

FEC FORM 3P

REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

12FE4M5

JILL STEIN FOR PRESIDENT

ADDRESS (number and street)

22 KENDALL ROAD

Check if different than previously reported. (ACC)

LEXINGTON

CITY

MA

STATE

02421

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00581199

3. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1)
- October 15 (Q3)
- July 15 (Q2)
- January 31 Year-End Report (YE)
- Feb 20 (M2)
- May 20 (M5)
- Aug 20 (M8)
- Nov 20 (M11)
- Mar 20 (M3)
- Jun 20 (M6)
- Sep 20 (M9)
- Dec 20 (M12)
- Apr 20 (M4)
- Jul 20 (M7)
- Oct 20 (M10)
- Jan 31 (YE)

- 12-Day Pre-Election Report for the Election on
- 30-Day Post-Election Report for the General Election on

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

4. IS THIS REPORT AN AMENDMENT?

yes no

5. COVERING PERIOD

03 / 01 / 2017 THROUGH 03 / 31 / 2017

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 Welzer, Steven, , ,

Signature of Treasurer Welzer, Steven, , , [Electronically Filed] Date 05 / 23 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109. All previous versions of this form are obsolete and should no longer be used.

Office Use Only								
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Write or Type Committee Name

JILL STEIN FOR PRESIDENT

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

SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	<input type="text" value="920122.02"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	<input type="text" value="632125.00"/>
8. SUBTOTAL (Lines 6 and 7)	<input type="text" value="1552247.02"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 4)	<input type="text" value="83267.35"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8).....	<input type="text" value="1468979.67"/>
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="87740.00"/>
13. EXPENDITURES SUBJECT TO LIMITATION (Use the worksheet on Page 8 to calculate this amount.).....	<input type="text" value="3564555.23"/>

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B on Page 4 from 17e, Column B on Page 3).....	<input type="text" value="3217134.39"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B on Page 3 from 23, Column B on Page 4).....	<input type="text" value="3549399.17"/>

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 05/2016)

of Receipts

NAME OF COMMITTEE (in Full)

JILL STEIN FOR PRESIDENT

Report Covering the Period: From:

MM / DD / YYYY
03 / 01 / 2017

To:

MM / DD / YYYY
03 / 31 / 2017

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	456035.39
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	0.00	1119095.08
(ii) unitemized	0.00	2100504.31
(iii) Total contributions	0.00	3219599.39
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	0.00	3219599.39
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	40000.00
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	40000.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	632125.00	16652.53
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	632125.00	16652.53
21. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	632125.00	3732287.31

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 05/2016)

of Disbursements and Contributed Items

NAME OF COMMITTEE (in Full)

JILL STEIN FOR PRESIDENT

Report Covering the Period: From:

03 / 01 / 2017

To:

03 / 31 / 2017

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Election Cycle-to-Date**

23. OPERATING EXPENDITURES.....	83267.35	3566051.70
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	22300.00
25. FUNDRAISING DISBURSEMENTS	0.00	15156.06
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	2465.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	0.00	2465.00
29. OTHER DISBURSEMENTS	0.00	250.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	83267.35	3606222.76

**III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	
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FEC Form 3P (Rev. 05/2016)
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C 00581199

JILL STEIN FOR PRESIDENT

ADDRESS (number and street)

22 KENDALL ROAD

LEXINGTON

CITY

MA

STATE

02421

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Belle, Anita, , ,			Date of Disbursement MM / DD / YYYY 03 / 28 / 2017	
Mailing Address 415 Burns Dr #S-201			FEC Identification Number C	
City Detroit	State MI	Zip Code 48214	Transaction ID : SB23.425856 Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement Recount Organizing Services		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) B. Blackmon, Robert, , ,			Date of Disbursement MM / DD / YYYY 03 / 02 / 2017	
Mailing Address 1161 N Ogden Dr #109			FEC Identification Number C	
City West Hollywood	State CA	Zip Code 90046	Transaction ID : SB23.425882 Amount of Each Disbursement this Period 3300.00	
Purpose of Disbursement Recount Performance Bonus		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) c. Christianson, Damian, , ,			Date of Disbursement MM / DD / YYYY 03 / 01 / 2017	
Mailing Address 2892 Mickelson Pkwy #103			FEC Identification Number C	
City Fitchburg	State WI	Zip Code 53711	Transaction ID : SB23.425865 Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Recount Organizing Services		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Subtotal Of Receipts This Page (optional).....	4900.00
Total This Period (last page this line number only).....	

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Christianson, Damian, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2017	
Mailing Address 2892 Mickelson Pkwy #103			FEC Identification Number C	
City Fitchburg	State WI	Zip Code 53711	Transaction ID : SB23.425850 Amount of Each Disbursement this Period 436.14	
Purpose of Disbursement Travel Costs		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) B. Christianson, Damian, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2017	
Mailing Address 2892 Mickelson Pkwy #103			FEC Identification Number C	
City Fitchburg	State WI	Zip Code 53711	Transaction ID : SB23.425851 Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Recount Organizing Services		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) c. Christianson, Damian, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2017	
Mailing Address 2892 Mickelson Pkwy #103			FEC Identification Number C	
City Fitchburg	State WI	Zip Code 53711	Transaction ID : SB23.425849 Amount of Each Disbursement this Period 380.11	
Purpose of Disbursement Recount Convention Expenses		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Subtotal Of Receipts This Page (optional)..... 1316.25

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Christianson, Damian, , ,			Date of Disbursement MM / DD / YYYY 03 / 22 / 2017		
Mailing Address 2892 Mickelson Pkwy #103			FEC Identification Number C		
City Fitchburg	State WI	Zip Code 53711	Transaction ID : SB23.425852 Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Recount Organizing Services		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) B. Cobb, David, , ,			Date of Disbursement MM / DD / YYYY 03 / 08 / 2017		
Mailing Address 1402 M St			FEC Identification Number C		
City Eureka	State CA	Zip Code 95501	Transaction ID : SB23.425866 Amount of Each Disbursement this Period 1133.37		
Purpose of Disbursement Backpay - Healthcare Reimbursement Costs		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) c. Cobb, David, , ,			Date of Disbursement MM / DD / YYYY 03 / 13 / 2017		
Mailing Address 1402 M St			FEC Identification Number C		
City Eureka	State CA	Zip Code 95501	Transaction ID : SB23.425877 Amount of Each Disbursement this Period 1880.00		
Purpose of Disbursement Campaign Manager		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Subtotal Of Receipts This Page (optional)..... 3513.37

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Cobb, David, , ,			Date of Disbursement MM / DD / YYYY 03 / 13 / 2017	
Mailing Address 1402 M St			FEC Identification Number C	
City Eureka	State CA	Zip Code 95501	Transaction ID : SB23.425878	
Purpose of Disbursement Campaign Manager		Category/ Type	Amount of Each Disbursement this Period 1880.00	
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:				

Full Name (Last, First, Middle Initial) B. Cobb, David, , ,			Date of Disbursement MM / DD / YYYY 03 / 21 / 2017	
Mailing Address 1402 M St			FEC Identification Number C	
City Eureka	State CA	Zip Code 95501	Transaction ID : SB23.425879	
Purpose of Disbursement Campaign Manager		Category/ Type	Amount of Each Disbursement this Period 1880.00	
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) c. Cobb, David, , ,			Date of Disbursement MM / DD / YYYY 03 / 21 / 2017	
Mailing Address 1402 M St			FEC Identification Number C	
City Eureka	State CA	Zip Code 95501	Transaction ID : SB23.425880	
Purpose of Disbursement Campaign Manager		Category/ Type	Amount of Each Disbursement this Period 1880.00	
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:				

Subtotal Of Receipts This Page (optional)..... 5640.00

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Delta Airlines			Date of Disbursement MM / DD / YYYY 03 / 17 / 2017		
Mailing Address PO Box 20706			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30320	Transaction ID : SB23.425835		
Purpose of Disbursement Airline Ticket Booking Costs		Category/ Type	Amount of Each Disbursement this Period 33.60		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) B. Ferguson, Kendall, , ,			Date of Disbursement MM / DD / YYYY 03 / 13 / 2017		
Mailing Address 1622 Fordem Ave #401			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : SB23.425858		
Purpose of Disbursement Finance Associate		Category/ Type	Amount of Each Disbursement this Period 960.00		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) c. Ferguson, Kendall, , ,			Date of Disbursement MM / DD / YYYY 03 / 13 / 2017		
Mailing Address 1622 Fordem Ave #401			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : SB23.425859		
Purpose of Disbursement Finance Associate		Category/ Type	Amount of Each Disbursement this Period 960.00		
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) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

Subtotal Of Receipts This Page (optional).....	1953.60
Total This Period (last page this line number only).....	

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Ferguson, Kendall, , ,			Date of Disbursement MM / DD / YYYY 03 / 21 / 2017	
Mailing Address 1622 Fordem Ave #401			FEC Identification Number C	
City Madison	State WI	Zip Code 53704	Transaction ID : SB23.425860 Amount of Each Disbursement this Period 960.00	
Purpose of Disbursement Finance Associate		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) B. Ferguson, Kendall, , ,			Date of Disbursement MM / DD / YYYY 03 / 21 / 2017	
Mailing Address 1622 Fordem Ave #401			FEC Identification Number C	
City Madison	State WI	Zip Code 53704	Transaction ID : SB23.425861 Amount of Each Disbursement this Period 960.00	
Purpose of Disbursement Finance Associate		Category/ Type	Memo Item <input type="checkbox"/>	
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. Figueroa, Meleiza, , ,			Date of Disbursement MM / DD / YYYY 03 / 13 / 2017	
Mailing Address 1526 Beau Rivage			FEC Identification Number C	
City San Pablo	State CA	Zip Code 94806	Transaction ID : SB23.425854 Amount of Each Disbursement this Period 576.00	
Purpose of Disbursement Press Director		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Subtotal Of Receipts This Page (optional)..... 2496.00

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Figueroa, Meleiza, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2017		
Mailing Address 1526 Beau Rivage			FEC Identification Number C		
City San Pablo	State CA	Zip Code 94806	Transaction ID : SB23.425855		
Purpose of Disbursement Press Director		Category/ Type	Amount of Each Disbursement this Period 576.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. Garrett, Lora, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2017		
Mailing Address 501 North St			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : SB23.425875		
Purpose of Disbursement Finance Associate Services		Category/ Type	Amount of Each Disbursement this Period 1805.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) c. Garrett, Lora, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2017		
Mailing Address 501 North St			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : SB23.425876		
Purpose of Disbursement Finance Associate Services		Category/ Type	Amount of Each Disbursement this Period 1840.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Subtotal Of Receipts This Page (optional)..... 4221.00

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. GREEN PARTY OF THE UNITED STATES			Date of Disbursement MM / DD / YYYY 03 / 01 / 2017		
Mailing Address P.O. BOX 75075			FEC Identification Number C C00370221		
City WASHINGTON	State DC	Zip Code 20013	Transaction ID : SB23.425889		
Purpose of Disbursement Fee for Services: Nominating Convention Expenses		Category/ Type 101	Amount of Each Disbursement this Period 18378.87		
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: _____				

Full Name (Last, First, Middle Initial) B. Holiday Inn - Milwaukee			Date of Disbursement MM / DD / YYYY 03 / 19 / 2017		
Mailing Address 4700 North Port Washington Rd			FEC Identification Number C _____		
City Milwaukee	State WI	Zip Code 53212	Transaction ID : SB23.425847		
Purpose of Disbursement Hotel Room Costs		Category/ Type	Amount of Each Disbursement this Period 342.90		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) c. Kozlowski, Matthew, , ,			Date of Disbursement MM / DD / YYYY 03 / 13 / 2017		
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C _____		
City Madison	State WI	Zip Code 53704	Transaction ID : SB23.425869		
Purpose of Disbursement Director of Compliance		Category/ Type	Amount of Each Disbursement this Period 1790.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: _____	District: _____				

Subtotal Of Receipts This Page (optional)..... 20511.77

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Kozlowski, Matthew, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2017	
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C	
City Madison	State WI	Zip Code 53704	Transaction ID : SB23.425870 Amount of Each Disbursement this Period 1790.00	
Purpose of Disbursement Director of Compliance		Category/ Type	Memo Item <input type="checkbox"/>	
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. Kozlowski, Matthew, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2017	
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C	
City Madison	State WI	Zip Code 53704	Transaction ID : SB23.425883 Amount of Each Disbursement this Period 3320.00	
Purpose of Disbursement Director of Compliance		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) C. Kozlowski, Matthew, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2017	
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C	
City Madison	State WI	Zip Code 53704	Transaction ID : SB23.425871 Amount of Each Disbursement this Period 1790.00	
Purpose of Disbursement Director of Compliance		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Subtotal Of Receipts This Page (optional)..... 6900.00

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Kozlowski, Matthew, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2017		
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : SB23.425872 Amount of Each Disbursement this Period 1790.00		
Purpose of Disbursement Director of Compliance		Category/ Type	Memo Item <input type="checkbox"/>		
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. Kozlowski, Matthew, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2017		
Mailing Address 1750 Fordem Ave #706			FEC Identification Number C		
City Madison	State WI	Zip Code 53704	Transaction ID : SB23.425884 Amount of Each Disbursement this Period 3320.00		
Purpose of Disbursement Director of Compliance		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) c. Lass, Rick, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2017		
Mailing Address PO Box 111			FEC Identification Number C		
City Mimbres	State NM	Zip Code 88049	Transaction ID : SB23.425873 Amount of Each Disbursement this Period 1790.00		
Purpose of Disbursement Scheduling Director		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Subtotal Of Receipts This Page (optional)..... **6900.00**

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Lass, Rick, , ,			Date of Disbursement MM / DD / YYYY 03 / 21 / 2017		
Mailing Address PO Box 111			FEC Identification Number C		
City Mimbres	State NM	Zip Code 88049	Transaction ID : SB23.425874 Amount of Each Disbursement this Period 1790.00		
Purpose of Disbursement Scheduling Director		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) B. Nationbuilder			Date of Disbursement MM / DD / YYYY 03 / 01 / 2017		
Mailing Address 520 S Grand Ave 2nd Floor			FEC Identification Number C		
City Los Angeles	State CA	Zip Code 90071	Transaction ID : SB23.425885 Amount of Each Disbursement this Period 3743.00		
Purpose of Disbursement Website Domain Services		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) c. Payroll Center			Date of Disbursement MM / DD / YYYY 03 / 09 / 2017		
Mailing Address PO Box 8023			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : SB23.425832 Amount of Each Disbursement this Period 25.00		
Purpose of Disbursement Payroll Processing Fees		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Subtotal Of Receipts This Page (optional)..... 5558.00

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Payroll Center			Date of Disbursement MM / DD / YYYY 03 / 13 / 2017		
Mailing Address PO Box 8023			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : SB23.425845 Amount of Each Disbursement this Period 335.50		
Purpose of Disbursement Payroll Processing Costs		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) B. Payroll Center			Date of Disbursement MM / DD / YYYY 03 / 13 / 2017		
Mailing Address PO Box 8023			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : SB23.425868 Amount of Each Disbursement this Period 1575.33		
Purpose of Disbursement Payroll Taxes		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) c. Payroll Center			Date of Disbursement MM / DD / YYYY 03 / 16 / 2017		
Mailing Address PO Box 8023			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : SB23.425818 Amount of Each Disbursement this Period 0.91		
Purpose of Disbursement Payroll Processing Fees		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name		Disbursement For: 2016			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Subtotal Of Receipts This Page (optional)..... 1911.74

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Payroll Center			Date of Disbursement MM / DD / YYYY 03 / 21 / 2017		
Mailing Address PO Box 8023			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : SB23.425844 Amount of Each Disbursement this Period 208.50		
Purpose of Disbursement Payroll Processing Costs		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other				
State: District:					

Full Name (Last, First, Middle Initial) B. Payroll Center			Date of Disbursement MM / DD / YYYY 03 / 21 / 2017		
Mailing Address PO Box 8023			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : SB23.425867 Amount of Each Disbursement this Period 1431.71		
Purpose of Disbursement Payroll Taxes		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other				
State: District:					

Full Name (Last, First, Middle Initial) c. Schwab, David, , ,			Date of Disbursement MM / DD / YYYY 03 / 13 / 2017		
Mailing Address 225 E Lakelawn Pl			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : SB23.425862 Amount of Each Disbursement this Period 960.00		
Purpose of Disbursement Communications Director		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other				
State: District:					

Subtotal Of Receipts This Page (optional)..... 2600.21

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Schwab, David, , ,			Date of Disbursement MM / DD / YYYY 03 / 13 / 2017		
Mailing Address 225 E Lakelawn Pl			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : SB23.425864 Amount of Each Disbursement this Period 964.80		
Purpose of Disbursement Healthcare Reimbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) B. Schwab, David, , ,			Date of Disbursement MM / DD / YYYY 03 / 21 / 2017		
Mailing Address 225 E Lakelawn Pl			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : SB23.425863 Amount of Each Disbursement this Period 960.00		
Purpose of Disbursement Communications Director		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) c. Serpe, Lynne, , ,			Date of Disbursement MM / DD / YYYY 03 / 03 / 2017		
Mailing Address 2440 Aubry St			FEC Identification Number C		
City New Orleans	State LA	Zip Code 70119	Transaction ID : SB23.425881 Amount of Each Disbursement this Period 2660.00		
Purpose of Disbursement Associate Campaign Manager		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Subtotal Of Receipts This Page (optional)..... 4584.80

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Serpe, Lynne, , ,			Date of Disbursement MM / DD / YYYY 03 / 03 / 2017		
Mailing Address 2440 Aubry St			FEC Identification Number C		
City New Orleans	State LA	Zip Code 70119	Transaction ID : SB23.425886		
Purpose of Disbursement Performance Bonus Payment		Category/ Type	Amount of Each Disbursement this Period 8000.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) B. Shopify.com			Date of Disbursement MM / DD / YYYY 03 / 13 / 2017		
Mailing Address 150 Elgin St 8th Floor			FEC Identification Number C		
City Ottawa	State ZZ	Zip Code K2P 1L4	Transaction ID : SB23.425827		
Purpose of Disbursement Donation Processing Fees		Category/ Type	Amount of Each Disbursement this Period 15.00		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) c. Social Justice Center			Date of Disbursement MM / DD / YYYY 03 / 01 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : SB23.425848		
Purpose of Disbursement Office Rent		Category/ Type	Amount of Each Disbursement this Period 355.00		
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:					

Subtotal Of Receipts This Page (optional).....	8370.00
Total This Period (last page this line number only).....	

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Social Justice Center			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : SB23.425857 Amount of Each Disbursement this Period 760.00		
Purpose of Disbursement Office Rent		Category/ Type	Memo Item <input type="checkbox"/>		
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. Summit Credit Union			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2017		
Mailing Address PO Box 8046			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : SB23.425823 Amount of Each Disbursement this Period 10.00		
Purpose of Disbursement Bank Fees		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Full Name (Last, First, Middle Initial) c. Summit Credit Union			Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2017		
Mailing Address PO Box 8046			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : SB23.425831 Amount of Each Disbursement this Period 25.00		
Purpose of Disbursement Bank Fees		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State:	District:				

Subtotal Of Receipts This Page (optional)..... 795.00

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Summit Credit Union			Date of Disbursement MM / DD / YYYY 03 / 21 / 2017		
Mailing Address PO Box 8046			FEC Identification Number C		
City Madison	State WI	Zip Code 53708	Transaction ID : SB23.425820 Amount of Each Disbursement this Period 5.00		
Purpose of Disbursement Bank Fees		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) B. Thomas, Jillian, , ,			Date of Disbursement MM / DD / YYYY 03 / 21 / 2017		
Mailing Address 3109 Brighton 7th St 5G			FEC Identification Number C		
City Brooklyn	State NY	Zip Code 11235	Transaction ID : SB23.425853 Amount of Each Disbursement this Period 504.00		
Purpose of Disbursement Social Media Director		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Full Name (Last, First, Middle Initial) c. Unitemized Vendors - Under Limit			Date of Disbursement MM / DD / YYYY 03 / 24 / 2017		
Mailing Address 1202 Williamson St			FEC Identification Number C		
City Madison	State WI	Zip Code 53703	Transaction ID : SB23.425819 Amount of Each Disbursement this Period 3.26		
Purpose of Disbursement Travel Food		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other				
State: District:					

Subtotal Of Receipts This Page (optional)..... 512.26

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial) A. Unitemized Vendors - Under Limit			Date of Disbursement MM / DD / YYYY 03 / 24 / 2017	
Mailing Address 1202 Williamson St			FEC Identification Number C	
City Madison	State WI	Zip Code 53703	Transaction ID : SB23.425821 Amount of Each Disbursement this Period 5.02	
Purpose of Disbursement Travel Food		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) B. Unitemized Vendors - Under Limit			Date of Disbursement MM / DD / YYYY 03 / 24 / 2017	
Mailing Address 1202 Williamson St			FEC Identification Number C	
City Madison	State WI	Zip Code 53703	Transaction ID : SB23.425822 Amount of Each Disbursement this Period 7.30	
Purpose of Disbursement Toll Road Costs		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Full Name (Last, First, Middle Initial) c. Unitemized Vendors - Under Limit			Date of Disbursement MM / DD / YYYY 03 / 24 / 2017	
Mailing Address 1202 Williamson St			FEC Identification Number C	
City Madison	State WI	Zip Code 53703	Transaction ID : SB23.425839 Amount of Each Disbursement this Period 47.59	
Purpose of Disbursement Gasoline Costs		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other			
State: District:				

Subtotal Of Receipts This Page (optional)..... 59.91

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

Full Name (Last, First, Middle Initial)

A. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement
Ground Travel Costs

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 25 / 2017

FEC Identification Number

C

Transaction ID : SB23.425824

Amount of Each Disbursement this Period

10.60

Memo Item

Full Name (Last, First, Middle Initial)

B. Unitemized Vendors - Under Limit

Mailing Address 1202 Williamson St

City Madison State WI Zip Code 53703

Purpose of Disbursement
Gasoline Costs

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 26 / 2017

FEC Identification Number

C

Transaction ID : SB23.425833

Amount of Each Disbursement this Period

25.22

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS - Madison

Mailing Address 441 N Lake St

City Madison State WI Zip Code 53715

Purpose of Disbursement
Postage

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 01 / 2017

FEC Identification Number

C

Transaction ID : SB23.425830

Amount of Each Disbursement this Period

23.75

Memo Item

Subtotal Of Receipts This Page (optional)..... 59.57

Total This Period (last page this line number only)..... 82803.48

SCHEDULE C-P LOANS

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

PAGE OF

FOR LINE NUMBER: 19a 19b
(check only one)

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.8887

JILL STEIN FOR PRESIDENT

LOAN SOURCE Full Name (Last, First, Middle Initial)
STEIN, JILL, , ,

Memo Item

Election: 2016

- Primary
- General
- Other (specify) ▼

Mailing Address
22 KENDALL ROAD

City
LEXINGTON

State
MA

Zip Code
02421

Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

TERMS

Date Incurred

Date Due

Interest Rate (if none, enter 0)

Secured:

MM / DD / YYYY
05 / 06 / 2015

MM / DD / YYYY

MM / DD / YYYY

On Demand

0.00 % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

Subtotal Of Receipts This Page (optional).....

10000.00

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

Carry outstanding balance only to Line 3, Schedule D-P, for this line. If no Schedule D-P, carry forward to appropriate line of Summary Page.

SCHEDULE C-P LOANS

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

PAGE OF

FOR LINE NUMBER: 19a 19b
(check only one)

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.8889

JILL STEIN FOR PRESIDENT

LOAN SOURCE Full Name (Last, First, Middle Initial)

STEIN, JILL, , ,

Memo Item

Election: 2016

Primary

General

Other (specify) ▼

Mailing Address

22 KENDALL ROAD

City

LEXINGTON

State

MA

Zip Code

02421

Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

MM / DD / YYYY
06 / 06 / 2015

Date Due

MM / DD / YYYY
On Demand

Interest Rate (if none, enter 0)

0.00 % (apr)

Secured:

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

Subtotal Of Receipts This Page (optional).....

10000.00

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

Carry outstanding balance only to Line 3, Schedule D-P, for this line. If no Schedule D-P, carry forward to appropriate line of Summary Page.

SCHEDULE C-P LOANS

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

PAGE OF

FOR LINE NUMBER: 19a 19b
(check only one)

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.8890

JILL STEIN FOR PRESIDENT

LOAN SOURCE Full Name (Last, First, Middle Initial)
STEIN, JILL, , ,

Memo Item

Election: 2016

- Primary
- General
- Other (specify) ▼

Mailing Address
22 KENDALL ROAD

City
LEXINGTON

State
MA

Zip Code
02421

Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

TERMS

Date Incurred

Date Due

Interest Rate (if none, enter 0)

Secured:

MM / DD / YYYY
06 / 06 / 2015

MM / DD / YYYY

MM / DD / YYYY

On Demand

0.00 % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

Subtotal Of Receipts This Page (optional).....

10000.00

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

Carry outstanding balance only to Line 3, Schedule D-P, for this line. If no Schedule D-P, carry forward to appropriate line of Summary Page.

SCHEDULE C-P LOANS

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

PAGE OF

FOR LINE NUMBER: 19a 19b
(check only one)

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.8891

JILL STEIN FOR PRESIDENT

LOAN SOURCE Full Name (Last, First, Middle Initial)

STEIN, JILL, , ,

Memo Item

Election: 2016

Primary

General

Other (specify) ▼

Mailing Address

22 KENDALL ROAD

City

LEXINGTON

State

MA

Zip Code

02421

Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

MM / DD / YYYY
06 / 23 / 2015

Date Due

MM / DD / YYYY
On Demand

Interest Rate (if none, enter 0)

0.00 % (apr)

Secured:

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

Subtotal Of Receipts This Page (optional).....

10000.00

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

40000.00

Carry outstanding balance only to Line 3, Schedule D-P, for this line. If no Schedule D-P, carry forward to appropriate line of Summary Page.

SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
JILL STEIN FOR PRESIDENT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Dorno Solutions LLC

Nature of Debt (Purpose):
 Ballot Access Petitioning

Mailing Address PO Box 9003

City
 Rochester

State
 MN

Zip Code
 55903

Outstanding Balance Beginning This Period

15940.00

Transaction ID : SD12.115238

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15940.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Four Americas Consulting

Nature of Debt (Purpose):
 Media and Events Consulting

Mailing Address 5400 Fieldston Rd
 Unit 14E

City
 Bronx

State
 NY

Zip Code
 10471

Outstanding Balance Beginning This Period

15000.00

Transaction ID : SD12.115237

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Hustle Inc

Nature of Debt (Purpose):
 Phonebanking Software

Mailing Address 251 Kearny St
 Suite 300

City
 San Francisco

State
 CA

Zip Code
 94108

Outstanding Balance Beginning This Period

16800.00

Transaction ID : SD12.115236

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

16800.00

1) SUBTOTALS This Period This Page (optional)	▶	47740.00
2) TOTALS This Period (last page this line number only)	▶	47740.00
3) TOTAL OUTSTANDING LOANS from Schedule C-P (last page only)	▶	40000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	87740.00