

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.
4 MA PAC

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 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 / / through / /

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 David N Martin

Signature of Treasurer David N Martin [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

4 MA 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="2014"/>	<input type="text" value="11094.96"/>	<input type="text" value="11094.96"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="18007.66"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="22850.00"/>	<input type="text" value="46350.00"/>
(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="40857.66"/>	<input type="text" value="57444.96"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20930.08"/>	<input type="text" value="37517.38"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="19927.58"/>	<input type="text" value="19927.58"/>
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

4 MA 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).....	22850.00	41350.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	22850.00	41350.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	22850.00	46350.00
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))..... ▶	22850.00	46350.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	22850.00	46350.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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	730.08	2317.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	730.08	2317.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20200.00	35200.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	20930.08	37517.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20930.08	37517.38

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	22850.00	46350.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22850.00	46350.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	730.08	2317.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	730.08	2317.38

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

to correct inadvertently omitted contributions and correct fees expense.

Form/Schedule:
Transaction ID:

**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 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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)
4 MA PAC

A. Daniele Baierlein
Full Name (Last, First, Middle Initial)

Mailing Address 1401 17th St NW
Apt 708

City Washington State DC Zip Code 20036-6419

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

Name of Employer Podesta Group Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 / 27 / 2014
Transaction ID : **VNHWQCRZHE4**

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

B. ACTBLUE
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12850.00

Date of Receipt
06 / 27 / 2014
Transaction ID : **VNHWQCRZHE4**

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

Mailing Address 30 W Oak St
Apt 3A

City Chicago State IL Zip Code 60610-8715

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

Name of Employer self Occupation attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt
06 / 30 / 2014
Transaction ID : **VNHWQCRZHJ6**

Amount of Each Receipt this Period
2600.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ▶ 2850.00

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 8 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
4 MA PAC

A. ACTBLUE
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12850.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : VNHWQCRZHJ6E

Amount of Each Receipt this Period
2600.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Brendan Carroll
Full Name (Last, First, Middle Initial)
Mailing Address 670 Sheridan Rd

City Glencoe	State IL	Zip Code 60022-1763
-----------------	-------------	------------------------

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

Name of Employer Victory Park Capital	Occupation Partner and Co-Founder
------------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2014

Transaction ID : VNHWQCQPKM4

Amount of Each Receipt this Period
5000.00

C. Patrick Edward Croke
Full Name (Last, First, Middle Initial)
Mailing Address 1701 N North Park Ave
Apt 2

City Chicago	State IL	Zip Code 60614-5757
-----------------	-------------	------------------------

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

Name of Employer Sidley Austin LLP	Occupation Attorney
---------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : VNHWQCRZHD6

Amount of Each Receipt this Period
2500.00

* Earmarked Contribution: See Below

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 26
<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)
4 MA PAC

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Receipt MM / DD / YYYY 06 / 16 / 2014
Mailing Address PO Box 441146		Transaction ID : VNHWQCRZHD6E
City West Somerville	State MA	Zip Code 02144-0031
FEC ID number of contributing federal political committee. C C00401224		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	[MEMO ITEM] Note: Above Contribution earmarked through this organization.
Conduit total listed in Agg. field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12850.00	

Full Name (Last, First, Middle Initial) B. Patrick Edward Croke		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address 1701 N North Park Ave Apt 2		Transaction ID : VNHWQD1S8M5
City Chicago	State IL	Zip Code 60614-5757
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Sidley Austin LLP	Occupation Attorney	* Earmarked Contribution: See Below
Conduit total listed in Agg. field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. ACTBLUE		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address PO Box 441146		Transaction ID : VNHWQD1S8M5E
City West Somerville	State MA	Zip Code 02144-0031
FEC ID number of contributing federal political committee. C C00401224		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	[MEMO ITEM] Note: Above Contribution earmarked through this organization.
Conduit total listed in Agg. field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12850.00	

SUBTOTAL of Receipts This Page (optional).....	2500.00
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 10 OF 26
	<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)
4 MA PAC

A. Donald G Drapkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 450 Park Ave
 Ste 1403
 City New York State NY Zip Code 10022-2699
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Casablanca Capital Occupation Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2014
Transaction ID : VNHWQCNG5M2
 Amount of Each Receipt this Period
 5000.00

B. Lea Fisher
 Full Name (Last, First, Middle Initial)
 Mailing Address 628 I St SE
 City Washington State DC Zip Code 20003-2725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PhRMA Occupation Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : VNHWQCRZHF2
 Amount of Each Receipt this Period
 2000.00
 * Earmarked Contribution: See Below

C. ACTBLUE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : VNHWQCRZHF2E
 Amount of Each Receipt this Period
 2000.00
[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
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 11 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
4 MA PAC

Full Name (Last, First, Middle Initial)
A. Avinash Kaza

Mailing Address 23 E 10th St
Apt 209

City New York State NY Zip Code 10003-6115

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

Name of Employer Bank of America Merrill Lynch Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
06 / 30 / 2014
Transaction ID : VNHWQD1S8S4

Amount of Each Receipt this Period
2500.00

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)
B. ACTBLUE

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12850.00

Date of Receipt
06 / 30 / 2014
Transaction ID : VNHWQD1S8S4E

Amount of Each Receipt this Period
2500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)
c. Matthew Sulkala

Mailing Address 628 I St SE

City Washington State DC Zip Code 20003-2725

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

Name of Employer Occupation
PhRMA Deputy Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
06 / 30 / 2014
Transaction ID : VNHWQCRZHG0

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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 12 OF 26
(check only one)

<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)
4 MA PAC

A. ACTBLUE
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 441146
City West Somerville State MA Zip Code 02144-0031
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation Conduit total listed in Agg. field
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 12850.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2014
Transaction ID : VNHWQCRZHG0E
Amount of Each Receipt this Period
500.00
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	22850.00

**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"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement
Credit card processing fee

Candidate Name
ACTBLUE

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
06 / 30 / 2014

Transaction ID : VNGXF9SCA76

Amount of Each Disbursement this Period
296.25

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement
Credit card processing fee

Candidate Name
ACTBLUE

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
06 / 30 / 2014

Transaction ID : VNGXF9SJK A5

Amount of Each Disbursement this Period
197.50

Full Name (Last, First, Middle Initial)

C. Citizens Bank

Mailing Address PO Box 7000
ROP-450

City Providence State RI Zip Code 02940-7000

Purpose of Disbursement
Bank service charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
06 / 30 / 2014

Transaction ID : VNGXF9SJKE6

Amount of Each Disbursement this Period
25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶ 518.75

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"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial)

A. Citizens Bank

Mailing Address PO Box 7000
ROP-450

City Providence State RI Zip Code 02940-7000

Purpose of Disbursement
Fees expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : VNGXF9T25Y9

Amount of Each Disbursement this Period

211.33

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

211.33

730.08

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial)

A. Aimee Belgard for Congress

Mailing Address PO Box 35

City Willingboro State NJ Zip Code 08046-0035

Purpose of Disbursement
Candidate contribution

Candidate Name
Aimee Belgard

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	1	4

Transaction ID : VNGXF9SCAC4

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Alison for Kentucky

Mailing Address 340 Democrat Dr

City Frankfort State KY Zip Code 40601-8209

Purpose of Disbursement
Candidate contribution

Candidate Name
Alison Lundergan Grimes

Office Sought: House Senate President
State: KY District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	4

Transaction ID : VNGXF9SCAE9

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. ANDRE CARSON FOR CONGRESS

Mailing Address PO Box 1863

City Indianapolis State IN Zip Code 46206-1863

Purpose of Disbursement
Candidate contribution

Candidate Name
ANDRE CARSON

Office Sought: House Senate President
State: IN District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	4

Transaction ID : VNGXF9SCAD1

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1	5	0	0	0	0	0	0	0	0
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5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial)

A. Appel for Iowa, Inc

Mailing Address PO Box 702

City Des Moines State IA Zip Code 50303-0702

Purpose of Disbursement
Candidate contribution

Candidate Name
Staci Appel

Office Sought: House
 Senate
 President
State: IA District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	1	4

Transaction ID : VNGXF9SCAF7

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. BEATTY FOR CONGRESS

Mailing Address PO Box 172

City Columbus State OH Zip Code 43216-0172

Purpose of Disbursement
Candidate contribution

Candidate Name
JOYCE BEATTY

Office Sought: House
 Senate
 President
State: OH District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	4

Transaction ID : VNGXF9SCAH3

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. BERA FOR CONGRESS

Mailing Address PO Box 582496

City Elk Grove State CA Zip Code 95758-0042

Purpose of Disbursement
Candidate contribution

Candidate Name
AMERISH BERA

Office Sought: House
 Senate
 President
State: CA District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	4

Transaction ID : VNGXF9SCAJ1

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1	5	0	0	0	0	0	0	0	0
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5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial)

A. BRALEY FOR CONGRESS

Mailing Address PO Box 390

City Waterloo State IA Zip Code 50704-0390

Purpose of Disbursement
Candidate contribution

Candidate Name
BRUCE L BRALEY

Office Sought: House
 Senate
 President
State: IA District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

Transaction ID : VNGXF9SCAG5

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. BUTTERFIELD FOR CONGRESS

Mailing Address PO Box 2571

City Wilson State NC Zip Code 27894-2571

Purpose of Disbursement
Candidate contribution

Candidate Name
G. K. BUTTERFIELD

Office Sought: House
 Senate
 President
State: NC District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

Transaction ID : VNGXF9SCAK9

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address PO Box 453

City Rochester State NH Zip Code 03866-0453

Purpose of Disbursement
Candidate contribution

Candidate Name
CAROL SHEA-PORTER

Office Sought: House
 Senate
 President
State: NH District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

Transaction ID : VNGXF9SCAM7

Amount of Each Disbursement this Period

500.00

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

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

1500.00

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**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Boyle

Mailing Address PO Box 11545

City Philadelphia State PA Zip Code 19116-0545

Purpose of Disbursement
Candidate contribution

Candidate Name
Brendan F Boyle

Office Sought: House
 Senate
 President
State: PA District: 13

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	1	4

Transaction ID : VNGXF9SCAN5

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. Citizens for Boyle

Mailing Address PO Box 11545

City Philadelphia State PA Zip Code 19116-0545

Purpose of Disbursement
Candidate contribution

Candidate Name
Brendan F Boyle

Office Sought: House
 Senate
 President
State: PA District: 13

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	4

Transaction ID : VNGXF9SCAQ0

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

C. CITIZENS FOR RUSH

Mailing Address PO Box 7292

City Chicago State IL Zip Code 60680-7292

Purpose of Disbursement
Candidate contribution

Candidate Name
BOBBY L RUSH

Office Sought: House
 Senate
 President
State: IL District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	4

Transaction ID : VNGXF9SCAP3

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1	5	0	0	0	0	0	0	0	0
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5	0	0	0	0	0	0	0	0	0
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**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial)

A. CLARKE FOR CONGRESS

Mailing Address 111-36 200TH. STREET

City Hollis State NY Zip Code 11412

Purpose of Disbursement
Candidate contribution

Candidate Name
YVETTE D CLARKE

Office Sought: House
 Senate
 President
State: NY District: 09

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

Transaction ID : VNGXF9SCAR8

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. DR. RAUL RUIZ FOR CONGRESS

Mailing Address PO Box 6116

City La Quinta State CA Zip Code 92248-6116

Purpose of Disbursement
Candidate contribution

Candidate Name
RAUL DR. RUIZ

Office Sought: House
 Senate
 President
State: CA District: 36

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	23	/	2014

Transaction ID : VNGXF9SCAS6

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Enyart for Congress

Mailing Address PO Box 308

City Belleville State IL Zip Code 62222-0309

Purpose of Disbursement
Candidate contribution

Candidate Name
William J Enyart Jr

Office Sought: House
 Senate
 President
State: IL District: 12

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

Transaction ID : VNGXF9SCAT4

Amount of Each Disbursement this Period

500.00

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

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

1500.00

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**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial) A. FRIENDS OF CHERI BUSTOS		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address PO Box 77		Transaction ID : VNGXF9SCAV2 Amount of Each Disbursement this Period 500.00
City East Moline	State IL	
Zip Code 61244-0077	Category/ Type	
Purpose of Disbursement Candidate contribution		
Candidate Name CHERI BUSTOS	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: IL District: 17	

Full Name (Last, First, Middle Initial) B. Friends of Don Beyer		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 1751 Potomac Greens Dr		Transaction ID : VNGXF9SCAX8 Amount of Each Disbursement this Period 500.00
City Alexandria	State VA	
Zip Code 22314-6233	Category/ Type	
Purpose of Disbursement Candidate contribution		
Candidate Name Don Beyer	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: VA District: 08	

Full Name (Last, First, Middle Initial) C. Friends of Renteria		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address PO Box 655		Transaction ID : VNGXF9SCAW0 Amount of Each Disbursement this Period 500.00
City Sanger	State CA	
Zip Code 93657-0655	Category/ Type	
Purpose of Disbursement Candidate contribution		
Candidate Name Amanda Renteria	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: CA District: 21	

SUBTOTAL of Disbursements This Page (optional).....▶	1500.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial)

A. JOHN TIERNEY FOR CONGRESS

Mailing Address 9 Main St
Ste 4

City Peabody State MA Zip Code 01960-5558

Purpose of Disbursement
Candidate contribution

Candidate Name
JOHN F TIERNEY

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

Transaction ID : VNGXF9SCAY6

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

B. JULIA BROWNLEY FOR CONGRESS

Mailing Address PO Box 2018

City Thousand Oaks State CA Zip Code 91358-2018

Purpose of Disbursement
Candidate contribution

Candidate Name
JULIA BROWNLEY

Office Sought: House
 Senate
 President
State: CA District: 26

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	23	/	2014

Transaction ID : VNGXF9SCAZ4

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Katherine Clark for Congress

Mailing Address PO Box 361

City Malden State MA Zip Code 02148-0004

Purpose of Disbursement
Candidate contribution

Candidate Name
Katherine Clark

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

Transaction ID : VNGXF9SCB02

Amount of Each Disbursement this Period

1000.00

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

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

2700.00

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**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial)

A. Kathleen Rice for Congress

Mailing Address 410 Jericho Tpke
Ste 200

City Jericho State NY Zip Code 11753-1318

Purpose of Disbursement
Candidate contribution

Candidate Name
Kathleen Rice

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	02	/	2014

Transaction ID : VNGXF9SCB19

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR ARIZONA

Mailing Address PO Box 12011

City Casa Grande State AZ Zip Code 85130-0549

Purpose of Disbursement
Candidate contribution

Candidate Name
ANN KIRKPATRICK

Office Sought: House
 Senate
 President
State: AZ District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

Transaction ID : VNGXF9SCB27

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. KUSTER FOR CONGRESS, INC.

Mailing Address PO Box 1498

City Concord State NH Zip Code 03302-1498

Purpose of Disbursement
Candidate contribution

Candidate Name
ANN MCLANE KUSTER

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

Transaction ID : VNGXF9SCB35

Amount of Each Disbursement this Period

1000.00

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

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

2000.00

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**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial)

A. KYRSTEN SINEMA FOR CONGRESS

Mailing Address PO Box 25879

City State Zip Code
Tempe AZ 85285-5879

Purpose of Disbursement
Candidate contribution

Candidate Name
KYRSTEN SINEMA

Office Sought: House
 Senate
 President
State: AZ District: 09

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

Transaction ID : VNGXF9SCB43

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Lara for New Mexico

Mailing Address PO Box 2326

City State Zip Code
Carlsbad NM 88221-2326

Purpose of Disbursement
Candidate contribution

Candidate Name
Roxanne Lara

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	02	/	2014

Transaction ID : VNGXF9SCB51

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. MARCIA FUDGE FOR CONGRESS

Mailing Address 3729 Silsby Rd

City State Zip Code
University Heights OH 44118-3647

Purpose of Disbursement
Candidate contribution

Candidate Name
MARCIA L FUDGE

Office Sought: House
 Senate
 President
State: OH District: 11

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

Transaction ID : VNGXF9SCB69

Amount of Each Disbursement this Period

500.00

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

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

1500.00

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**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial)

A. PETERS FOR CONGRESS

Mailing Address PO Box 226

City Bloomfield Hills State MI Zip Code 48303-0226

Purpose of Disbursement
Candidate contribution

Candidate Name
GARY PETERS

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MI District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		24		2014

Transaction ID : VNGXF9SCB77

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. PETERSON FOR CONGRESS

Mailing Address 26192 Floyd Lake Point Rd

City Detroit Lakes State MN Zip Code 56501-7607

Purpose of Disbursement
Candidate contribution

Candidate Name
COLLIN CLARK PETERSON

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MN District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		24		2014

Transaction ID : VNGXF9SCB85

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. PETERSON FOR CONGRESS

Mailing Address 26192 Floyd Lake Point Rd

City Detroit Lakes State MN Zip Code 56501-7607

Purpose of Disbursement
Candidate contribution

Candidate Name
COLLIN CLARK PETERSON

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MN District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2014

Transaction ID : VNGXF9SCB93

Amount of Each Disbursement this Period

500.00

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

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

1500.00

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**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial) A. ROMANOFF FOR COLORADO		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 191 University Blvd # 721		Transaction ID : VNGXF9SCBA1
City Denver State CO Zip Code 80206-4613	Amount of Each Disbursement this Period 0.00	
Purpose of Disbursement Candidate contribution	Category/Type	
Candidate Name ANDREW ROMANOFF		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO District: 00		

Full Name (Last, First, Middle Initial) B. SCHNEIDER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address PO Box 1318		Transaction ID : VNGXF9SCBB8
City Deerfield State IL Zip Code 60015-6005	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Candidate contribution	Category/Type	
Candidate Name BRADLEY SCOTT SCHNEIDER		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 10		

Full Name (Last, First, Middle Initial) C. SCOTT PETERS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 330 Encinitas Blvd Ste 101		Transaction ID : VNGXF9SCBC6
City Encinitas State CA Zip Code 92024-8705	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Candidate contribution	Category/Type	
Candidate Name SCOTT PETERS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 52		

SUBTOTAL of Disbursements This Page (optional).....▶	1500.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
4 MA PAC

Full Name (Last, First, Middle Initial)

A. SEAN ELDRIDGE FOR CONGRESS

Mailing Address PO Box 4113

City Kingston State NY Zip Code 12402-4113

Purpose of Disbursement
Candidate contribution

Candidate Name
SEAN ELDRIDGE

Office Sought: House Senate President
State: NY District: 19

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 14 / 2014

Transaction ID : VNGXF9SCBE2

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. THE NIKI TSONGAS COMMITTEE

Mailing Address PO Box 1454

City Lowell State MA Zip Code 01853-1454

Purpose of Disbursement
Candidate contribution

Candidate Name
NICOLA S TSONGAS

Office Sought: House Senate President
State: MA District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 17 / 2014

Transaction ID : VNGXF9SCBD4

Amount of Each Disbursement this Period

1000.00

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) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

2000.00

20200.00