10207 Wincopin Circle			Amount of Each Disbursement this Period 6200.00	
City Columbia	State MD	Zip Code 21044	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fundraising Facility		Category/ Type		
Candidate Name			Transaction ID : SB17.16732	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Vernon Simms			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015	
Mailing Address 2402 Lawnwood Circle			Amount of Each Disbursement this Period 500.00	
City Baltimore	State MD	Zip Code 21207	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Campaign Services		Category/ Type		
Candidate Name			Transaction ID : SB17.16646	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Vernon Simms			Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2015	
Mailing Address 2402 Lawnwood Circle			Amount of Each Disbursement this Period 200.00	
City Baltimore	State MD	Zip Code 21207	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Campaign Services		Category/ Type		
Candidate Name			Transaction ID : SB17.16751	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	6900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Vernon Simms		Date of Disbursement MM / DD / YYYY 06 / 08 / 2015
Mailing Address 2402 Lawnwood Circle		Amount of Each Disbursement this Period 200.00
City Baltimore	State MD Zip Code 21207	
Purpose of Disbursement Campaign Services	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.16902

Full Name (Last, First, Middle Initial) B. Harry Spikes		Date of Disbursement MM / DD / YYYY 04 / 03 / 2015
Mailing Address 12 Jonquil Ave		Amount of Each Disbursement this Period 1000.00
City Landover	State MD Zip Code 20785	
Purpose of Disbursement Campaign Services	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.16647

Full Name (Last, First, Middle Initial) c. Harry Spikes		Date of Disbursement MM / DD / YYYY 05 / 28 / 2015
Mailing Address 12 Jonquil Ave		Amount of Each Disbursement this Period 500.00
City Landover	State MD Zip Code 20785	
Purpose of Disbursement Campaign Services	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.16753

SUBTOTAL of Disbursements This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Harry Spikes		Date of Disbursement MM / DD / YYYY 06 / 08 / 2015
Mailing Address 12 Jonquil Ave		Amount of Each Disbursement this Period 500.00
City Landover	State MD	
Zip Code 20785	Purpose of Disbursement Campaign Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16904
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Amy Stratton		Date of Disbursement MM / DD / YYYY 04 / 03 / 2015
Mailing Address 7620 Woodpark Lane, #204		Amount of Each Disbursement this Period 1000.00
City Columbia	State MD	
Zip Code 21046	Purpose of Disbursement Campaign Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16648
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Hotel George		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address 15 E. Street, NW		Amount of Each Disbursement this Period 2162.35
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Catering	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16907
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3662.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. The Lawrence A. Beck Co.		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2015
Mailing Address 7120 Ambassador Dr		Amount of Each Disbursement this Period 571.00
City Baltimore	State MD	
Zip Code 21244	Purpose of Disbursement Printing & Duplication	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16901
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Mellman Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2015
Mailing Address 1023 31st Street, NW, 5th Floor		Amount of Each Disbursement this Period 42200.00
City Washington	State DC	
Zip Code 20007	Purpose of Disbursement Survey	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16658
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Ronald Thompson		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2015
Mailing Address P. O. Box 1631		Amount of Each Disbursement this Period 49.00
City Baltimore	State MD	
Zip Code 21203	Purpose of Disbursement Postage	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16656
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	42820.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Ronald Thompson			Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2015	
Mailing Address P. O. Box 1631			Amount of Each Disbursement this Period 1050.00	
City Baltimore	State MD	Zip Code 21203	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Treasury Services		Candidate Name	Transaction ID : SB17.16680	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	Category/Type		

Full Name (Last, First, Middle Initial) B. Ronald Thompson			Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015	
Mailing Address P. O. Box 1631			Amount of Each Disbursement this Period 1050.00	
City Baltimore	State MD	Zip Code 21203	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Treasury Services		Candidate Name	Transaction ID : SB17.16750	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	Category/Type		

Full Name (Last, First, Middle Initial) C. Ronald Thompson			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2015	
Mailing Address P. O. Box 1631			Amount of Each Disbursement this Period 1050.00	
City Baltimore	State MD	Zip Code 21203	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Treasury Services		Candidate Name	Transaction ID : SB17.16940	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	Category/Type		

SUBTOTAL of Disbursements This Page (optional).....	3150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Union Street Media		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 2711 Farnsworth Dr		Amount of Each Disbursement this Period 3014.99
City Alexandria	State VA	
Zip Code 22303	Purpose of Disbursement Website	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16922
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address 4000 E. Sky Harbor Blvd.		Amount of Each Disbursement this Period 1789.55
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement Travel	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16666
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2015
Mailing Address P O Box 17577		Amount of Each Disbursement this Period 325.52
City Baltimore	State MD	
Zip Code 21297	Purpose of Disbursement Utilities	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16655
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5130.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address P O Box 17577		Amount of Each Disbursement this Period 328.71
City Baltimore	State MD	
Zip Code 21297	Purpose of Disbursement Utilities	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16725
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address P O Box 17577		Amount of Each Disbursement this Period 327.07
City Baltimore	State MD	
Zip Code 21297	Purpose of Disbursement Utilities	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16905
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address P. O. Box 17464		Amount of Each Disbursement this Period 204.98
City Baltimore	State MD	
Zip Code 21297	Purpose of Disbursement Equipment	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.16672
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	860.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2015
Mailing Address P. O. Box 17464		Amount of Each Disbursement this Period 756.00
City Baltimore	State MD	
Zip Code 21297	Purpose of Disbursement Utilities	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16678
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2015
Mailing Address P. O. Box 17464		Amount of Each Disbursement this Period 543.56
City Baltimore	State MD	
Zip Code 21297	Purpose of Disbursement Utilities	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16742
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address P. O. Box 17464		Amount of Each Disbursement this Period 507.39
City Baltimore	State MD	
Zip Code 21297	Purpose of Disbursement Utilities	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.16906
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1806.95
TOTAL This Period (last page this line number only).....	97210.16

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 69	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2015
Mailing Address 80 F STREET, N.W.		Amount of Each Disbursement this Period 5000.00
City WASHINGTON State DC Zip Code 20001	Purpose of Disbursement	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB20B.16722
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Congressional Black Caucus Fondation			Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2015	
Mailing Address 430 S. Capitol, SE			Amount of Each Disbursement this Period 2000.00	
City Washington	State DC	Zip Code 20003	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Donation		Candidate Name	Transaction ID : SB21.16679	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) B. HOWARD COUNTY DEMOCRATIC CENTRAL COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015	
Mailing Address 6289 LOVEKNOT PLACE			Amount of Each Disbursement this Period 2500.00	
City COLUMBIA	State MD	Zip Code 21045	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Donation		Candidate Name	Transaction ID : SB21.16650	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) c. Maryland Democratic Party			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2015	
Mailing Address 188 Main Street, Suite 1			Amount of Each Disbursement this Period 5000.00	
City Annapolis	State MD	Zip Code 21401	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Donation		Candidate Name	Transaction ID : SB21.16723	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	9500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. Maryland State & DC AFL-CIO		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 7 School Street		Amount of Each Disbursement this Period 250.00
City Annapolis	State MD Zip Code 21401	
Purpose of Disbursement Donation	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB21.16918

Full Name (Last, First, Middle Initial) B. Stepanie Blake Rawlings		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address 2423 Maryland Ave, 2nd Flr		Amount of Each Disbursement this Period 3000.00
City Baltimore	State MD Zip Code 21218	
Purpose of Disbursement Donation	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB21.16652

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	12750.00