



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**The Niki Tsongas Committee**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	279278.45
(b) Total Contribution Refunds (from Line 20(d)) .....	2700.00	225550.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 2700.00	53728.45
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	18457.17	292893.56
(b) Total Offsets to Operating Expenditures (from Line 14).....	172.00	805.58
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	18285.17	292087.98
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	174923.53	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

The Niki Tsongas Committee

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	152151.00
(ii) Unitemized .....	0.00	32627.45
(iii) TOTAL of contributions from individuals ▶	0.00	184778.45
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	94500.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	279278.45
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	55225.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	172.00	805.58
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	172.00	335309.03

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 20

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	18457.17	292893.56
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	2700.00	195050.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	30500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2700.00	225550.00
21. OTHER DISBURSEMENTS .....	33250.00	147900.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	54407.17	666343.56

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	229158.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	172.00
25. SUBTOTAL (add Line 23 and Line 24).....	229330.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	54407.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	174923.53



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Apple</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2018
Mailing Address 99 Rockingham Park Blvd Ste W143A		FEC Identification Number C
City Salem	State NH	Zip Code 03079-2900
Purpose of Disbursement Cell Phone		Amount of Each Disbursement this Period 1237.95
Candidate Name		Transaction ID : VNTPA9X6WB9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Arbella Mutual Insurance Co</b>		Date of Disbursement MM / DD / YYYY 04 / 02 / 2018
Mailing Address 1100 Crown Colony Dr P.O. Box 699103		FEC Identification Number C
City Quincy	State MA	Zip Code 02169-0957
Purpose of Disbursement Car Insurance		Amount of Each Disbursement this Period 105.00
Candidate Name		Transaction ID : VNTPA9X6WC7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Arbella Mutual Insurance Co</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2018
Mailing Address 1100 Crown Colony Dr P.O. Box 699103		FEC Identification Number C
City Quincy	State MA	Zip Code 02169-0957
Purpose of Disbursement Car Insurance		Amount of Each Disbursement this Period 105.00
Candidate Name		Transaction ID : VNTPA9X6WD5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1447.95
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Arbella Mutual Insurance Co</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2018		
Mailing Address 1100 Crown Colony Dr P.O. Box 699103			FEC Identification Number <b>C</b>		
City Quincy	State MA	Zip Code 02169-0957	Amount of Each Disbursement this Period 105.00		
Purpose of Disbursement Car Insurance		Category/ Type	Transaction ID : VNTPA9X6WE3		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. First National Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018		
Mailing Address PO Box 2818			FEC Identification Number <b>C</b>		
City Omaha	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 1082.12		
Purpose of Disbursement Credit Card		Category/ Type	Transaction ID : VNTPA9X6X88		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. A Value Self Storage Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018		
Mailing Address 20 Duren Ave			FEC Identification Number <b>C</b>		
City Lowell	State MA	Zip Code 01851-1615	Amount of Each Disbursement this Period 179.00		
Purpose of Disbursement Space Rent		Category/ Type	Transaction ID : VNTPA9X6XB2		
Candidate Name			<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1187.12
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Hyatt Regency Chesapeake</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018		
Mailing Address 100 Heron Blvd			FEC Identification Number C		
City Cambridge	State MD	Zip Code 21613-3420	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement Room Rent		Category/ Type	Transaction ID : VNTPA9X6X96		
Candidate Name		<input checked="" type="checkbox"/> Memo Item *			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Junk King</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018		
Mailing Address 216 Tyngsboro Rd			FEC Identification Number C		
City North Chelmsford	State MA	Zip Code 01863-1107	Amount of Each Disbursement this Period 438.00		
Purpose of Disbursement Disposal		Category/ Type	Transaction ID : VNTPA9X6XD8		
Candidate Name		<input checked="" type="checkbox"/> Memo Item *			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. UberConference</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018		
Mailing Address 100 California St			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94111-4505	Amount of Each Disbursement this Period 17.10		
Purpose of Disbursement Phone		Category/ Type	Transaction ID : VNTPA9X6XE6		
Candidate Name		<input checked="" type="checkbox"/> Memo Item *			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018
Mailing Address PO Box 9622 800-922-0204		FEC Identification Number C
City Mission Hills	State CA	Zip Code 91346-9622
Purpose of Disbursement Cell Phone	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 118.34	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNTPA9X6XC0 <input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. First National Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018
Mailing Address PO Box 2818		FEC Identification Number C
City Omaha	State NE	Zip Code 68103-2818
Purpose of Disbursement Credit Card	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 231.07	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNTPA9X6XF4 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Adobe Systems, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018
Mailing Address 345 Park Ave		FEC Identification Number C
City San Jose	State CA	Zip Code 95110-2704
Purpose of Disbursement Subscription	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 79.68	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNTPA9X6XG2 <input checked="" type="checkbox"/> Memo Item *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	231.07
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. UberConference</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018	
Mailing Address 100 California St			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94111-4505	Amount of Each Disbursement this Period 17.05	
Purpose of Disbursement Phone		Category/ Type	Transaction ID : VNTPA9X6XM3	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018	
Mailing Address PO Box 9622 800-922-0204			FEC Identification Number C	
City Mission Hills	State CA	Zip Code 91346-9622	Amount of Each Disbursement this Period 118.34	
Purpose of Disbursement Cell Phone		Category/ Type	Transaction ID : VNTPA9X6XK5	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. First National Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2018	
Mailing Address PO Box 2818			FEC Identification Number C	
City Omaha	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 198.86	
Purpose of Disbursement Credit Card		Category/ Type	Transaction ID : VNTPA9X6XN1	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	198.86
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Adobe Systems, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2018	
Mailing Address 345 Park Ave			FEC Identification Number C	
City San Jose	State CA	Zip Code 95110-2704	Amount of Each Disbursement this Period 84.46	
Purpose of Disbursement Subscription		Category/ Type	Transaction ID : VNTPA9X6XP9	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. UberConference</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2018	
Mailing Address 100 California St			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94111-4505	Amount of Each Disbursement this Period 17.05	
Purpose of Disbursement Phone		Category/ Type	Transaction ID : VNTPA9X6XR5	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2018	
Mailing Address PO Box 9622 800-922-0204			FEC Identification Number C	
City Mission Hills	State CA	Zip Code 91346-9622	Amount of Each Disbursement this Period 118.25	
Purpose of Disbursement Cell Phone		Category/ Type	Transaction ID : VNTPA9X6XQ7	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2018
Mailing Address 9009 Carothers Pkwy Ste 101		FEC Identification Number C
City Franklin	State TN	Zip Code 37067-1703
Purpose of Disbursement Car Lease		Amount of Each Disbursement this Period 319.15
Candidate Name		Transaction ID : VNTPA9X6WR2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2018
Mailing Address 9009 Carothers Pkwy Ste 101		FEC Identification Number C
City Franklin	State TN	Zip Code 37067-1703
Purpose of Disbursement Car Lease		Amount of Each Disbursement this Period 319.15
Candidate Name		Transaction ID : VNTPA9X6WS0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2018
Mailing Address 9009 Carothers Pkwy Ste 101		FEC Identification Number C
City Franklin	State TN	Zip Code 37067-1703
Purpose of Disbursement Car Lease		Amount of Each Disbursement this Period 319.15
Candidate Name		Transaction ID : VNTPA9X6WT8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	957.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Porter, Victoria, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2018	
Mailing Address 199 Sylvan St			FEC Identification Number C	
City Malden	State MA	Zip Code 02148-1747	Amount of Each Disbursement this Period 355.00	
Purpose of Disbursement Media prep		Category/ Type	Transaction ID : VNTPA9X6X63	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Porter, Victoria, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2018	
Mailing Address 199 Sylvan St			FEC Identification Number C	
City Malden	State MA	Zip Code 02148-1747	Amount of Each Disbursement this Period 354.00	
Purpose of Disbursement Media prep		Category/ Type	Transaction ID : VNTPA9X6X70	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Shred It USA</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2018	
Mailing Address 28883 Network PI			FEC Identification Number C	
City Chicago	State IL	Zip Code 60673-1288	Amount of Each Disbursement this Period 247.50	
Purpose of Disbursement Paper Shred and Recycle		Category/ Type	Transaction ID : VNTPA9X6X13	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	956.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Tufts Health Plan</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2018
Mailing Address PO Box 9224		FEC Identification Number C
City Chelsea	State MA	Zip Code 02150-9224
Purpose of Disbursement Health Insurance		Amount of Each Disbursement this Period 639.19
Candidate Name	Category/ Type	Transaction ID : VNTPA9X6X39
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Tufts Health Plan</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2018
Mailing Address PO Box 9224		FEC Identification Number C
City Chelsea	State MA	Zip Code 02150-9224
Purpose of Disbursement Health Insurance		Amount of Each Disbursement this Period 639.19
Candidate Name	Category/ Type	Transaction ID : VNTPA9X6X47
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Wong, Mary, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2018
Mailing Address 122 Stedman St		FEC Identification Number C
City Brookline	State MA	Zip Code 02446-6069
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 8000.00
Candidate Name	Category/ Type	Transaction ID : VNTPA9X6WY9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9278.38
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Wong, Mary, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2018	
Mailing Address 122 Stedman St			FEC Identification Number C	
City Brookline	State MA	Zip Code 02446-6069	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Payroll		Candidate Name	Transaction ID : VNTPA9X6WW4	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Wong, Mary, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2018	
Mailing Address 122 Stedman St			FEC Identification Number C	
City Brookline	State MA	Zip Code 02446-6069	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Payroll		Candidate Name	Transaction ID : VNTPA9X6WX1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State:	District:			

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	18257.33

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 20			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Zakim, Joyce, Wolf, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018		
Mailing Address 37 Westbourne Rd			FEC Identification Number C		
City Newton Center	State MA	Zip Code 02459-1617	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund		Category/ Type	Transaction ID : VNTPA9X6WV6		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		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:					

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2700.00

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

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

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Brush Art Gallery &amp; Studios</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018
Mailing Address 256 Market St		FEC Identification Number C
City Lowell	State MA	Zip Code 01852-1877
Purpose of Disbursement Donation		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : VNTPA9X6WF1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Community Teamwork</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2018
Mailing Address 155 Merrimack St		FEC Identification Number C
City Lowell	State MA	Zip Code 01852-1723
Purpose of Disbursement Donation		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : VNTPA9X6WK2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2018
Mailing Address 430 S Capitol St SE FI 2		FEC Identification Number C C00000935
City Washington	State DC	Zip Code 20003-4024
Purpose of Disbursement Unlimited Transfer		Amount of Each Disbursement this Period 7500.00
Candidate Name <b>Democratic Congressional Campaign Committee</b>		Transaction ID : VNTPA9X6WMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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)  
**The Niki Tsongas Committee**

**A. Democratic Congressional Campaign Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement Unlimited Transfer

Candidate Name **Democratic Congressional Campaign Committee** Category/Type

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2018

FEC Identification Number: **C** C00000935

Amount of Each Disbursement this Period: 7500.00

Transaction ID : VNTPA9X6WN8

Memo Item

**B. Democratic Congressional Campaign Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement Unlimited Transfer

Candidate Name **Democratic Congressional Campaign Committee** Category/Type

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2018

FEC Identification Number: **C** C00000935

Amount of Each Disbursement this Period: 7500.00

Transaction ID : VNTPA9X6WP6

Memo Item

**C. ELIZABETH FOR MA INC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 290568

City Boston State MA Zip Code 02129-0210

Purpose of Disbursement Donation

Candidate Name **WARREN, ELIZABETH, , ,** Category/Type

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MA District: 00

Date of Disbursement: 05 / 18 / 2018

FEC Identification Number: **C** C00500843

Amount of Each Disbursement this Period: 4000.00

Transaction ID : VNTPA9X6WQ4

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 19000.00

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

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

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

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)  
**The Niki Tsongas Committee**

Full Name (Last, First, Middle Initial) <b>A. Merrimack Repretory Theater</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2018	
Mailing Address 132 Warren St			FEC Identification Number C	
City Lowell	State MA	Zip Code 01852-2208	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Donation		Category/ Type	Transaction ID : VNTPA9X6WZ7	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Middlesex Community College</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2018	
Mailing Address 33 Kearney Sq			FEC Identification Number C	
City Lowell	State MA	Zip Code 01852-1901	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Donation		Category/ Type	Transaction ID : VNTPA9X6X05	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. SINEMA FOR ARIZONA</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2018	
Mailing Address PO Box 7586			FEC Identification Number C C00508804	
City Phoenix	State AZ	Zip Code 85011-7586	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Donation		Category/ Type	Transaction ID : VNTPA9X6X21	
Candidate Name <b>SINEMA, KYRSTEN, , ,</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: AZ	District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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)  
**The Niki Tsongas Committee**

**A. Veterans of Foreign Wars**

Full Name (Last, First, Middle Initial)

Mailing Address 24 Beacon St  
State House 546-1

City Boston State MA Zip Code 02133

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement: 04 / 24 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 750.00

Transaction ID : VNTPA9X6X55

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	33250.00