

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) **PO Box 3157**
 Check if different than previously reported. (ACC) **Long Branch NJ 07740**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00410308 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / 2019 through / / 2019

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

Signature of Treasurer *Goode, Warren, B, ,* [Electronically Filed] Date / / 2019

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

SHORE PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="192153.91"/>	<input type="text" value="192153.91"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="318409.35"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="25066.67"/>	<input type="text" value="467273.37"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="343476.02"/>	<input type="text" value="659427.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="27190.74"/>	<input type="text" value="343142.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="316285.28"/>	<input type="text" value="316285.28"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

SHORE PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7566.67	118516.70
(ii) Unitemized	0.00	356.67
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7566.67	118873.37
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	17500.00	348400.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	25066.67	467273.37
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	25066.67	467273.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	25066.67	467273.37

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	9440.74	126392.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	9440.74	126392.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17750.00	215750.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	1000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	27190.74	343142.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27190.74	343142.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	25066.67	467273.37
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25066.67	467273.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	9440.74	126392.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9440.74	126392.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 17
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
SHORE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Gregorian, Jamie, , ,

Mailing Address 215 17th Street NE

City Washington	State DC	Zip Code 20002
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Biotechnology Innovation Organization	Occupation (for Individual) Government Relations
--	---

Receipt For:
 Primary General
 Other (specify) **Annual**

Aggregate Year-to-Date ▼
3183.37

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2019

Transaction ID : 11ai-000044545

Amount of Each Receipt this Period
316.67

Memo Item

Earmarked Contribution Through ActBlue

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

Mailing Address 35 East 62nd Street

City New York	State NY	Zip Code 10065
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MacAndrews & Forbes Holdings Inc	Occupation (for Individual) Chairman & CEO
---	---

Receipt For:
 Primary General
 Other (specify) **Annual**

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2019

Transaction ID : 11ai-000044541

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 437 Lucerne Avenue

City Tampa	State FL	Zip Code 33606
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Holland & Knight	Occupation (for Individual) Government Relations
---	---

Receipt For:
 Primary General
 Other (specify) **Annual**

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		17		2019

Transaction ID : 11ai-000044599

Amount of Each Receipt this Period
500.00

Memo Item

Earmarked Contribution Through ActBlue

SUBTOTAL of Receipts This Page (optional).....	5816.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SHORE PAC

A. Thompson, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 323 North Columbus Street
 City Alexandria State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pirme Policy Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify) Annual
 Aggregate Year-to-Date 1250.00

Date of Receipt 11 / 24 / 2019
Transaction ID : 11ai-000044663
 Amount of Each Receipt this Period 1250.00
 Memo Item
 Earmarked Contribution Through ActBlue

B. Rothschild, Gregg, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6423 78th Street
 City Cabin John State MD Zip Code 20818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Glover Park Group Occupation (for Individual) Attorney/Managing Director
 Receipt For: Primary General Other (specify) Annual
 Aggregate Year-to-Date 2500.00

Date of Receipt 11 / 30 / 2019
Transaction ID : 11ai-000044664
 Amount of Each Receipt this Period 500.00
 Memo Item
 Earmarked Contribution Through ActBlue

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	7566.67

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SHORE PAC

A. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) Annual

Aggregate Year-to-Date ▼
90933.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2019

Transaction ID : 11c-000044544

Amount of Each Receipt this Period
316.67

Memo Item

Conduit Contributions Through ActBlue

B. Alston Bird PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 950 F Street NW

City Washington	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00395723

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

Receipt For:
 Primary General
 Other (specify) Annual

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2019

Transaction ID : 11c-000044542

Amount of Each Receipt this Period
2500.00

Memo Item

C. American Association of Nurse Anesthetists PAC (CRNA PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 412 First Street SE #12

City Washington	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C** C00173153

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

Receipt For:
 Primary General
 Other (specify) Annual

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2019

Transaction ID : 11c-000044543

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SHORE PAC

A. ActBlue

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) Annual

Aggregate Year-to-Date ▼
91433.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2019

Transaction ID : 11c-000044597

Amount of Each Receipt this Period
500.00

Memo Item

Conduit Contributions Through ActBlue

B. Whirlpool Corp PAC

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

Mailing Address 701 Pennsylvania Avenue NW

City Washington	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00039040

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

Receipt For:
 Primary General
 Other (specify) Annual

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2019

Transaction ID : 11c-000044596

Amount of Each Receipt this Period
5000.00

Memo Item

C. Honeywell International PAC

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

Mailing Address 101 Constitution Avenue NW Suite 5

City Washington	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00096156

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

Receipt For:
 Primary General
 Other (specify) Annual

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2019

Transaction ID : 11c-000044595

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 17
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
SHORE PAC

A. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) Annual

Aggregate Year-to-Date ▼
92683.37

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 24 / 2019

Transaction ID : 11c-000044659

Amount of Each Receipt this Period
1250.00

Memo Item

Conduit Contributions Through ActBlue

B. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) Annual

Aggregate Year-to-Date ▼
93183.37

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 30 / 2019

Transaction ID : 11c-000044660

Amount of Each Receipt this Period
500.00

Memo Item

Conduit Contributions Through ActBlue

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

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	17500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SHORE PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement MM / DD / YYYY 11 / 12 / 2019	
Mailing Address 14 Arrow Street			FEC Identification Number C [REDACTED] Transaction ID : 21b-02-02168	
City Cambridge	State MA	Zip Code 02138	Amount of Each Disbursement this Period [REDACTED] 12.51	
Purpose of Disbursement Service Fee		Candidate Name	Memo Item <input type="checkbox"/>	
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:	Annual		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement MM / DD / YYYY 11 / 25 / 2019	
Mailing Address 14 Arrow Street			FEC Identification Number C [REDACTED] Transaction ID : 21b-02-02183	
City Cambridge	State MA	Zip Code 02138	Amount of Each Disbursement this Period [REDACTED] 19.75	
Purpose of Disbursement Service Fee		Candidate Name	Memo Item <input type="checkbox"/>	
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:	Annual		

Full Name (Last, First, Middle Initial) C. American Express			Date of Disbursement MM / DD / YYYY 11 / 25 / 2019	
Mailing Address PO Box 1270			FEC Identification Number C [REDACTED] Transaction ID : 21b-02-02192	
City Newark	State NJ	Zip Code 07101	Amount of Each Disbursement this Period [REDACTED] 2689.35	
Purpose of Disbursement See Memo Items		Candidate Name	Memo Item <input type="checkbox"/>	
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:	Annual		

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

2721.61

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SHORE PAC

Full Name (Last, First, Middle Initial)

A. We The Pizza

Mailing Address 305 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Food & Beverage

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) Annual

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2019

FEC Identification Number

C

Transaction ID : 21b-02-02192

Amount of Each Disbursement this Period

443.15

Memo Item

Full Name (Last, First, Middle Initial)

B. Bull Feathers

Mailing Address 410 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Food & Beverage

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) Annual

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2019

FEC Identification Number

C

Transaction ID : 21b-02-02192

Amount of Each Disbursement this Period

2144.80

Memo Item

Full Name (Last, First, Middle Initial)

C. Bullfrog Bagels

Mailing Address 317 7th Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Food & Beverage

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) Annual

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2019

FEC Identification Number

C

Transaction ID : 21b-02-02192

Amount of Each Disbursement this Period

101.40

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SHORE PAC

Full Name (Last, First, Middle Initial) A. Carroll, Jeffrey, C, ,		Date of Disbursement MM / DD / YYYY 11 / 27 / 2019	
Mailing Address 1831 Grampion Place		FEC Identification Number C [] Transaction ID : 21b-02-02189	
City Vienna	State VA	Zip Code 22182	Amount of Each Disbursement this Period [] 2350.00
Purpose of Disbursement Fundraising 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Annual		

Full Name (Last, First, Middle Initial) B. Davey Consulting LLC		Date of Disbursement MM / DD / YYYY 11 / 27 / 2019	
Mailing Address 322 17th Street NE		FEC Identification Number C [] Transaction ID : 21b-02-02190	
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period [] 4000.00
Purpose of Disbursement Fundraising 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Annual		

Full Name (Last, First, Middle Initial) C. Woolley, Jodi, , ,		Date of Disbursement MM / DD / YYYY 11 / 27 / 2019	
Mailing Address 6 Mountainside Avenue		FEC Identification Number C [] Transaction ID : 21b-02-02191	
City Atlantic Highlands	State NJ	Zip Code 07716	Amount of Each Disbursement this Period [] 300.00
Purpose of Disbursement 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Annual		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 6650.00
TOTAL This Period (last page this line number only).....▶	[]

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ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
SHORE PAC

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

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement Service Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) Annual

Date of Disbursement: 11 / 30 / 2019

FEC Identification Number: C

Transaction ID : 21b-02-02187

Amount of Each Disbursement this Period: 49.38

Memo Item

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

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement Service Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) Annual

Date of Disbursement: 11 / 30 / 2019

FEC Identification Number: C

Transaction ID : 21b-02-02187

Amount of Each Disbursement this Period: 19.75

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) Annual

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 69.13

TOTAL This Period (last page this line number only)..... ▶ 9440.74

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

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

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NAME OF COMMITTEE (In Full)
SHORE PAC

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee (DCCC)		Date of Disbursement MM / DD / YYYY 11 / 27 / 2019
Mailing Address C00000935 430 South Capitol Street SE		FEC Identification Number C C00000935 Transaction ID : 23-02-02188-4 Amount of Each Disbursement this Period 8750.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Annual	
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Van Drew for Congress		Date of Disbursement MM / DD / YYYY 11 / 13 / 2019
Mailing Address PO Box 671		FEC Identification Number C C00661868 Transaction ID : 23-02-02176-C Amount of Each Disbursement this Period 1500.00
City Cape May Court Hou	State NJ	Zip Code 08210
Purpose of Disbursement Contribution		Category/ Type
Candidate Name Van Drew, Jeff, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 02		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Mikie Sherrill for Congress		Date of Disbursement MM / DD / YYYY 11 / 13 / 2019
Mailing Address PO Box 43032		FEC Identification Number C C00640003 Transaction ID : 23-02-02177- Amount of Each Disbursement this Period 1500.00
City Montclair	State NJ	Zip Code 07043
Purpose of Disbursement Contribution		Category/ Type
Candidate Name Sherill, Rebecca, Michelle, ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 11		<input type="checkbox"/> Memo Item

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

11750.00

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

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

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

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NAME OF COMMITTEE (In Full)
SHORE PAC

Full Name (Last, First, Middle Initial)
A. Angie Craig for Congress

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	3			2	0	1	9		

Mailing Address PO Box 22116

FEC Identification Number

C C00575209

Transaction ID : 23-02-02175-4
Amount of Each Disbursement this Period

1500.00

Memo Item

City Eagan State MN Zip Code 55122

Purpose of Disbursement Contribution

Category/Type

Candidate Name
Craig, Angela, , ,

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

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)
B. Casten for Congress

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	5			2	0	1	9		

Mailing Address 928 Warren Avenue

FEC Identification Number

C C00648493

Transaction ID : 23-02-02173-0
Amount of Each Disbursement this Period

1500.00

Memo Item

City Downers Grove State IL Zip Code 60515

Purpose of Disbursement Contribution

Category/Type

Candidate Name
Casten, Sean, , ,

Office Sought: House Senate President
State: IL District: 06

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)
C. Nevadans for Steven Horsford

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	3			2	0	1	9		

Mailing Address PO Box 336664

FEC Identification Number

C C00668228

Transaction ID : 23-02-02178-
Amount of Each Disbursement this Period

1500.00

Memo Item

City North Las Vegas State NV Zip Code 89033

Purpose of Disbursement Contribution

Category/Type

Candidate Name
Horsford, Steven, , ,

Office Sought: House Senate President
State: NV District: 04

Disbursement For: 2020
 Primary General
 Other (specify) ▼

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

4500.00

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

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

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

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NAME OF COMMITTEE (In Full)
SHORE PAC

Full Name (Last, First, Middle Initial) A. Sharice for Congress		Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 13 / 2019	
Mailing Address 13851 West 63rd Street			
City Shawnee	State KS	Zip Code 66216	
Purpose of Disbursement Contribution		FEC Identification Number C 00670034 Transaction ID : 23-02-02174-I Amount of Each Disbursement this Period 1500.00	
Candidate Name Dauids, Sharice, , ,		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KS District: 03	<input type="checkbox"/> Memo Item		

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	17750.00