

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

### Correct the Record

ADDRESS (number and street) 455 Massachusetts Ave NW Ste 660 Washington DC 20001

Check if different than previously reported. (ACC)

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

C C00578997

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)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 07 / 01 / 2015 through [MM] / [DD] / [YYYY] 12 / 31 / 2015

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 Elizabeth Cohen

Signature of Treasurer Elizabeth Cohen [Electronically Filed] Date 01 / 17 / 2016

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Correct the Record**

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="2015"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1101178.28"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2001474.59"/>	<input type="text" value="3436572.40"/>
(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="3102652.87"/>	<input type="text" value="3436572.40"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2770557.07"/>	<input type="text" value="3104476.60"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="332095.80"/>	<input type="text" value="332095.80"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="108845.00"/>	

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

**Correct the Record**

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).....	6000.00	6000.00
(ii) Unitemized .....	1111.00	1111.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7111.00	7111.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7111.00	7111.00
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).....	52.00	52.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1994311.59	3429409.40
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))..... ▶	2001474.59	3436572.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2001474.59	3436572.40

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	1932.11	1932.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1932.11	1932.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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 .....	2768624.96	3102544.49
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)) ..	2770557.07	3104476.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2770557.07	3104476.60

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7111.00	7111.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7111.00	7111.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1932.11	1932.11
37. Offsets to Operating Expenditures (from Line 15, page 3).....	52.00	52.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1880.11	1880.11

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

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

FOR LINE NUMBER: PAGE 6 OF 357  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)  
**A. Susie Tompkins Buell**

Mailing Address PO Box 29921

City State Zip Code  
 San Francisco CA 94129-0921

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

Name of Employer Occupation  
 Not Employed Retired

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  
 09 / 24 / 2015  
**Transaction ID : VR05ZE8A594**

Amount of Each Receipt this Period  
 5000.00

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

Mailing Address 1201 W 66th St

City State Zip Code  
 Kansas City MO 64113-1805

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

Name of Employer Occupation  
 James B. Nutter Company Mortgage Banker

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : VR05ZECYN86**

Amount of Each Receipt this Period  
 1000.00

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

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6000.00

**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 357
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Michael Kempner</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2015 <b>Transaction ID : VR05ZESNN00</b>
Mailing Address 1 Meadowlands Plz FI 6		Amount of Each Receipt this Period 25000.00
City East Rutherford	State NJ	Zip Code 07073-2150
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 50000.00	
Name of Employer Stone Marketing, LLC	Occupation President	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Christopher Albrecht</b>		Date of Receipt MM / DD / YYYY 07 / 23 / 2015 <b>Transaction ID : VR05ZE8A5Y0</b>
Mailing Address 21700 Oxnard St Ste 2030		Amount of Each Receipt this Period 25000.00
City Woodland Hills	State CA	Zip Code 91367-7545
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 25000.00	
Name of Employer Starz	Occupation Executive	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. American Bridge 21st Century</b>		Date of Receipt MM / DD / YYYY 11 / 25 / 2015 <b>Transaction ID : VR05ZEWNY21</b>
Mailing Address 455 Massachusetts Ave NW Ste 650		Amount of Each Receipt this Period 50000.00
City Washington	State DC	Zip Code 20001-2779
FEC ID number of contributing federal political committee. C C00492140	Aggregate Year-to-Date 57977.38	
Name of Employer	Occupation	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100000.00
<b>TOTAL</b> 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 357
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Michael Kempner</b>		Date of Receipt MM / DD / YYYY 11 / 02 / 2015 <b>Transaction ID : VR05ZESNN91</b>
Mailing Address 1 Meadowlands Plz FI 6		Amount of Each Receipt this Period 25000.00
City East Rutherford	State NJ	Zip Code 07073-2150
FEC ID number of contributing federal political committee. C	Non-Contribution Account	
Name of Employer Stone Marketing, LLC	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name (Last, First, Middle Initial) <b>B. Fayard Law Firm, LLC</b>		Date of Receipt MM / DD / YYYY 12 / 09 / 2015 <b>Transaction ID : VR05ZEJJEP1</b>
Mailing Address 1310 Arabella St		Amount of Each Receipt this Period 25000.00
City New Orleans	State LA	Zip Code 70115-4205
FEC ID number of contributing federal political committee. C	Non-Contribution Account	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

Full Name (Last, First, Middle Initial) <b>C. Fayard Law Firm, LLC</b>		Date of Receipt MM / DD / YYYY 10 / 14 / 2015 <b>Transaction ID : VR05ZE8A6Z1</b>
Mailing Address 1310 Arabella St		Amount of Each Receipt this Period 50000.00
City New Orleans	State LA	Zip Code 70115-4205
FEC ID number of contributing federal political committee. C	Non-Contribution Account	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100000.00
<b>TOTAL</b> 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 357
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

**A. ADP**  
Full Name (Last, First, Middle Initial)  
Mailing Address 504 Clinton Center Dr  
Ste 4400  
City Clinton State MS Zip Code 39056-5610  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
57815.64

Date of Receipt  
08 / 10 / 2015  
**Transaction ID : VR05ZE8A622**  
Amount of Each Receipt this Period  
54294.45  
Offset, Refunded Payroll: Non-Contribution Account

**B. Cynthia Friedman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 300 Seminole Ave  
Apt 2A  
City Palm Beach State FL Zip Code 33480-3779  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Not Employed Retired  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
09 / 25 / 2015  
**Transaction ID : VR05ZE8A6G2**  
Amount of Each Receipt this Period  
10000.00  
Non-Contribution Account

**C. James A. Attwood**  
Full Name (Last, First, Middle Initial)  
Mailing Address 591 Bridge St  
City Dedham State MA Zip Code 02026-4130  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
The Carlyle Group Managing Partner  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
10 / 09 / 2015  
**Transaction ID : VR05ZE8A6N2**  
Amount of Each Receipt this Period  
100000.00  
Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	164294.45
<b>TOTAL</b> 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 357
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. PH Trust</b>		Date of Receipt
Mailing Address 4 Embarcadero Ctr Ste 550		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2015"/>
City	State	Zip Code
San Francisco	CA	94111-5912
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="25000.00"/>	
		Transaction ID : <b>VR05ZEWNY13</b>
		Amount of Each Receipt this Period <input type="text" value="25000.00"/>
		Non-Contribution Account

Full Name (Last, First, Middle Initial) <b>B. Priorities USA Action</b>		Date of Receipt
Mailing Address 601 13th St NW Ste 610N		<input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>
City	State	Zip Code
Washington	DC	20005-3807
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> C00495861	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000000.00"/>	
		Transaction ID : <b>VR05ZERRY33</b>
		Amount of Each Receipt this Period <input type="text" value="1000000.00"/>
		Non-Contribution Account

Full Name (Last, First, Middle Initial) <b>C. Gary Barnett</b>		Date of Receipt
Mailing Address 11519 Mayfair Rd		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City	State	Zip Code
Richmond Hill	NY	11418-3481
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Extell Development Company	President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="100000.00"/>	
		Transaction ID : <b>VR05ZEB8663</b>
		Amount of Each Receipt this Period <input type="text" value="100000.00"/>
		Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1125000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 357
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

**A. Richard Eskind**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 104 Lynnwood Blvd  
 City Nashville State TN Zip Code 37205-2904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wells Fargo Advisors Occupation Financial Advisors  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2015  
**Transaction ID : VR05ZESNN83**  
 Amount of Each Receipt this Period  
 20000.00  
 Non-Contribution Account

**B. The Barnes Law Group, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 Atlanta St SE  
 City Marietta State GA Zip Code 30060-1977  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2015  
**Transaction ID : VR05ZEC5TN3**  
 Amount of Each Receipt this Period  
 10000.00  
 Non-Contribution Account

**C. Glen Fukushima**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1111 23rd St NW Apt 5A  
 City Washington State DC Zip Code 20037-3321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Center for American Progress Occupation Senior Fellow  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2015  
**Transaction ID : VR05ZEJJEN3**  
 Amount of Each Receipt this Period  
 50000.00  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80000.00
<b>TOTAL</b> 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 12 OF 357
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

**A. The Falconwood Corporation**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 Timber Trl  
 City State Zip Code  
 Rye NY 10580-1935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 10 / 2015  
**Transaction ID : VR05ZESNN34**  
 Amount of Each Receipt this Period  
 20000.00  
 Non-Contribution Account

**B. Timothy Gill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 919 University Blvd  
 City State Zip Code  
 Denver CO 80209-4734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Not Employed Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2015  
**Transaction ID : VR05ZE7GPS4**  
 Amount of Each Receipt this Period  
 125000.00  
 Non-Contribution Account

**C. ADP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 504 Clinton Center Dr  
 Ste 4400  
 City State Zip Code  
 Clinton MS 39056-5610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 57815.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2015  
**Transaction ID : VR05ZEW88A5**  
 Amount of Each Receipt this Period  
 20.65  
 Refunded Payroll Taxes: Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	145020.65
<b>TOTAL</b> 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 13 OF 357
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Shelly Porges</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 14 / 2015 <b>Transaction ID : VR05ZEJMXD5</b>
Mailing Address 1617 35th St NW		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20007-2316
FEC ID number of contributing federal political committee. <b>C</b>		Non-Contribution Account
Name of Employer Reservoir Q Global LLC	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Fayard Law Firm, LLC</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2015 <b>Transaction ID : VR05ZEJF16</b>
Mailing Address 1310 Arabella St		Amount of Each Receipt this Period 25000.00
City New Orleans	State LA	Zip Code 70115-4205
FEC ID number of contributing federal political committee. <b>C</b>		Non-Contribution Account
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2015 <b>Transaction ID : VR05ZESNN26</b>
Mailing Address 504 Clinton Center Dr Ste 4400		Amount of Each Receipt this Period 225.00
City Clinton	State MS	Zip Code 39056-5610
FEC ID number of contributing federal political committee. <b>C</b>		Offset, Refunded Payroll Fee: Non-Contribution Account
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 57815.64	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	26225.00
<b>TOTAL</b> 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 14 OF 357
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

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

Mailing Address 9171 Wilshire Blvd  
Ste 400

City Beverly Hills State CA Zip Code 90210-5516

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

Name of Employer Castle Rock Entertainment Occupation Producer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
12 / 04 / 2015  
**Transaction ID : VR05ZEMRP36**

Amount of Each Receipt this Period  
10000.00

Non-Contribution Account

**B. Dennis Mehiel**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 Renaissance Sq  
FI 5

City White Plains State NY Zip Code 10601-3056

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

Name of Employer Four M Investments, LLC Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
75000.00

Date of Receipt  
11 / 25 / 2015  
**Transaction ID : VR05ZEWNY46**

Amount of Each Receipt this Period  
25000.00

Non-Contribution Account

**C. Daniel Neidich**  
Full Name (Last, First, Middle Initial)

Mailing Address 299 W 12th St

City New York State NY Zip Code 10014-1801

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

Name of Employer Dune Real Estate Partners Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
10 / 05 / 2015  
**Transaction ID : VR05ZE8A6K6**

Amount of Each Receipt this Period  
10000.00

Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45000.00
<b>TOTAL</b> 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 15 OF 357
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

**A. ADP**  
Full Name (Last, First, Middle Initial)

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
57815.64

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2015  
**Transaction ID : VR05ZE8A717**

Amount of Each Receipt this Period  
225.81

Offset, Refunded Payroll Fee: Non-Contribution Account

**B. Dennis Mehiel**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 Renaissance Sq  
FI 5

City White Plains State NY Zip Code 10601-3056

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

Name of Employer Occupation  
Four M Investments, LLC Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
75000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2015  
**Transaction ID : VR05ZE8A697**

Amount of Each Receipt this Period  
25000.00

Non-Contribution Account

**C. James Kaplan**  
Full Name (Last, First, Middle Initial)

Mailing Address 2821 N Pine Grove Ave

City Chicago State IL Zip Code 60657-6109

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

Name of Employer Occupation  
Quarles & Brady, LLP Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 18 / 2015  
**Transaction ID : VR05ZESNNB7**

Amount of Each Receipt this Period  
500.00

Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25725.81
<b>TOTAL</b> 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 16 OF 357  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)  
**A. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
57815.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2015  
**Transaction ID : VR05ZE8A5H7**

Amount of Each Receipt this Period  
3049.73

Offset, Refunded Payroll: Non-Contribution Account

Full Name (Last, First, Middle Initial)  
**B. American Federation of Teachers**

Mailing Address 555 New Jersey Ave NW

City Washington State DC Zip Code 20001-2029

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2015  
**Transaction ID : VR05ZEN9638**

Amount of Each Receipt this Period  
50000.00

Non-Contribution Account

Full Name (Last, First, Middle Initial)  
**C. Debra Ann Efroymsen**

Mailing Address 605 3rd Ave

City New York State NY Zip Code 10158-0180

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

Name of Employer Occupation  
Health Bridge Regional Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : VR05ZEWNY38**

Amount of Each Receipt this Period  
20000.00

Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	73049.73
<b>TOTAL</b> 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 17 OF 357
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Hillary For America</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2015 <b>Transaction ID : VR05ZC1KM49</b>
Mailing Address 1 Pierrepont Plz Ste 1		Amount of Each Receipt this Period 6346.00
City Brooklyn	State NY	Zip Code 11201-2776
FEC ID number of contributing federal political committee. C C00575795		Payment for Research Services: Non-Contribution Account
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 281961.43	

Full Name (Last, First, Middle Initial) <b>B. Ann Lewis</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2015 <b>Transaction ID : VR05ZESNNA9</b>
Mailing Address 4550 N Park Ave Apt 708		Amount of Each Receipt this Period 250.00
City Chevy Chase	State MD	Zip Code 20815-7237
FEC ID number of contributing federal political committee. C		Non-Contribution Account
Name of Employer Not Employed	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. VOYA</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2015 <b>Transaction ID : VR05ZBY82H9</b>
Mailing Address PO Box 990063		Amount of Each Receipt this Period 3203.20
City Hartford	State CT	Zip Code 06199-0063
FEC ID number of contributing federal political committee. C		Offset, Refunded Retirement Contributions: Non-Contribution Account
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3203.20	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9799.20
<b>TOTAL</b> 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 18 OF 357  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

**A. Remzi Oten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4831 E Copa De Oro Dr  
 City Anaheim State CA Zip Code 92807-3636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Oten, Inc. Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : VR05ZES75P9**  
 Amount of Each Receipt this Period  
 100000.00  
 Non-Contribution Account

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1994114.84

**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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. National Urban League**

Mailing Address 204 W 136th St

City New York State NY Zip Code 10030-2602

Purpose of Disbursement  
Event Ticket: Contribution Account

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  
08 / 26 / 2015

Transaction ID : VQZ6QA4QQ21

Amount of Each Disbursement this Period

505.00

Full Name (Last, First, Middle Initial)

**B. Congressional Hispanic Caucus Institute**

Mailing Address 1128 16th St NW

City Washington State DC Zip Code 20036-4802

Purpose of Disbursement  
Event Ticket: Contribution Account

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  
09 / 29 / 2015

Transaction ID : VQZ6QA4SX21

Amount of Each Disbursement this Period

300.00

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) ▼

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)..... ▶

805.00

805.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

**Transaction ID : VQZ6QA1G700**

Amount of Each Disbursement this Period

20.95

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 28 / 2015

**Transaction ID : VQZ6QA1G734**

Amount of Each Disbursement this Period

8.93

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2015

**Transaction ID : VQZ6QA1G726**

Amount of Each Disbursement this Period

12.02

**[MEMO ITEM]**  
\*

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

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

20.95

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Reger Research, Inc.**

Mailing Address 5 Bankside Mews

City State Zip Code  
Henrico VA 23231-3072

Purpose of Disbursement  
Research Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : VQZ6QA4HR00

Amount of Each Disbursement this Period

12000.00

Full Name (Last, First, Middle Initial)

**B. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City State Zip Code  
Washington DC 20009-6540

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 03 / 2015

Transaction ID : VQZ6Q9YDZ00

Amount of Each Disbursement this Period

159.40

Full Name (Last, First, Middle Initial)

**C. Central Parking System**

Mailing Address 720 Olive St  
Ste 1650

City State Zip Code  
Saint Louis MO 63101-2329

Purpose of Disbursement  
Parking: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : VQZ6QA21X00

Amount of Each Disbursement this Period

540.00

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

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

12699.40

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2015

Transaction ID : VQZ6QA17810

Amount of Each Disbursement this Period

21194.90

Full Name (Last, First, Middle Initial)

**B. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2015

Transaction ID : VQZ6QA4WS00

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Email Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2015

Transaction ID : VQZ6QA4WQ30

Amount of Each Disbursement this Period

58.84

[MEMO ITEM]  
\*

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

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

21194.90

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Thinkstock, LLC**

Mailing Address 501 N College St

City Charlotte State NC Zip Code 28202-2213

Purpose of Disbursement  
Graphics Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : VQZ6QA4WSE0

Amount of Each Disbursement this Period

197.96

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : VQZ6QA4WZF0

Amount of Each Disbursement this Period

93.81

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 111 W Rio Salado Pkwy  
#

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : VQZ6QA4WWP0

Amount of Each Disbursement this Period

571.20

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Best Buy**

Mailing Address 3100 14th St NW

City Washington State DC Zip Code 20010-2415

Purpose of Disbursement  
Computer: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 10 / 2015

**Transaction ID : VQZ6QA4WNR0**

Amount of Each Disbursement this Period

2018.58

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109-5210

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 10 / 2015

**Transaction ID : VQZ6QA4WP61**

Amount of Each Disbursement this Period

284.82

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 10 / 2015

**Transaction ID : VQZ6QA4WTF1**

Amount of Each Disbursement this Period

33.52

[MEMO ITEM]

\*

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : VQZ6QA4WVN1

Amount of Each Disbursement this Period

7.07

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : VQZ6QA4WZR1

Amount of Each Disbursement this Period

75.99

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Modulus**

Mailing Address 1739 Elm St  
Ste 200B

City Cincinnati State OH Zip Code 45202-6965

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : VQZ6QA4WQT1

Amount of Each Disbursement this Period

148.60

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA4WT02

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA4WR82

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA4WVB2

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Apple**

Mailing Address 1 Infinite Loop

City State Zip Code  
Cupertino CA 95014-2083

Purpose of Disbursement  
Software: Non-Contribution Account

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
0	7		1	0		2	0	1	5

Transaction ID : VQZ6QA4WPF2

Amount of Each Disbursement this Period

3	9	.	9	9
---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City State Zip Code  
Dallas TX 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
0	7		1	0		2	0	1	5

Transaction ID : VQZ6QA4WQG2

Amount of Each Disbursement this Period

7	3	.	1	5	0
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. B&H**

Mailing Address 420 9th Ave

City State Zip Code  
New York NY 10001-1614

Purpose of Disbursement  
Equipment: Non-Contribution Account

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
0	7		1	0		2	0	1	5

Transaction ID : VQZ6QA4WPK3

Amount of Each Disbursement this Period

4	9	.	9	8
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[MEMO ITEM]

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Apple**

Mailing Address 1 Infinite Loop

City State Zip Code  
Cupertino CA 95014-2083

Purpose of Disbursement  
Computer: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 10 / 2015

Transaction ID : VQZ6QA4WPR3

Amount of Each Disbursement this Period

1872.84

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. B&H**

Mailing Address 420 9th Ave

City State Zip Code  
New York NY 10001-1614

Purpose of Disbursement  
Equipment: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 10 / 2015

Transaction ID : VQZ6QA4WP94

Amount of Each Disbursement this Period

352.53

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Network Solutions**

Mailing Address 12808 Gran Bay Pkwy W

City State Zip Code  
Jacksonville FL 32258-4468

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 10 / 2015

Transaction ID : VQZ6QA4WRC4

Amount of Each Disbursement this Period

877.00

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2015

Transaction ID : VQZ6QA4WPE4

Amount of Each Disbursement this Period

456.20

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Dell**

Mailing Address 2300 W Plano Pkwy

City Plano State TX Zip Code 75075-8427

Purpose of Disbursement  
Computer: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2015

Transaction ID : VQZ6QA4WQF4

Amount of Each Disbursement this Period

998.78

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2015

Transaction ID : VQZ6QA4WVF4

Amount of Each Disbursement this Period

87.59

[MEMO ITEM]

\*

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

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

0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Apple

Mailing Address 1 Infinite Loop

City State Zip Code  
Cupertino CA 95014-2083

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Transaction ID : VQZ6QA4WNV4

Amount of Each Disbursement this Period

4	9	.	9	9
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[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. LexisNexis

Mailing Address PO Box 72477090

City State Zip Code  
Philadelphia PA 19170-0001

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Transaction ID : VQZ6QA4WRY4

Amount of Each Disbursement this Period

6	3	2	.	0	1
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[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. Uber Technologies

Mailing Address 1455 Market St  
FI 4

City State Zip Code  
San Francisco CA 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Transaction ID : VQZ6QA4WX25

Amount of Each Disbursement this Period

5	.	9	1
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[MEMO ITEM]

\*

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

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

0	.	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Best Buy

Mailing Address 3100 14th St NW

City Washington State DC Zip Code 20010-2415

Purpose of Disbursement  
Computer: Non-Contribution Account

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
0	7		1	0		2	0	1	5

Transaction ID : VQZ6QA4WP45

Amount of Each Disbursement this Period

1	9	0	3	.	4	8
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[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. Comfort Inn VT

Mailing Address 5 Dorset St

City South Burlington State VT Zip Code 05403-6232

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
0	7		1	0		2	0	1	5

Transaction ID : VQZ6QA4WQA5

Amount of Each Disbursement this Period

4	8	0	7	.	0
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. Amazon

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109-5210

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

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
0	7		1	0		2	0	1	5

Transaction ID : VQZ6QA4WPJ5

Amount of Each Disbursement this Period

3	9	2	.	0	1
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[MEMO ITEM]

\*

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

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

0	0	0	0	.	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Uber Technologies

Mailing Address 1455 Market St  
FL 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	1	5		

Transaction ID : VQZ6QA4WXN5

Amount of Each Disbursement this Period

5	.	8	2
---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. B&H

Mailing Address 420 9th Ave

City New York State NY Zip Code 10001-1614

Purpose of Disbursement  
Equipment: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	1	5		

Transaction ID : VQZ6QA4WNZ5

Amount of Each Disbursement this Period

2	4	9	.	9	9
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. U.S. Airways

Mailing Address 111 W Rio Salado Pkwy  
#

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	1	5		

Transaction ID : VQZ6QA4WW06

Amount of Each Disbursement this Period

3	7	0	.	7	0
---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. WP Engine**

Mailing Address 504 Lavaca St  
Ste 1000

City Austin State TX Zip Code 78701-2857

Purpose of Disbursement  
Web Hosting Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	0		2	0	1	5		

Transaction ID : VQZ6QA4WVE6

Amount of Each Disbursement this Period

6	6	.	3	3
---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Vonage**

Mailing Address PO Box 392415

City Pittsburgh State PA Zip Code 15251-9415

Purpose of Disbursement  
Telephone: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	0		2	0	1	5		

Transaction ID : VQZ6QA4WTP6

Amount of Each Disbursement this Period

6	3	3	.	5	9
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Microsoft**

Mailing Address 205 108th Ave NE  
Ste 400

City Bellevue State WA Zip Code 98004-5770

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	0		2	0	1	5		

Transaction ID : VQZ6QA4WR17

Amount of Each Disbursement this Period

2	3	2	.	6	5
---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Apple**

Mailing Address 1 Infinite Loop

City State Zip Code  
Cupertino CA 95014-2083

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : VQZ6QA4WP37

Amount of Each Disbursement this Period

49.99

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City State Zip Code  
Atlanta GA 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : VQZ6QA4WQE7

Amount of Each Disbursement this Period

559.20

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City State Zip Code  
San Francisco CA 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : VQZ6QA4WTH7

Amount of Each Disbursement this Period

18.77

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
07 / 10 / 2015

Transaction ID : VQZ6QA4WRM7

Amount of Each Disbursement this Period

334.06

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
07 / 10 / 2015

Transaction ID : VQZ6QA4WPP7

Amount of Each Disbursement this Period

540.20

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Best Buy**

Mailing Address 3100 14th St NW

City Washington State DC Zip Code 20010-2415

Purpose of Disbursement  
Computer: Non-Contribution Account

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  
07 / 10 / 2015

Transaction ID : VQZ6QA4WNY7

Amount of Each Disbursement this Period

1903.48

[MEMO ITEM]

\*

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

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

0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Movement Ventures, Qzrz

Mailing Address 3180 18th St  
Ste 100

City San Francisco State CA Zip Code 94110-2042

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2015

Transaction ID : VQZ6QA4WT28

Amount of Each Disbursement this Period

49.00
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. Orbitz

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2015

Transaction ID : VQZ6QA4X038

Amount of Each Disbursement this Period

78.02
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. Apple

Mailing Address 1 Infinite Loop

City Cupertino State CA Zip Code 95014-2083

Purpose of Disbursement  
Computer: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2015

Transaction ID : VQZ6QA4WPZ8

Amount of Each Disbursement this Period

1842.17
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[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FL 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2015

Transaction ID : VQZ6QA4WWD9

Amount of Each Disbursement this Period

6.75
------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 111 W Rio Salado Pkwy  
#

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2015

Transaction ID : VQZ6QA4WTG9

Amount of Each Disbursement this Period

218.10
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2015

Transaction ID : VQZ6QA4WZM9

Amount of Each Disbursement this Period

67.49
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Apple**

Mailing Address 1 Infinite Loop

City State Zip Code  
Cupertino CA 95014-2083

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2015

Transaction ID : VQZ6QA4WSR9

Amount of Each Disbursement this Period

299.99
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Orbitz**

Mailing Address 500 W Madison St

City State Zip Code  
Chicago IL 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2015

Transaction ID : VQZ6QA4WYS9

Amount of Each Disbursement this Period

153.58
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 410 Terry Ave N

City State Zip Code  
Seattle WA 98109-5210

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2015

Transaction ID : VQZ6QA4WNX9

Amount of Each Disbursement this Period

11.07
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Allenswood Group**

Mailing Address 2001 N Kenilworth St

City Arlington State VA Zip Code 22205-3130

Purpose of Disbursement  
Video Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 13 / 2015

Transaction ID : VQZ6QA3Y050

Amount of Each Disbursement this Period

11500.00

Full Name (Last, First, Middle Initial)

**B. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 27 / 2015

Transaction ID : VQZ6QA21X50

Amount of Each Disbursement this Period

27.29

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 21 / 2015

Transaction ID : VQZ6QA21X68

Amount of Each Disbursement this Period

27.29

[MEMO ITEM]  
\*

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

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

11527.29

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2AS60**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Media Matters For America**

Mailing Address 455 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Rent: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4SX70**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Dewey Square Group**

Mailing Address PO Box 60340

City Charlotte State NC Zip Code 28260-0340

Purpose of Disbursement  
Video Consulting Fees & Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4HQ90**

Amount of Each Disbursement this Period

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Washington Metropolitan Area Transit Authority**

Mailing Address 600 5th St NW

City Washington State DC Zip Code 20001-2610

Purpose of Disbursement  
Travel: Non Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA4QTA0

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. American Bridge 21st Century**

Mailing Address 455 Massachusetts Ave NW  
Ste 650

City Washington State DC Zip Code 20001-2779

Purpose of Disbursement  
Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA668C0

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA12GD0

Amount of Each Disbursement this Period

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2015

Transaction ID : VQZ6QA4M9F0

Amount of Each Disbursement this Period

457.74

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : VQZ6QA4M9X1

Amount of Each Disbursement this Period

6.47

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 12 / 2015

Transaction ID : VQZ6QA4M9W3

Amount of Each Disbursement this Period

18.85

[MEMO ITEM]  
\*

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

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

457.74

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	07	/	2015

**Transaction ID : VQZ6QA4Q4G0**

Amount of Each Disbursement this Period

225.81
--------

Full Name (Last, First, Middle Initial)

**B. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	10	/	2015

**Transaction ID : VQZ6QA21WJ0**

Amount of Each Disbursement this Period

76.96
-------

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	27	/	2015

**Transaction ID : VQZ6QA21WP1**

Amount of Each Disbursement this Period

39.49
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**[MEMO ITEM]**

\*

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

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

302.77
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	27	/	2015

Transaction ID : VQZ6QA21WN3

Amount of Each Disbursement this Period

37.47
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. CQ Roll Call**

Mailing Address 77 K St NE  
FI 8

City Washington State DC Zip Code 20002-4681

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2015

Transaction ID : VQZ6QA1G7K0

Amount of Each Disbursement this Period

6477.19
---------

Full Name (Last, First, Middle Initial)

**C. Granholm Mulhern Associates**

Mailing Address 21 Chelsea Ct

City Oakland State CA Zip Code 94611-2416

Purpose of Disbursement  
Communications Consulting and Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	30	/	2015

Transaction ID : VQZ6QA4HRK0

Amount of Each Disbursement this Period

14902.53
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

21379.72
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 23 / 2015

Transaction ID : VQZ6QA1G2K0

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

**B. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement  
Retirement Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 06 / 2015

Transaction ID : VQZ6QA4T5K0

Amount of Each Disbursement this Period

3958.33

Full Name (Last, First, Middle Initial)

**C. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 14 / 2015

Transaction ID : VQZ6QA3Y0Q0

Amount of Each Disbursement this Period

390.72

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

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

4389.05

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2015			

**Transaction ID : VQZ6QA3Y0S6**

Amount of Each Disbursement this Period

67.82
-------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2015			

**Transaction ID : VQZ6QA3Y0R8**

Amount of Each Disbursement this Period

82.92
-------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Management Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2015			

**Transaction ID : VQZ6QA47KR0**

Amount of Each Disbursement this Period

19092.42
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

19092.42
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement Retirement Contribution: Non-Contribution Account

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  
12 / 22 / 2015

Transaction ID : VQZ6QA4T5R0

Amount of Each Disbursement this Period

3783.33

Full Name (Last, First, Middle Initial)

**B. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement Payroll: Non-Contribution Account

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  
11 / 30 / 2015

Transaction ID : VQZ6QA4P9W0

Amount of Each Disbursement this Period

57442.76

Full Name (Last, First, Middle Initial)

**C. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement Salary: Non-Contribution Account

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  
11 / 30 / 2015

Transaction ID : VQZ6QA4RH50

Amount of Each Disbursement this Period

1362.55

[MEMO ITEM]  
\*

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

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

61226.09

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Benjamin Williams</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 2568 Sherman Ave NW Apt 2		<b>Transaction ID : VQZ6QA4RHA0</b>
City Washington	State DC	
Zip Code 20001-2237	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1442.75
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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>B. Elliot Fink</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 1036 Paper Mill Ct NW		<b>Transaction ID : VQZ6QA4RH01</b>
City Washington	State DC	
Zip Code 20007-3619	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 353.50
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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. Caryn Lenoff</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 1747 Church St NW Apt 3		<b>Transaction ID : VQZ6QA4RHE1</b>
City Washington	State DC	
Zip Code 20036-1334	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1470.62
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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).....▶	0.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

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
11			30			2015			

Transaction ID : VQZ6QA4Q1J1

Amount of Each Disbursement this Period

18620.60
----------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Ian S. Graham**

Mailing Address 831 Hollins St  
Apt 1B

City Baltimore State MD Zip Code 21201-1003

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

Transaction ID : VQZ6QA4RHK1

Amount of Each Disbursement this Period

1781.38
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

Transaction ID : VQZ6QA4RH42

Amount of Each Disbursement this Period

1445.45
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

**Transaction ID : VQZ6QA4RH92**

Amount of Each Disbursement this Period

1281.03
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

**Transaction ID : VQZ6QA4RHQ2**

Amount of Each Disbursement this Period

2663.89
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

**Transaction ID : VQZ6QA4RHD3**

Amount of Each Disbursement this Period

1603.71
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[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2015

Transaction ID : VQZ6QA4RHJ3

Amount of Each Disbursement this Period

1484.42

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2015

Transaction ID : VQZ6QA4RGZ3

Amount of Each Disbursement this Period

1099.23

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2015

Transaction ID : VQZ6QA4RH34

Amount of Each Disbursement this Period

2602.31

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
11 / 30 / 2015

Transaction ID : VQZ6QA4RH84

Amount of Each Disbursement this Period

3800.29

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
11 / 30 / 2015

Transaction ID : VQZ6QA4RHH5

Amount of Each Disbursement this Period

1302.84

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Abigail Clark**

Mailing Address 1015 Euclid St NW

City Washington State DC Zip Code 20001-3995

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
11 / 30 / 2015

Transaction ID : VQZ6QA4RGY5

Amount of Each Disbursement this Period

361.22

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

Transaction ID : VQZ6QA4RH76

Amount of Each Disbursement this Period

413.53
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

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
11			30			2015			

Transaction ID : VQZ6QA4RHC6

Amount of Each Disbursement this Period

1122.08
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

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
11			30			2015			

Transaction ID : VQZ6QA4RH27

Amount of Each Disbursement this Period

1272.87
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

**Transaction ID : VQZ6QA4RHG7**

Amount of Each Disbursement this Period

1245.78
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

**Transaction ID : VQZ6QA4RHN7**

Amount of Each Disbursement this Period

1154.17
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

**Transaction ID : VQZ6QA4RGX7**

Amount of Each Disbursement this Period

1711.24
---------

[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. James McClure

Mailing Address 5410 Connecticut Ave NW  
Apt 609

City Washington State DC Zip Code 20015-2835

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

Transaction ID : VQZ6QA4RH68

Amount of Each Disbursement this Period

2055.98
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. Elizabeth Kim

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

Transaction ID : VQZ6QA4RHB8

Amount of Each Disbursement this Period

1098.08
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

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
11			30			2015			

Transaction ID : VQZ6QA4Q1K8

Amount of Each Disbursement this Period

126.65
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

Transaction ID : VQZ6QA4RH19

Amount of Each Disbursement this Period

1903.75
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Karla Towle**

Mailing Address 3600 S Glebe Rd  
Unit 813

City Arlington State VA Zip Code 22202-2388

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

Transaction ID : VQZ6QA4RHF9

Amount of Each Disbursement this Period

1606.57
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			30			2015			

Transaction ID : VQZ6QA4RHM9

Amount of Each Disbursement this Period

1056.27
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement Retirement Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2015

Transaction ID : VQZ6QA177W0

Amount of Each Disbursement this Period

3203.20

Full Name (Last, First, Middle Initial)

**B. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement Reimbursement, Below if Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA2JPW0

Amount of Each Disbursement this Period

3480.05

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Email Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WW30

Amount of Each Disbursement this Period

410.00

[MEMO ITEM]

\*

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

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

6683.25

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Microsoft**

Mailing Address 205 108th Ave NE  
Ste 400

City Bellevue State WA Zip Code 98004-5770

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WTX1

Amount of Each Disbursement this Period

253.80

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Mandu**

Mailing Address 453 K St NW

City Washington State DC Zip Code 20001-2530

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WX32

Amount of Each Disbursement this Period

154.98

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WP53

Amount of Each Disbursement this Period

135.50

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. LexisNexis**

Mailing Address PO Box 72477090

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Subscription: Non-Contribution Account

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
12			08			2015			

Transaction ID : VQZ6QA4WV63

Amount of Each Disbursement this Period

2109.71
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Mandu**

Mailing Address 453 K St NW

City Washington State DC Zip Code 20001-2530

Purpose of Disbursement  
Meals: Non-Contribution Account

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
12			08			2015			

Transaction ID : VQZ6QA4WYD4

Amount of Each Disbursement this Period

56.30
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. District Taco**

Mailing Address 1309 F St NW

City Washington State DC Zip Code 20004-1183

Purpose of Disbursement  
Meals: Non-Contribution Account

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
12			08			2015			

Transaction ID : VQZ6QA4WS25

Amount of Each Disbursement this Period

214.79
--------

[MEMO ITEM]

\*

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

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

0.00
------

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Southwest Airlines, Co.

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4X095

Amount of Each Disbursement this Period

-261.98
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. Adobe Creative Cloud

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WWX5

Amount of Each Disbursement this Period

49.99
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. Best Western

Mailing Address 770 28th St

City Boulder State CO Zip Code 80303-2343

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WP86

Amount of Each Disbursement this Period

515.18
--------

[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

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
12			08			2015			

Transaction ID : VQZ6QA4WNT6

Amount of Each Disbursement this Period

346.20
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Hotels.com**

Mailing Address 5400 Lbj Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
12			08			2015			

Transaction ID : VQZ6QA4WYZ6

Amount of Each Disbursement this Period

-939.24
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Hotels.com**

Mailing Address 5400 Lbj Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
12			08			2015			

Transaction ID : VQZ6QA4WX17

Amount of Each Disbursement this Period

123.20
--------

[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4X087

Amount of Each Disbursement this Period

27.92

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WXM7

Amount of Each Disbursement this Period

49.99

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WQQ8

Amount of Each Disbursement this Period

64.65

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

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  
12 / 08 / 2015

Transaction ID : VQZ6QA4X079

Amount of Each Disbursement this Period

136.09

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. MBA Consulting Group**

Mailing Address 611 Pennsylvania Ave SE # 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement  
Compliance & Accounting Services: Non-Contribution Account

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  
09 / 03 / 2015

Transaction ID : VQZ6Q9YE011

Amount of Each Disbursement this Period

5130.31

Full Name (Last, First, Middle Initial)

**C. Elizabeth Cohen**

Mailing Address 1715 15th St NW Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

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  
07 / 10 / 2015

Transaction ID : VQZ6QA17851

Amount of Each Disbursement this Period

65.00

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

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

5195.31

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Wild Onion Media**

Mailing Address 217 Camaro Way

City San Marcos State TX Zip Code 78666-3035

Purpose of Disbursement  
Video Consulting & Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2015

Transaction ID : VQZ6QA2JQ51

Amount of Each Disbursement this Period

5360.38

Full Name (Last, First, Middle Initial)

**B. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 14 / 2015

Transaction ID : VQZ6QA3Y151

Amount of Each Disbursement this Period

178.03

Full Name (Last, First, Middle Initial)

**C. Group Benefit Service**

Mailing Address PO Box 64802

City Baltimore State MD Zip Code 21264-4802

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : VQZ6QA22F81

Amount of Each Disbursement this Period

1376.67

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

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

6915.08



**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VQZ6QA1G291**

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Granholm Mulhern Associates**

Mailing Address 21 Chelsea Ct

City Oakland State CA Zip Code 94611-2416

Purpose of Disbursement  
Communications Consulting and Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4HR91**

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Management Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VQZ6QA47K91**

Amount of Each Disbursement this Period

Category/  
Type

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Hodge, Hart, Schleifer, Inc.**

Mailing Address 8401 Connecticut Ave  
Ste 600

City Chevy Chase State MD Zip Code 20815-5836

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2015

**Transaction ID : VQZ6Q9YDZ91**

Amount of Each Disbursement this Period

19775.40

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

**Transaction ID : VQZ6QA2ASA1**

Amount of Each Disbursement this Period

52219.43

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Karla Towle**

Mailing Address 3600 S Glebe Rd  
Unit 813

City Arlington State VA Zip Code 22202-2388

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

**Transaction ID : VQZ6QA4RZK0**

Amount of Each Disbursement this Period

1637.34

Category/  
Type

**[MEMO ITEM]**

\*

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

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

71994.83

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		1	5		2	0	1	5

**Transaction ID : VQZ6QA4RZR0**

Amount of Each Disbursement this Period

2	6	6	4	9	2
---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		1	5		2	0	1	5

**Transaction ID : VQZ6QA4RZ91**

Amount of Each Disbursement this Period

1	3	6	1	9	5
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**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Caryn Lenoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		1	5		2	0	1	5

**Transaction ID : VQZ6QA4RZE1**

Amount of Each Disbursement this Period

1	4	3	8	8	3
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**[MEMO ITEM]**

\*

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

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

0	0	0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		1	5		2	0	1	5

Transaction ID : VQZ6QA4RZW1

Amount of Each Disbursement this Period

1	0	9	2	.	0	6
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		1	5		2	0	1	5

Transaction ID : VQZ6QA4RZ42

Amount of Each Disbursement this Period

1	3	0	4	.	2	2
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

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
0	9		1	5		2	0	1	5

Transaction ID : VQZ6QA4RZJ2

Amount of Each Disbursement this Period

2	3	1	9	.	4	1
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[MEMO ITEM]

\*

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

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

0	0	0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2015

Transaction ID : VQZ6QA4RZQ2

Amount of Each Disbursement this Period

1441.73

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2015

Transaction ID : VQZ6QA4RZ83

Amount of Each Disbursement this Period

2603.76

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Ian S. Graham**

Mailing Address 831 Hollins St  
Apt 1B

City Baltimore State MD Zip Code 21201-1003

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2015

Transaction ID : VQZ6QA4RZD3

Amount of Each Disbursement this Period

1661.13

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		1	5		2	0	1	5

**Transaction ID : VQZ6QA4RZV3**

Amount of Each Disbursement this Period

1	4	8	3	.	4	0
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		1	5		2	0	1	5

**Transaction ID : VQZ6QA4RZ34**

Amount of Each Disbursement this Period

1	0	9	9	.	5	1
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		1	5		2	0	1	5

**Transaction ID : VQZ6QA4RZH4**

Amount of Each Disbursement this Period

1	2	8	5	.	0	5
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

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

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

0	0	0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Adam Talbot</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 2231 California St NW Apt 308		<b>Transaction ID : VQZ6QA4RZP4</b>
City Washington State DC Zip Code 20008-3919	Amount of Each Disbursement this Period 1891.20	
Purpose of Disbursement Salary: Non-Contribution Account	Candidate Name	[MEMO ITEM] *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mary K. Jennings</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 1668 Beekman PI NW Apt C		<b>Transaction ID : VQZ6QA4RZ75</b>
City Washington State DC Zip Code 20009-6540	Amount of Each Disbursement this Period 1902.90	
Purpose of Disbursement Salary: Non-Contribution Account	Candidate Name	[MEMO ITEM] *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. James McClure</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 5410 Connecticut Ave NW Apt 609		<b>Transaction ID : VQZ6QA4RZC5</b>
City Washington State DC Zip Code 20015-2835	Amount of Each Disbursement this Period 2057.00	
Purpose of Disbursement Salary: Non-Contribution Account	Candidate Name	[MEMO ITEM] *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<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 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4RZT5**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4RZ26**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4RZG6**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

\*

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

Transaction ID : VQZ6QA4RZN6

Amount of Each Disbursement this Period

413.54

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

Transaction ID : VQZ6QA4RZ67

Amount of Each Disbursement this Period

1374.07

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

Transaction ID : VQZ6QA4RZB7

Amount of Each Disbursement this Period

354.08

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		1	5		2	0	1	5

Transaction ID : VQZ6QA4RZS7

Amount of Each Disbursement this Period

1	1	5	4	1	6
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		1	5		2	0	1	5

Transaction ID : VQZ6QA4RZF8

Amount of Each Disbursement this Period

3	8	1	3	.	1	0
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		1	5		2	0	1	5

Transaction ID : VQZ6QA4RZM8

Amount of Each Disbursement this Period

1	2	4	6	.	0	7
---	---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

0	0	0	0	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Anthony Baker

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

Transaction ID : VQZ6QA4RZ59

Amount of Each Disbursement this Period

1477.37

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. Joshua Dolin

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

Transaction ID : VQZ6QA4RZA9

Amount of Each Disbursement this Period

1614.96

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. Wilson B. Woodhouse

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

Transaction ID : VQZ6QA4RZX9

Amount of Each Disbursement this Period

6481.13

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

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
12			22			2015			

Transaction ID : VQZ6QA4NGC1

Amount of Each Disbursement this Period

384.47
--------

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
12			14			2015			

Transaction ID : VQZ6QA4NGH0

Amount of Each Disbursement this Period

43.13
-------

Category/  
Type

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

**C. Mirage**

Mailing Address 3400 Las Vegas Blvd S

City Las Vegas State NV Zip Code 89109-8923

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
12			15			2015			

Transaction ID : VQZ6QA4NGN2

Amount of Each Disbursement this Period

46.92
-------

Category/  
Type

[MEMO ITEM]  
\*

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

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

384.47
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Mirage**

Mailing Address 3400 Las Vegas Blvd S

City Las Vegas State NV Zip Code 89109-8923

Purpose of Disbursement  
Meals: Non-Contribution Account

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  
12 / 14 / 2015

Transaction ID : VQZ6QA4NGM4

Amount of Each Disbursement this Period

77.70

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Internet: Non-Contribution Account

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  
11 / 17 / 2015

Transaction ID : VQZ6QA4NGF5

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
11 / 17 / 2015

Transaction ID : VQZ6QA4NGE7

Amount of Each Disbursement this Period

17.08

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines, Co.</b>		Date of Disbursement MM / DD / YYYY 12 / 14 / 2015
Mailing Address 2702 Love Field Dr		<b>Transaction ID : VQZ6QA4NGJ8</b>
City Dallas	State TX	
Zip Code 75235-1908	Purpose of Disbursement Travel: Non-Contribution Account	Amount of Each Disbursement this Period 8.00
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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>B. Southwest Airlines, Co.</b>		Date of Disbursement MM / DD / YYYY 12 / 16 / 2015
Mailing Address 2702 Love Field Dr		<b>Transaction ID : VQZ6QA4NGQ8</b>
City Dallas	State TX	
Zip Code 75235-1908	Purpose of Disbursement Internet: Non-Contribution Account	Amount of Each Disbursement this Period 8.00
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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. Wilson B. Woodhouse</b>		Date of Disbursement MM / DD / YYYY 10 / 27 / 2015
Mailing Address 618 E St SE		<b>Transaction ID : VQZ6QA21VC1</b>
City Washington	State DC	
Zip Code 20003-2786	Purpose of Disbursement Reimbursement - Below If Itemized: Non-Contribution Account	Amount of Each Disbursement this Period 126.15
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

126.15

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		12		2015

**Transaction ID : VQZ6QA21VD9**

Amount of Each Disbursement this Period

34.03
-------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. LexisNexis**

Mailing Address PO Box 72477090

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

**Transaction ID : VQZ6QA4HRE1**

Amount of Each Disbursement this Period

2109.71
---------

Full Name (Last, First, Middle Initial)

**C. Washington Metropolitan Area Transit Authority**

Mailing Address 600 5th St NW

City Washington State DC Zip Code 20001-2610

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		17		2015

**Transaction ID : VQZ6QA1G2E1**

Amount of Each Disbursement this Period

900.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3009.71
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Allenswood Group**

Mailing Address 2001 N Kenilworth St

City Arlington State VA Zip Code 22205-3130

Purpose of Disbursement  
Video Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	30	/	2015

Transaction ID : VQZ6QA4HSF1

Amount of Each Disbursement this Period

11500.00
----------

Full Name (Last, First, Middle Initial)

**B. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	06	/	2015

Transaction ID : VQZ6QA4RXH1

Amount of Each Disbursement this Period

179.84
--------

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	13	/	2015

Transaction ID : VQZ6QA4RY74

Amount of Each Disbursement this Period

22.00
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[MEMO ITEM]  
\*

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

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

11679.84
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Hilton Garden Inn**

Mailing Address 1100 Carnegie Ave

City Cleveland State OH Zip Code 44115-2806

Purpose of Disbursement  
Lodging: Non Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2015

Transaction ID : VQZ6QA4QTK1

Amount of Each Disbursement this Period

301.74

Full Name (Last, First, Middle Initial)

**B. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, Below if Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA3Y1K1

Amount of Each Disbursement this Period

9102.40

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WZ20

Amount of Each Disbursement this Period

67.19

[MEMO ITEM]  
\*

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

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

9404.14

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

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
1	1		1	0		2	0	1	5		

**Transaction ID : VQZ6QA4WR90**

Amount of Each Disbursement this Period

1	4	9	.	0	0
---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. B&H**

Mailing Address 420 9th Ave

City New York State NY Zip Code 10001-1614

Purpose of Disbursement  
Equipment: Non-Contribution Account

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
1	1		1	0		2	0	1	5		

**Transaction ID : VQZ6QA4WQ71**

Amount of Each Disbursement this Period

1	7	9	.	9	9
---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. LexisNexis**

Mailing Address PO Box 72477090

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Subscription: Non-Contribution Account

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
1	1		1	0		2	0	1	5		

**Transaction ID : VQZ6QA4WS91**

Amount of Each Disbursement this Period

1	8	0	2	.	3	2
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WZK1

Amount of Each Disbursement this Period

6.84
------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Modulus**

Mailing Address 1739 Elm St  
Ste 200B

City Cincinnati State OH Zip Code 45202-6965

Purpose of Disbursement  
Software: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WX82

Amount of Each Disbursement this Period

44.58
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WZ92

Amount of Each Disbursement this Period

562.50
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
11 / 10 / 2015

Transaction ID : VQZ6QA4WZE2

Amount of Each Disbursement this Period

10.72

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Network Solutions**

Mailing Address 12808 Gran Bay Pkwy W

City Jacksonville State FL Zip Code 32258-4468

Purpose of Disbursement  
Domain Services: Non-Contribution Account

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  
11 / 10 / 2015

Transaction ID : VQZ6QA4WTR2

Amount of Each Disbursement this Period

7.97

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
11 / 10 / 2015

Transaction ID : VQZ6QA4WV13

Amount of Each Disbursement this Period

516.70

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : VQZ6QA4WT93**

Amount of Each Disbursement this Period

1	5	8	0	0
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**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : VQZ6QA4WQB3**

Amount of Each Disbursement this Period

6	7	3	7
---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : VQZ6QA4WSP3**

Amount of Each Disbursement this Period

4	1	5	6	0
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**[MEMO ITEM]**

\*

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

0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Vonage**

Mailing Address PO Box 392415

City Pittsburgh State PA Zip Code 15251-9415

Purpose of Disbursement  
Telephone: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WWS3

Amount of Each Disbursement this Period

631.93

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. WP Engine**

Mailing Address 504 Lavaca St  
Ste 1000

City Austin State TX Zip Code 78701-2857

Purpose of Disbursement  
Web Hosting Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WYW3

Amount of Each Disbursement this Period

99.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WW14

Amount of Each Disbursement this Period

244.00

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Movement Ventures, Qzrz**

Mailing Address 3180 18th St  
Ste 100

City San Francisco State CA Zip Code 94110-2042

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 10 / 2015

Transaction ID : VQZ6QA4WXC4

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 10 / 2015

Transaction ID : VQZ6QA4WSZ4

Amount of Each Disbursement this Period

16.84

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 10 / 2015

Transaction ID : VQZ6QA4WR25

Amount of Each Disbursement this Period

33.47

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WQ55

Amount of Each Disbursement this Period

116.97

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. United Airlines, Inc.**

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WWA5

Amount of Each Disbursement this Period

255.60

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109-5210

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WSN5

Amount of Each Disbursement this Period

46.72

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WYP5

Amount of Each Disbursement this Period

625.50
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WPQ5

Amount of Each Disbursement this Period

86.85
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WSB6

Amount of Each Disbursement this Period

158.00
--------

[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			10			2015			

**Transaction ID : VQZ6QA4WZH6**

Amount of Each Disbursement this Period

257.00
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			10			2015			

**Transaction ID : VQZ6QA4WWK6**

Amount of Each Disbursement this Period

80.00
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			10			2015			

**Transaction ID : VQZ6QA4WY77**

Amount of Each Disbursement this Period

522.20
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WZ77

Amount of Each Disbursement this Period

145.98

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Thinkstock, LLC**

Mailing Address 501 N College St

City Charlotte State NC Zip Code 28202-2213

Purpose of Disbursement  
Graphics Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WVJ7

Amount of Each Disbursement this Period

197.96

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WZT7

Amount of Each Disbursement this Period

85.32

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 111 W Rio Salado Pkwy  
#

City State Zip Code  
Tempe AZ 85281-2880

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WZ38

Amount of Each Disbursement this Period

395.20
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Network Solutions**

Mailing Address 12808 Gran Bay Pkwy W

City State Zip Code  
Jacksonville FL 32258-4468

Purpose of Disbursement  
Domain Services: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WSF8

Amount of Each Disbursement this Period

7.97
------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. We the Pizza**

Mailing Address 305 Pennsylvania Ave SE

City State Zip Code  
Washington DC 20003-1148

Purpose of Disbursement  
Meals: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WTT8

Amount of Each Disbursement this Period

273.65
--------

[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WY19

Amount of Each Disbursement this Period

560.10
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WP29

Amount of Each Disbursement this Period

49.99
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WS59

Amount of Each Disbursement this Period

33.47
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : VQZ6QA22HK1

Amount of Each Disbursement this Period

1379.80

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2015

Transaction ID : VQZ6QA22JG0

Amount of Each Disbursement this Period

113.00

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

**C. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : VQZ6QA22JE5

Amount of Each Disbursement this Period

122.61

[MEMO ITEM]  
\*

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

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

1379.80

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		12		2015

Transaction ID : VQZ6QA22JD7

Amount of Each Disbursement this Period

390.51
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : VQZ6QA22JH8

Amount of Each Disbursement this Period

126.00
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2015

Transaction ID : VQZ6QA218N1

Amount of Each Disbursement this Period

83.02
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

83.02
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
10 / 02 / 2015

Transaction ID : VQZ6QA218P9

Amount of Each Disbursement this Period

5.46

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Philip Shulman**

Mailing Address 615 Park St Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
08 / 12 / 2015

Transaction ID : VQZ6QA21QP1

Amount of Each Disbursement this Period

61.86

Full Name (Last, First, Middle Initial)

**C. Stripe**

Mailing Address 3180 18th St

City San Francisco State CA Zip Code 94110-2043

Purpose of Disbursement  
Credit Card Processing Fees: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
11 / 17 / 2015

Transaction ID : VQZ6QA26EP1

Amount of Each Disbursement this Period

1.03

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

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

62.89



**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Stripe**

Mailing Address 3180 18th St

City San Francisco State CA Zip Code 94110-2043

Purpose of Disbursement  
Credit Card Processing Fees: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VQZ6QA4P9Q1

Amount of Each Disbursement this Period

7.55
------

Full Name (Last, First, Middle Initial)

**B. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	29	/	2015

Transaction ID : VQZ6QA2ARQ1

Amount of Each Disbursement this Period

40.00
-------

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, Below if Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	10	/	2015

Transaction ID : VQZ6QA3Y1R1

Amount of Each Disbursement this Period

5135.09
---------

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

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

5182.64
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Mandu**

Mailing Address 453 K St NW

City Washington State DC Zip Code 20001-2530

Purpose of Disbursement  
Meals: Non-Contribution Account

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  
11 / 10 / 2015

Transaction ID : VQZ6QA4WT10

Amount of Each Disbursement this Period

38.50

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
11 / 10 / 2015

Transaction ID : VQZ6QA4WQP0

Amount of Each Disbursement this Period

851.20

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

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  
11 / 10 / 2015

Transaction ID : VQZ6QA4WXQ0

Amount of Each Disbursement this Period

40.01

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WQC1

Amount of Each Disbursement this Period

49.99

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Travelocity**

Mailing Address 3150 Sabre Dr

City Southlake State TX Zip Code 76092-2103

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WSQ1

Amount of Each Disbursement this Period

391.20

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Email Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WSJ2

Amount of Each Disbursement this Period

404.32

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 10 / 2015

Transaction ID : VQZ6QA4WY43

Amount of Each Disbursement this Period

276.61

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. United Airlines, Inc.**

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 10 / 2015

Transaction ID : VQZ6QA4WVM3

Amount of Each Disbursement this Period

216.10

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109-5210

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 10 / 2015

Transaction ID : VQZ6QA4WRP3

Amount of Each Disbursement this Period

10.99

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WXP3

Amount of Each Disbursement this Period

261.53
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WZ04

Amount of Each Disbursement this Period

219.00
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
11			10			2015			

Transaction ID : VQZ6QA4WY85

Amount of Each Disbursement this Period

689.64
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WRN5

Amount of Each Disbursement this Period

974.20

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. United Airlines, Inc.**

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WWJ8

Amount of Each Disbursement this Period

337.10

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Hotels.com**

Mailing Address 5400 Lbj Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2015

Transaction ID : VQZ6QA4WXX8

Amount of Each Disbursement this Period

78.03

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 10 / 2015

Transaction ID : VQZ6QA4WPT9

Amount of Each Disbursement this Period

103.12

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Stripe**

Mailing Address 3180 18th St

City San Francisco State CA Zip Code 94110-2043

Purpose of Disbursement  
Credit Card Processing Fees: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2015

Transaction ID : VQZ6QA4T6S1

Amount of Each Disbursement this Period

14.80

Full Name (Last, First, Middle Initial)

**C. CQ Roll Call**

Mailing Address 77 K St NE  
FI 8

City Washington State DC Zip Code 20002-4681

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : VQZ6QA4HQV1

Amount of Each Disbursement this Period

6477.19

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

6491.99

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Union Source**

Mailing Address PO Box 15084

City Washington State DC Zip Code 20003-0084

Purpose of Disbursement  
Printing: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2015

Transaction ID : VQZ6QA4HRW1

Amount of Each Disbursement this Period

1334.57

Full Name (Last, First, Middle Initial)

**B. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2015

Transaction ID : VQZ6QA2ARW1

Amount of Each Disbursement this Period

26.68

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2015

Transaction ID : VQZ6QA2AS02

Amount of Each Disbursement this Period

14.27

[MEMO ITEM]  
\*

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

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

1361.25



**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2015

Transaction ID : VQZ6QA21TY1

Amount of Each Disbursement this Period

60.86

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2015

Transaction ID : VQZ6QA21TZ9

Amount of Each Disbursement this Period

55.56

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 504 Clinton Center Dr Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 23 / 2015

Transaction ID : VQZ6QA4Q4Y1

Amount of Each Disbursement this Period

37.86

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

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

98.72

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Bonner Group**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2783

Purpose of Disbursement  
Fundraising Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2015

**Transaction ID : VQZ6QA17802**

Amount of Each Disbursement this Period

30000.00

Full Name (Last, First, Middle Initial)

**B. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2015

**Transaction ID : VQZ6QA1G742**

Amount of Each Disbursement this Period

144.21

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 28 / 2015

**Transaction ID : VQZ6QA1G791**

Amount of Each Disbursement this Period

31.67

**[MEMO ITEM]**  
\*

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

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

30144.21

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 27 / 2015

Transaction ID : VQZ6QA1G784

Amount of Each Disbursement this Period

27.10

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 27 / 2015

Transaction ID : VQZ6QA1G776

Amount of Each Disbursement this Period

25.54

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 28 / 2015

Transaction ID : VQZ6QA1G768

Amount of Each Disbursement this Period

24.90

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie LLP**

Mailing Address 1201 3rd Ave  
Ste 4900

City Seattle State WA Zip Code 98101-3095

Purpose of Disbursement  
Legal Services & Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA4HR42

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Bonner Group**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2783

Purpose of Disbursement  
Fundraising Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA3Y042

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Central Parking System**

Mailing Address 720 Olive St  
Ste 1650

City Saint Louis State MO Zip Code 63101-2329

Purpose of Disbursement  
Parking: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA49642

Amount of Each Disbursement this Period

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2015

**Transaction ID : VQZ6QA2AS52**

Amount of Each Disbursement this Period

51697.63
----------

Full Name (Last, First, Middle Initial)

**B. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2015

**Transaction ID : VQZ6QA2ATC0**

Amount of Each Disbursement this Period

2683.13
---------

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)

**C. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2015

**Transaction ID : VQZ6QA2ASM0**

Amount of Each Disbursement this Period

1539.85
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**[MEMO ITEM]**  
\*

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

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

51697.63
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2015

**Transaction ID : VQZ6QA2AWQ0**

Amount of Each Disbursement this Period

1545.89
---------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Ian S. Graham**

Mailing Address 831 Hollins St  
Apt 1B

City Baltimore State MD Zip Code 21201-1003

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2015

**Transaction ID : VQZ6QA2AV71**

Amount of Each Disbursement this Period

1718.92
---------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2015

**Transaction ID : VQZ6QA2AWJ1**

Amount of Each Disbursement this Period

2115.72
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**[MEMO ITEM]**

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	8		3	1		2	0	1	5

**Transaction ID : VQZ6QA2AVG2**

Amount of Each Disbursement this Period

4	2	2	8	.	7	1
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

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
0	8		3	1		2	0	1	5

**Transaction ID : VQZ6QA2AVN2**

Amount of Each Disbursement this Period

1	2	9	6	.	1	7
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	8		3	1		2	0	1	5

**Transaction ID : VQZ6QA2AVB3**

Amount of Each Disbursement this Period

1	5	2	8	.	3	7
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**[MEMO ITEM]**

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	8		3	1		2	0	1	5

**Transaction ID : VQZ6QA2AWH3**

Amount of Each Disbursement this Period

1	3	2	0	0	5
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	8		3	1		2	0	1	5

**Transaction ID : VQZ6QA2AVY3**

Amount of Each Disbursement this Period

2	8	0	3	4	6
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	8		3	1		2	0	1	5

**Transaction ID : VQZ6QA2ATA4**

Amount of Each Disbursement this Period

3	5	4	0	7
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[MEMO ITEM]

\*

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

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

0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	5		

**Transaction ID : VQZ6QA2AWC4**

Amount of Each Disbursement this Period

6	4	8	1	.	1	1
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. James McClure**

Mailing Address 5410 Connecticut Ave NW  
Apt 609

City Washington State DC Zip Code 20015-2835

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	5		

**Transaction ID : VQZ6QA2AV55**

Amount of Each Disbursement this Period

2	1	1	9	.	3	5
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	5		

**Transaction ID : VQZ6QA2AWN5**

Amount of Each Disbursement this Period

1	1	2	7	.	7	2
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

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

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

0	0	0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adam Talbot**

Mailing Address 2231 California St NW  
Apt 308

City Washington State DC Zip Code 20008-3919

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	31	/	2015

**Transaction ID : VQZ6QA2AW66**

Amount of Each Disbursement this Period

1945.22
---------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	31	/	2015

**Transaction ID : VQZ6QA2AT96**

Amount of Each Disbursement this Period

1159.52
---------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	31	/	2015

**Transaction ID : VQZ6QA2ASV6**

Amount of Each Disbursement this Period

1495.99
---------

**[MEMO ITEM]**

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2015

Transaction ID : VQZ6QA2AWF7

Amount of Each Disbursement this Period

1254.16

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2015

Transaction ID : VQZ6QA2ATQ7

Amount of Each Disbursement this Period

1965.31

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2015

Transaction ID : VQZ6QA2AT88

Amount of Each Disbursement this Period

1683.70

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
08 / 31 / 2015

**Transaction ID : VQZ6QA2AWA8**

Amount of Each Disbursement this Period

1285.57

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
08 / 31 / 2015

**Transaction ID : VQZ6QA2ASN8**

Amount of Each Disbursement this Period

4503.43

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
08 / 31 / 2015

**Transaction ID : VQZ6QA2AW09**

Amount of Each Disbursement this Period

1151.48

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Caryn Lenoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2015

**Transaction ID : VQZ6QA2AVD9**

Amount of Each Disbursement this Period

1485.64

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2015

**Transaction ID : VQZ6QA2AWE9**

Amount of Each Disbursement this Period

1545.89

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2015

**Transaction ID : VQZ6QA2ASY9**

Amount of Each Disbursement this Period

1359.20

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Allenswood Group**

Mailing Address 2001 N Kenilworth St

City State Zip Code  
Arlington VA 22205-3130

Purpose of Disbursement  
Travel Expenses: Non-Contribution Account

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
0	8		1	2		2	0	1	5

**Transaction ID : VQZ6QA21P62**

Amount of Each Disbursement this Period

1	1	3	5	.	5	9
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City State Zip Code  
Washington DC 20001-2237

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

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
0	8		0	6		2	0	1	5

**Transaction ID : VQZ6QA4RX72**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**C. Karla Towle**

Mailing Address 3600 S Glebe Rd  
Unit 813

City State Zip Code  
Arlington VA 22202-2388

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

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
1	2		1	4		2	0	1	5

**Transaction ID : VQZ6QA3Y092**

Amount of Each Disbursement this Period

1	9	.	6	5
---	---	---	---	---

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

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

1	1	7	0	.	2	4
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1	1	7	0	.	2	4
---	---	---	---	---	---	---

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2015

Transaction ID : VQZ6QA3Y0B7

Amount of Each Disbursement this Period

13.48
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : VQZ6QA47KJ2

Amount of Each Disbursement this Period

10.29
-------

Full Name (Last, First, Middle Initial)

**C. CNA Insurance**

Mailing Address 2020 K St NW  
Ste 500

City Washington State DC Zip Code 20006-1806

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2015

Transaction ID : VQZ6QA4S5K2

Amount of Each Disbursement this Period

35.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

45.29
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2015

**Transaction ID : VQZ6QA4RQM2**

Amount of Each Disbursement this Period

944.03

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Hilton Garden Inn**

Mailing Address 1100 Carnegie Ave

City Cleveland State OH Zip Code 44115-2806

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2015

**Transaction ID : VQZ6QA4RSV0**

Amount of Each Disbursement this Period

301.74

Category/  
Type

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2015

**Transaction ID : VQZ6QA4RSX6**

Amount of Each Disbursement this Period

15.56

Category/  
Type

**[MEMO ITEM]**  
\*

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

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

944.03



**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Austin/Egoscue Development**

Mailing Address 9869 Easton Dr

City State Zip Code  
Beverly Hills CA 90210-1416

Purpose of Disbursement  
Fundraising Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 24 / 2015

**Transaction ID : VQZ6QA1G2Q2**

Amount of Each Disbursement this Period

16000.00

Full Name (Last, First, Middle Initial)

**B. Washington Metropolitan Area Transit Authority**

Mailing Address 600 5th St NW

City State Zip Code  
Washington DC 20001-2610

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
11 / 17 / 2015

**Transaction ID : VQZ6QA4T5Q2**

Amount of Each Disbursement this Period

1180.00

Full Name (Last, First, Middle Initial)

**C. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City State Zip Code  
Tampa FL 33629-5611

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
12 / 11 / 2015

**Transaction ID : VQZ6QA4P9V2**

Amount of Each Disbursement this Period

68219.08

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

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

85399.08

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : VQZ6QA4RS80

Amount of Each Disbursement this Period

3800.30

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : VQZ6QA4RRP0

Amount of Each Disbursement this Period

1603.72

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

Transaction ID : VQZ6QA4RRT0

Amount of Each Disbursement this Period

1711.23

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

**Transaction ID : VQZ6QA4Q1W0**

Amount of Each Disbursement this Period

111.68

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Karla Towle**

Mailing Address 3600 S Glebe Rd  
Unit 813

City Arlington State VA Zip Code 22202-2388

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

**Transaction ID : VQZ6QA4RS31**

Amount of Each Disbursement this Period

1606.57

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

**Transaction ID : VQZ6QA4RRY1**

Amount of Each Disbursement this Period

1245.78

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
12 / 11 / 2015

Transaction ID : VQZ6QA4RS72

Amount of Each Disbursement this Period

1154.17

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
12 / 11 / 2015

Transaction ID : VQZ6QA4RSC2

Amount of Each Disbursement this Period

1056.28

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
12 / 11 / 2015

Transaction ID : VQZ6QA4RRN2

Amount of Each Disbursement this Period

1365.48

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : VQZ6QA4RRS2

Amount of Each Disbursement this Period

1302.84

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : VQZ6QA4RS23

Amount of Each Disbursement this Period

1098.08

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Mary K. Jennings**

Mailing Address 1668 Beekman Pl NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : VQZ6QA4RRX3

Amount of Each Disbursement this Period

1903.76

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : VQZ6QA4RSB4

Amount of Each Disbursement this Period

1300.47

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : VQZ6QA4RRR4

Amount of Each Disbursement this Period

1099.22

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : VQZ6QA4Q1T4

Amount of Each Disbursement this Period

22765.75

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
12 / 11 / 2015

Transaction ID : VQZ6QA4RS15

Amount of Each Disbursement this Period

413.54

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

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  
12 / 11 / 2015

Transaction ID : VQZ6QA4RS65

Amount of Each Disbursement this Period

1289.80

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
12 / 11 / 2015

Transaction ID : VQZ6QA4RSA6

Amount of Each Disbursement this Period

1484.41

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

**Transaction ID : VQZ6QA4RSF6**

Amount of Each Disbursement this Period

2663.91

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Michael Schub**

Mailing Address 3636 16th St NW  
Apt B633

City Washington State DC Zip Code 20010-4157

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

**Transaction ID : VQZ6QA4RRW6**

Amount of Each Disbursement this Period

1387.43

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2015

**Transaction ID : VQZ6QA4RS07**

Amount of Each Disbursement this Period

1281.02

[MEMO ITEM]

\*

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : VQZ6QA4RS57

Amount of Each Disbursement this Period

7	1	8	5	.	3	8
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : VQZ6QA4RS98

Amount of Each Disbursement this Period

1	4	4	5	.	4	6
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. James McClure**

Mailing Address 5410 Connecticut Ave NW  
Apt 609

City Washington State DC Zip Code 20015-2835

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : VQZ6QA4RSE8

Amount of Each Disbursement this Period

2	0	5	5	.	9	7
---	---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : VQZ6QA4RRQ8

Amount of Each Disbursement this Period

2602.31

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Caryn Lenoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : VQZ6QA4RRV8

Amount of Each Disbursement this Period

1470.62

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2015

Transaction ID : VQZ6QA4RS49

Amount of Each Disbursement this Period

1460.40

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA4RRZ9

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA4T5W2

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Blue State Digital**

Mailing Address 406 7th St NW  
FI 3

City Washington State DC Zip Code 20004-2260

Purpose of Disbursement  
Digital Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA1G6Z2

Amount of Each Disbursement this Period

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)  
**A. Dewey Square Group**

Mailing Address PO Box 60340

City Charlotte State NC Zip Code 28260-0340

Purpose of Disbursement  
Video Consulting Fees: Non-Contribution Account

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
09 / 03 / 2015

Transaction ID : **VQZ6Q9YDYZ2**

Amount of Each Disbursement this Period  
7500.00

Category/Type

Full Name (Last, First, Middle Initial)  
**B. Stripe**

Mailing Address 3180 18th St

City San Francisco State CA Zip Code 94110-2043

Purpose of Disbursement  
Credit Card Processing Fees: Non-Contribution Account

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
12 / 17 / 2015

Transaction ID : **VQZ6QA3Y8Z2**

Amount of Each Disbursement this Period  
29.30

Category/Type

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

Mailing Address 409 7th St NW  
Ste 350

City Washington State DC Zip Code 20004-2312

Purpose of Disbursement  
Communications Consulting: Non-Contribution Account

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : **VQZ6QA4HQ33**

Amount of Each Disbursement this Period  
36000.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 43529.30

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	0		2	0	1	5		

**Transaction ID : VQZ6QA17843**

Amount of Each Disbursement this Period

5	9	0	.	0	3
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Comfort Inn VT**

Mailing Address 5 Dorset St

City South Burlington State VT Zip Code 05403-6232

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	0		2	0	1	5		

**Transaction ID : VQZ6QA4TRE2**

Amount of Each Disbursement this Period

5	3	3	.	0	5
---	---	---	---	---	---

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)

**C. Group Benefit Service**

Mailing Address PO Box 64802

City Baltimore State MD Zip Code 21264-4802

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

**Transaction ID : VQZ6QA2JQ43**

Amount of Each Disbursement this Period

9	7	9	.	3	3
---	---	---	---	---	---

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

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

1	5	6	9	.	3	3
---	---	---	---	---	---	---

1	5	6	9	.	3	3
---	---	---	---	---	---	---

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

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
11			02			2015			

**Transaction ID : VQZ6QA21W73**

Amount of Each Disbursement this Period

111.80
--------

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
10			27			2015			

**Transaction ID : VQZ6QA21WB4**

Amount of Each Disbursement this Period

9.27
------

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
10			29			2015			

**Transaction ID : VQZ6QA21WA6**

Amount of Each Disbursement this Period

22.04
-------

**[MEMO ITEM]**  
\*

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

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

111.80
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Union Source**

Mailing Address PO Box 15084

City Washington State DC Zip Code 20003-0084

Purpose of Disbursement  
Printing: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2015

**Transaction ID : VQZ6Q9YDZ83**

Amount of Each Disbursement this Period

1860.93

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2015

**Transaction ID : VQZ6QA4RWA3**

Amount of Each Disbursement this Period

228.10

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 111 W Rio Salado Pkwy #

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2015

**Transaction ID : VQZ6QA4RWB0**

Amount of Each Disbursement this Period

228.10

Category/  
Type

**[MEMO ITEM]**  
\*

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

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

2089.03

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Blue State Digital**

Mailing Address 406 7th St NW  
FI 3

City Washington State DC Zip Code 20004-2260

Purpose of Disbursement  
Digital Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2015

Transaction ID : VQZ6QA21VB3

Amount of Each Disbursement this Period

582.15

Full Name (Last, First, Middle Initial)

**B. Bonner Group**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2783

Purpose of Disbursement  
Fundraising Consulting Fees: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2015

Transaction ID : VQZ6Q9XVGB3

Amount of Each Disbursement this Period

77250.00

Full Name (Last, First, Middle Initial)

**C. Wild Onion Media**

Mailing Address 217 Camaro Way

City San Marcos State TX Zip Code 78666-3035

Purpose of Disbursement  
Video Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : VQZ6QA4HRD3

Amount of Each Disbursement this Period

7000.00

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

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

84832.15



**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2015

**Transaction ID : VQZ6QA47KD3**

Amount of Each Disbursement this Period

32.06

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
Fl 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 16 / 2015

**Transaction ID : VQZ6QA47KF9**

Amount of Each Disbursement this Period

7.06

Category/  
Type

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 14 / 2015

**Transaction ID : VQZ6QA1G2D3**

Amount of Each Disbursement this Period

80.00

Category/  
Type

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

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

112.06

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll: Non-Contribution Account

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  
11 / 16 / 2015

Transaction ID : VQZ6QA24YG3

Amount of Each Disbursement this Period

78877.52

Full Name (Last, First, Middle Initial)

**B. Ian S. Graham**

Mailing Address 831 Hollins St  
Apt 1B

City Baltimore State MD Zip Code 21201-1003

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
11 / 16 / 2015

Transaction ID : VQZ6QA2AR00

Amount of Each Disbursement this Period

1781.38

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

**C. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
11 / 16 / 2015

Transaction ID : VQZ6QA2ARE0

Amount of Each Disbursement this Period

2663.90

[MEMO ITEM]  
\*

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

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

78877.52

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	1		1	6		2	0	1	5

Transaction ID : VQZ6QA2ARK0

Amount of Each Disbursement this Period

1	0	5	6	.	2	8
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	1		1	6		2	0	1	5

Transaction ID : VQZ6QA2AR41

Amount of Each Disbursement this Period

1	3	6	2	.	5	4
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Adam Talbot**

Mailing Address 2231 California St NW  
Apt 308

City Washington State DC Zip Code 20008-3919

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	1		1	6		2	0	1	5

Transaction ID : VQZ6QA2AR91

Amount of Each Disbursement this Period

1	0	3	8	.	5	3
---	---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

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  
11 / 16 / 2015

Transaction ID : VQZ6QA24YH1

Amount of Each Disbursement this Period

26858.16

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
11 / 16 / 2015

Transaction ID : VQZ6QA2ARD2

Amount of Each Disbursement this Period

3800.30

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
11 / 16 / 2015

Transaction ID : VQZ6QA2ARJ2

Amount of Each Disbursement this Period

1442.74

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2015

**Transaction ID : VQZ6QA2AQV2**

Amount of Each Disbursement this Period

4502.39

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Joseph O'Connell**

Mailing Address 85 Manchester St Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2015

**Transaction ID : VQZ6QA2AQZ2**

Amount of Each Disbursement this Period

1294.72

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2015

**Transaction ID : VQZ6QA2AR33**

Amount of Each Disbursement this Period

1445.46

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			16			2015			

Transaction ID : VQZ6QA2AR83

Amount of Each Disbursement this Period

1281.02
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			16			2015			

Transaction ID : VQZ6QA2ARP3

Amount of Each Disbursement this Period

1154.17
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			16			2015			

Transaction ID : VQZ6QA2ARC4

Amount of Each Disbursement this Period

1302.85
---------

[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			16			2015			

**Transaction ID : VQZ6QA2ARH4**

Amount of Each Disbursement this Period

1484.41
---------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			16			2015			

**Transaction ID : VQZ6QA2AQT4**

Amount of Each Disbursement this Period

1711.23
---------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

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
11			16			2015			

**Transaction ID : VQZ6QA2AQY4**

Amount of Each Disbursement this Period

353.49
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**[MEMO ITEM]**

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. James McClure**

Mailing Address 5410 Connecticut Ave NW  
Apt 609

City Washington State DC Zip Code 20015-2835

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	1		1	6		2	0	1	5

Transaction ID : VQZ6QA2AR25

Amount of Each Disbursement this Period

2	0	5	5	9	7
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Daniel Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	1		1	6		2	0	1	5

Transaction ID : VQZ6QA2AR75

Amount of Each Disbursement this Period

4	1	3	5	4
---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	1		1	6		2	0	1	5

Transaction ID : VQZ6QA2ARN5

Amount of Each Disbursement this Period

7	1	8	5	3	8
---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Philip Shulman

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

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
1	1		1	6		2	0	1	5

Transaction ID : VQZ6QA2ARB6

Amount of Each Disbursement this Period

1	2	8	9	.	8	6
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. Ryan Migeed

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	1		1	6		2	0	1	5

Transaction ID : VQZ6QA2ARG6

Amount of Each Disbursement this Period

1	2	4	5	.	7	8
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. Sean England

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	1		1	6		2	0	1	5

Transaction ID : VQZ6QA2AQX6

Amount of Each Disbursement this Period

1	0	9	9	.	2	2
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[MEMO ITEM]

\*

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

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

0	0	0	0	.	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2015

**Transaction ID : VQZ6QA2AR17**

Amount of Each Disbursement this Period

1903.76

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Caryn Lenoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2015

**Transaction ID : VQZ6QA2AR67**

Amount of Each Disbursement this Period

1443.08

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Abigail Clark**

Mailing Address 1015 Euclid St NW

City Washington State DC Zip Code 20001-3995

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2015

**Transaction ID : VQZ6QA2ARF8**

Amount of Each Disbursement this Period

674.06

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Karla Towle**

Mailing Address 3600 S Glebe Rd  
Unit 813

City Arlington State VA Zip Code 22202-2388

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	1		1	6		2	0	1	5

**Transaction ID : VQZ6QA2ARM8**

Amount of Each Disbursement this Period

1	6	0	6	5	6
---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	1		1	6		2	0	1	5

**Transaction ID : VQZ6QA2AQW8**

Amount of Each Disbursement this Period

2	6	0	2	3	3
---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	1		1	6		2	0	1	5

**Transaction ID : VQZ6QA2AR59**

Amount of Each Disbursement this Period

1	0	9	8	0	8
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**[MEMO ITEM]**

\*

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

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

0	0	0	0	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2015

Transaction ID : VQZ6QA2ARA9

Amount of Each Disbursement this Period

1603.71

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2015

Transaction ID : VQZ6QA24YJ9

Amount of Each Disbursement this Period

122.62

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Washington Metropolitan Area Transit Authority**

Mailing Address 600 5th St NW

City Washington State DC Zip Code 20001-2610

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2015

Transaction ID : VQZ6QA4SZH3

Amount of Each Disbursement this Period

1180.00

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

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

1180.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Ian S. Graham**

Mailing Address 831 Hollins St  
Apt 1B

City Baltimore State MD Zip Code 21201-1003

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

**Transaction ID : VQZ6QA1G2J3**

Amount of Each Disbursement this Period

454.83

Full Name (Last, First, Middle Initial)

**B. DC Health Benefit Exchange Authority**

Mailing Address 1225 I St NW  
Ste 400

City Washington State DC Zip Code 20005-5958

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2015

**Transaction ID : VQZ6QA21QN3**

Amount of Each Disbursement this Period

3751.38

Full Name (Last, First, Middle Initial)

**C. Stripe**

Mailing Address 3180 18th St

City San Francisco State CA Zip Code 94110-2043

Purpose of Disbursement  
Credit Card Processing Fees: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 18 / 2015

**Transaction ID : VQZ6QA26EN3**

Amount of Each Disbursement this Period

0.45

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

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

4206.66

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 06 / 2015

Transaction ID : VQZ6QA21NQ3

Amount of Each Disbursement this Period

103.55

Full Name (Last, First, Middle Initial)

**B. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : VQZ6QA21P54

Amount of Each Disbursement this Period

13.78

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : VQZ6QA21NY9

Amount of Each Disbursement this Period

9.67

[MEMO ITEM]  
\*

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

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

103.55

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, Below if Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : VQZ6QA3Y1Q3

Amount of Each Disbursement this Period

9692.82

Full Name (Last, First, Middle Initial)

**B. Microsoft**

Mailing Address 205 108th Ave NE Ste 400

City Bellevue State WA Zip Code 98004-5770

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : VQZ6QA4WS41

Amount of Each Disbursement this Period

267.20

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

**C. Modulus**

Mailing Address 1739 Elm St Ste 200B

City Cincinnati State OH Zip Code 45202-6965

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : VQZ6QA4WWC1

Amount of Each Disbursement this Period

44.58

[MEMO ITEM]  
\*

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

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

9692.82

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. B&H**

Mailing Address 420 9th Ave

City New York State NY Zip Code 10001-1614

Purpose of Disbursement  
Equipment: Non-Contribution Account

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  
10 / 27 / 2015

Transaction ID : VQZ6QA4WPS1

Amount of Each Disbursement this Period

358.90

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

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  
10 / 27 / 2015

Transaction ID : VQZ6QA4WW22

Amount of Each Disbursement this Period

163.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

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  
10 / 27 / 2015

Transaction ID : VQZ6QA4WWG2

Amount of Each Disbursement this Period

-12.07

[MEMO ITEM]

\*

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 410 Terry Ave N

City State Zip Code  
Seattle WA 98109-5210

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

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
10			27			2015			

Transaction ID : VQZ6QA4WQN2

Amount of Each Disbursement this Period

16.67
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City State Zip Code  
Atlanta GA 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

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
10			27			2015			

Transaction ID : VQZ6QA4WXV2

Amount of Each Disbursement this Period

636.20
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City State Zip Code  
Atlanta GA 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

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
10			27			2015			

Transaction ID : VQZ6QA4WXH3

Amount of Each Disbursement this Period

636.20
--------

[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Frontier Airlines**

Mailing Address 7001 Tower Rd

City State Zip Code  
Denver CO 80249-7312

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2015			

**Transaction ID : VQZ6QA4WQY3**

Amount of Each Disbursement this Period

184.00
--------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 455 Massachusetts Ave NW

City State Zip Code  
Washington DC 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2015			

**Transaction ID : VQZ6QA4WWY3**

Amount of Each Disbursement this Period

47.50
-------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City State Zip Code  
Scottsdale AZ 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2015			

**Transaction ID : VQZ6QA4WX74**

Amount of Each Disbursement this Period

29.70
-------

**[MEMO ITEM]**

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

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
10			27			2015			

Transaction ID : VQZ6QA4WWF4

Amount of Each Disbursement this Period

16.84
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

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
10			27			2015			

Transaction ID : VQZ6QA4WPW4

Amount of Each Disbursement this Period

49.99
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

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
10			27			2015			

Transaction ID : VQZ6QA4WXG5

Amount of Each Disbursement this Period

39.69
-------

[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2015

Transaction ID : VQZ6QA4WPD6

Amount of Each Disbursement this Period

49.99

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Email Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2015

Transaction ID : VQZ6QA4WQK6

Amount of Each Disbursement this Period

390.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2015

Transaction ID : VQZ6QA4WZZ6

Amount of Each Disbursement this Period

220.84

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
10			27			2015			

Transaction ID : VQZ6QA4WX58

Amount of Each Disbursement this Period

67.13
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
10			27			2015			

Transaction ID : VQZ6QA4WZB8

Amount of Each Disbursement this Period

6.60
------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Apple**

Mailing Address 1 Infinite Loop

City Cupertino State CA Zip Code 95014-2083

Purpose of Disbursement  
Computer: Non-Contribution Account

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
10			27			2015			

Transaction ID : VQZ6QA4WRK9

Amount of Each Disbursement this Period

5707.33
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[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2015			

**Transaction ID : VQZ6QA4WPN9**

Amount of Each Disbursement this Period

49.99
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. District Taco**

Mailing Address 1309 F St NW

City Washington State DC Zip Code 20004-1183

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2015			

**Transaction ID : VQZ6QA4WQV9**

Amount of Each Disbursement this Period

192.06
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2015			

**Transaction ID : VQZ6QA4WWV9**

Amount of Each Disbursement this Period

16.63
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[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : VQZ6QA4WTY9

Amount of Each Disbursement this Period

266.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Bonner Group**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2783

Purpose of Disbursement  
Fundraising Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : VQZ6QA4T6R3

Amount of Each Disbursement this Period

6875.00

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2015

Transaction ID : VQZ6QA4Q4R3

Amount of Each Disbursement this Period

271.72

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

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

7146.72

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2ARV3**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Ian S. Graham**

Mailing Address 831 Hollins St  
Apt 1B

City Baltimore State MD Zip Code 21201-1003

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4S450**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)

**C. Caryn Lenoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4S4A0**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
\*

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2015

Transaction ID : VQZ6QA4S4X0

Amount of Each Disbursement this Period

1483.39

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adam Talbot**

Mailing Address 2231 California St NW  
Apt 308

City Washington State DC Zip Code 20008-3919

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2015

Transaction ID : VQZ6QA4S4K1

Amount of Each Disbursement this Period

1519.76

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2015

Transaction ID : VQZ6QA4S4R1

Amount of Each Disbursement this Period

2664.92

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	1	5		

**Transaction ID : VQZ6QA4S492**

Amount of Each Disbursement this Period

9	0	8	.	2	4
---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	1	5		

**Transaction ID : VQZ6QA4S4E2**

Amount of Each Disbursement this Period

1	3	0	.	4	2
---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	1	5		

**Transaction ID : VQZ6QA4S4W2**

Amount of Each Disbursement this Period

1	3	7	.	0	9
---	---	---	---	---	---

**[MEMO ITEM]**

\*

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

0	.	0	0
---	---	---	---

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	7		1	5		2	0	1	5

Transaction ID : VQZ6QA4S4J3

Amount of Each Disbursement this Period

1	1	7	4	9	2
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. James McClure**

Mailing Address 5410 Connecticut Ave NW  
Apt 609

City Washington State DC Zip Code 20015-2835

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	7		1	5		2	0	1	5

Transaction ID : VQZ6QA4S4Q3

Amount of Each Disbursement this Period

2	0	3	6	2	2
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	7		1	5		2	0	1	5

Transaction ID : VQZ6QA4S484

Amount of Each Disbursement this Period

1	0	8	0	2	6
---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
07 / 15 / 2015

Transaction ID : VQZ6QA4S4D4

Amount of Each Disbursement this Period

3813.10

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Emma Walsh-Alker**

Mailing Address 3613 Norton PI NW

City Washington State DC Zip Code 20016-3169

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
07 / 15 / 2015

Transaction ID : VQZ6QA4S4V4

Amount of Each Disbursement this Period

1112.18

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
07 / 15 / 2015

Transaction ID : VQZ6QA4S4H5

Amount of Each Disbursement this Period

6481.12

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2015

Transaction ID : VQZ6QA4S4P5

Amount of Each Disbursement this Period

1018.47

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2015

Transaction ID : VQZ6QA4S476

Amount of Each Disbursement this Period

263.81

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Michael Lewis**

Mailing Address 7610 Elim Pl

City Manassas State VA Zip Code 20111-2419

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2015

Transaction ID : VQZ6QA4S4C6

Amount of Each Disbursement this Period

580.24

[MEMO ITEM]

\*

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : VQZ6QA4S4N7**

Amount of Each Disbursement this Period

1483.39

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : VQZ6QA4S468**

Amount of Each Disbursement this Period

1477.35

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : VQZ6QA4S4B8**

Amount of Each Disbursement this Period

4503.42

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2015

**Transaction ID : VQZ6QA4S4S8**

Amount of Each Disbursement this Period

1424.21

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Camden Weber**

Mailing Address 1001 N Vermont St Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2015

**Transaction ID : VQZ6QA4S4Y8**

Amount of Each Disbursement this Period

1092.06

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Joshua Dolin**

Mailing Address 2112 O St NW Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2015

**Transaction ID : VQZ6QA4S4F9**

Amount of Each Disbursement this Period

1949.02

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Mary K. Jennings

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2015

Transaction ID : VQZ6QA4S4M9

Amount of Each Disbursement this Period

1902.91

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. Adrienne Watson

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 14 / 2015

Transaction ID : VQZ6QA4NGY3

Amount of Each Disbursement this Period

1180.93

Full Name (Last, First, Middle Initial)

### C. Uber Technologies

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2015

Transaction ID : VQZ6QA4NH90

Amount of Each Disbursement this Period

7.93

[MEMO ITEM]

\*

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

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

1180.93

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Embassy Suites Hotel**

Mailing Address 101 E Locust St

City Des Moines State IA Zip Code 50309-1802

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2015

Transaction ID : VQZ6QA4NH41

Amount of Each Disbursement this Period

510.77

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2015

Transaction ID : VQZ6QA4NH74

Amount of Each Disbursement this Period

6.74

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2015

Transaction ID : VQZ6QA4NH66

Amount of Each Disbursement this Period

10.74

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			14			2015			

Transaction ID : VQZ6QA4NH58

Amount of Each Disbursement this Period

7.18
------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			14			2015			

Transaction ID : VQZ6QA4NHA8

Amount of Each Disbursement this Period

8.56
------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			05			2015			

Transaction ID : VQZ6QA4NH09

Amount of Each Disbursement this Period

270.47
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2015

Transaction ID : VQZ6QA21V14

Amount of Each Disbursement this Period

62.48

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FL 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2015

Transaction ID : VQZ6QA21VA6

Amount of Each Disbursement this Period

10.18

Category/  
Type

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

**C. Wild Onion Media**

Mailing Address 217 Camaro Way

City San Marcos State TX Zip Code 78666-3035

Purpose of Disbursement  
Video Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 24 / 2015

Transaction ID : VQZ6Q9XVG14

Amount of Each Disbursement this Period

21000.00

Category/  
Type

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

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

21062.48

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Group Benefit Service**

Mailing Address PO Box 64802

City Baltimore State MD Zip Code 21264-4802

Purpose of Disbursement  
Insurance: Non-Contribution Account

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  
10 / 27 / 2015

**Transaction ID : VQZ6QA17B24**

Amount of Each Disbursement this Period

1294.04

Full Name (Last, First, Middle Initial)

**B. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

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  
07 / 24 / 2015

**Transaction ID : VQZ6QA2AS44**

Amount of Each Disbursement this Period

233.29

Full Name (Last, First, Middle Initial)

**C. Enterprise Rent-A-Car**

Mailing Address 1100 4th St SW

City Washington State DC Zip Code 20024-4451

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
07 / 24 / 2015

**Transaction ID : VQZ6QA2AS86**

Amount of Each Disbursement this Period

215.73

**[MEMO ITEM]**

\*

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

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

1527.33

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 14 / 2015

Transaction ID : VQZ6QA4MA54

Amount of Each Disbursement this Period

1260.32

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 16 / 2015

Transaction ID : VQZ6QA4MAT0

Amount of Each Disbursement this Period

15.67

Category/  
Type

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : VQZ6QA4MB31

Amount of Each Disbursement this Period

18.54

Category/  
Type

[MEMO ITEM]  
\*

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

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

1260.32

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
09 / 22 / 2015

Transaction ID : VQZ6QA4MAG1

Amount of Each Disbursement this Period

26.27

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
11 / 12 / 2015

Transaction ID : VQZ6QA4MAB2

Amount of Each Disbursement this Period

27.12

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Budget**

Mailing Address 61 Terminal Dr  
Ste 14

City Fletcher State NC Zip Code 28732-6202

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
10 / 16 / 2015

Transaction ID : VQZ6QA4MAS2

Amount of Each Disbursement this Period

336.90

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
0	9		2	3		2	0	1	5

**Transaction ID : VQZ6QA4MAR4**

Amount of Each Disbursement this Period

1	0	.	3	2
---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
1	0		1	8		2	0	1	5

**Transaction ID : VQZ6QA4MAX4**

Amount of Each Disbursement this Period

6	.	0	9
---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
1	0		2	7		2	0	1	5

**Transaction ID : VQZ6QA4MB15**

Amount of Each Disbursement this Period

7	.	6	1
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**[MEMO ITEM]**

\*

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

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

0	.	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
11			11			2015			

Transaction ID : VQZ6QA4MA96

Amount of Each Disbursement this Period

5.70
------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
09			23			2015			

Transaction ID : VQZ6QA4MAJ7

Amount of Each Disbursement this Period

15.96
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Internet: Non-Contribution Account

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
10			17			2015			

Transaction ID : VQZ6QA4MB08

Amount of Each Disbursement this Period

8.00
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2015

**Transaction ID : VQZ6QA4MAH9**

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2015

**Transaction ID : VQZ6QA1G284**

Amount of Each Disbursement this Period

44.65

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, Below if Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : VQZ6QA3Y084**

Amount of Each Disbursement this Period

1505.87

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

1550.52

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Email Services: Non-Contribution Account

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

**Transaction ID : VQZ6QA4WTM0**

Amount of Each Disbursement this Period

410.33

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

**Transaction ID : VQZ6QA4WYK2**

Amount of Each Disbursement this Period

12.40

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

**Transaction ID : VQZ6QA4WZ43**

Amount of Each Disbursement this Period

39.49

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2015

**Transaction ID : VQZ6QA4WTE3**

Amount of Each Disbursement this Period

815.75
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2015

**Transaction ID : VQZ6QA4WR74**

Amount of Each Disbursement this Period

49.99
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2015

**Transaction ID : VQZ6QA4WSC4**

Amount of Each Disbursement this Period

49.99
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA4WZD4

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA4WX66

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. GoDaddy**

Mailing Address 14455 N Hayden Rd Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA4WXS6

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109-5210

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WTV6

Amount of Each Disbursement this Period

10.69

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. James McClure**

Mailing Address 5410 Connecticut Ave NW  
Apt 609

City Washington State DC Zip Code 20015-2835

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 18 / 2015

Transaction ID : VQZ6QA4T694

Amount of Each Disbursement this Period

4276.71

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2015

Transaction ID : VQZ6QA4SXA4

Amount of Each Disbursement this Period

15.00

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

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

4291.71

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Central Parking System**

Mailing Address 720 Olive St  
Ste 1650

City Saint Louis State MO Zip Code 63101-2329

Purpose of Disbursement  
Parking: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2015

Transaction ID : VQZ6QA4QTD4

Amount of Each Disbursement this Period

810.00

Full Name (Last, First, Middle Initial)

**B. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 14 / 2015

Transaction ID : VQZ6QA3Y1D4

Amount of Each Disbursement this Period

626.24

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2015

Transaction ID : VQZ6QA3Y1F0

Amount of Each Disbursement this Period

552.20

[MEMO ITEM]

\*

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

1436.24

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
1	1		1	5		2	0	1	5

Transaction ID : VQZ6QA3Y1H6

Amount of Each Disbursement this Period

9	.	3	7
---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

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
1	2		2	2		2	0	1	5

Transaction ID : VQZ6QA4NFE4

Amount of Each Disbursement this Period

2	2	2	1	.	0	5
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Mirage**

Mailing Address 3400 Las Vegas Blvd S

City Las Vegas State NV Zip Code 89109-8923

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
1	2		1	4		2	0	1	5

Transaction ID : VQZ6QA4NFY0

Amount of Each Disbursement this Period

3	0	9	.	9	4
---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

2	2	2	.	1	0	5
---	---	---	---	---	---	---

2	2	2	.	1	0	5
---	---	---	---	---	---	---



**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Radisson Hotel**

Mailing Address 700 Elm St

City Manchester State NH Zip Code 03101-2523

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2015

Transaction ID : VQZ6QA4NFS1

Amount of Each Disbursement this Period

526.01

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FL 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 18 / 2015

Transaction ID : VQZ6QA4NG64

Amount of Each Disbursement this Period

36.89

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. United Airlines, Inc.**

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2015

Transaction ID : VQZ6QA4Nfq5

Amount of Each Disbursement this Period

549.60

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. United Airlines, Inc.**

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
12 / 15 / 2015

Transaction ID : VQZ6QA4NFN9

Amount of Each Disbursement this Period

508.10

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

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  
11 / 25 / 2015

Transaction ID : VQZ6QA4T6E4

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Caryn Lenoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

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  
11 / 10 / 2015

Transaction ID : VQZ6QA21WG4

Amount of Each Disbursement this Period

7.65

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

22.65

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2015

**Transaction ID : VQZ6QA21WH2**

Amount of Each Disbursement this Period

4	.	7	.	6	5
---	---	---	---	---	---

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)

**B. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2015

**Transaction ID : VQZ6QA22FG4**

Amount of Each Disbursement this Period

4	.	9	.	4	9
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

**Transaction ID : VQZ6QA22G91**

Amount of Each Disbursement this Period

6	.	6	.	3
---	---	---	---	---

**[MEMO ITEM]**  
\*

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

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

4	.	9	.	4	9
---	---	---	---	---	---

4	.	9	.	4	9
---	---	---	---	---	---

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2015

**Transaction ID : VQZ6QA22GQ2**

Amount of Each Disbursement this Period

107.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2015

**Transaction ID : VQZ6QA22GD3**

Amount of Each Disbursement this Period

7.41

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2015

**Transaction ID : VQZ6QA22GC5**

Amount of Each Disbursement this Period

9.97

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
10			20			2015			

Transaction ID : VQZ6QA22G76

Amount of Each Disbursement this Period

18.43
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
10			07			2015			

Transaction ID : VQZ6QA22GB7

Amount of Each Disbursement this Period

10.23
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Astoria Hotel**

Mailing Address 510 Bush St

City San Francisco State CA Zip Code 94108-3604

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
10			07			2015			

Transaction ID : VQZ6QA22G68

Amount of Each Disbursement this Period

220.88
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[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2015

**Transaction ID : VQZ6QA22GM8**

Amount of Each Disbursement this Period

55.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Granholm Mulhern Associates**

Mailing Address 21 Chelsea Ct

City Oakland State CA Zip Code 94611-2416

Purpose of Disbursement  
Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 10 / 2015

**Transaction ID : VQZ6QA3Y1J4**

Amount of Each Disbursement this Period

2220.73

Full Name (Last, First, Middle Initial)

**C. DC Health Benefit Exchange Authority**

Mailing Address 1225 I St NW  
Ste 400

City Washington State DC Zip Code 20005-5958

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

**Transaction ID : VQZ6QA21BJ4**

Amount of Each Disbursement this Period

5604.97

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

7825.70

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4Q4K4**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. MBA Consulting Group**

Mailing Address 611 Pennsylvania Ave SE  
# 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement  
Compliance & Accounting Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4HRP4**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA47KP4**

Amount of Each Disbursement this Period

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Allenswood Group**

Mailing Address 2001 N Kenilworth St

City Arlington State VA Zip Code 22205-3130

Purpose of Disbursement  
Video Consulting Fees: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 23 / 2015

**Transaction ID : VQZ6QA1G2P4**

Amount of Each Disbursement this Period

11500.00

Category/Type

Full Name (Last, First, Middle Initial)

**B. Washington Metropolitan Area Transit Authority**

Mailing Address 600 5th St NW

City Washington State DC Zip Code 20001-2610

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 17 / 2015

**Transaction ID : VQZ6QA4T5P4**

Amount of Each Disbursement this Period

950.00

Category/Type

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2015

**Transaction ID : VQZ6QA4T5V4**

Amount of Each Disbursement this Period

15.00

Category/Type

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

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

12465.00



**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MBA Consulting Group**

Mailing Address 611 Pennsylvania Ave SE  
# 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement  
Compliance & Accounting Services: Non-Contribution Account

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
10			27			2015			

**Transaction ID : VQZ6QA17AX4**

Amount of Each Disbursement this Period

10179.49
----------

Full Name (Last, First, Middle Initial)

**B. IQ Media Group, Inc.**

Mailing Address 625 W Ridge Pike  
Ste C-100

City Conshohocken State PA Zip Code 19428-1192

Purpose of Disbursement  
Subscription: Non-Contribution Account

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
11			10			2015			

**Transaction ID : VQZ6QA21WY4**

Amount of Each Disbursement this Period

8992.50
---------

Full Name (Last, First, Middle Initial)

**C. Bonner Group**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2783

Purpose of Disbursement  
Travel Expenses: Non-Contribution Account

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
09			03			2015			

**Transaction ID : VQZ6Q9YDYY4**

Amount of Each Disbursement this Period

1723.57
---------

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

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

20895.56
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : VQZ6QA2ARZ4

Amount of Each Disbursement this Period

29414.43

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 03 / 2015

Transaction ID : VQZ6QA177Z4

Amount of Each Disbursement this Period

153.22

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, Below if Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA2JPZ4

Amount of Each Disbursement this Period

4119.10

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

33686.75

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Vonage**

Mailing Address PO Box 392415

City Pittsburgh State PA Zip Code 15251-9415

Purpose of Disbursement Telephone: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WX40

Amount of Each Disbursement this Period

628.06

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Mandu**

Mailing Address 453 K St NW

City Washington State DC Zip Code 20001-2530

Purpose of Disbursement Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WV70

Amount of Each Disbursement this Period

54.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WZA0

Amount of Each Disbursement this Period

68.09

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Modulus**

Mailing Address 1739 Elm St  
Ste 200B

City Cincinnati State OH Zip Code 45202-6965

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WYF0

Amount of Each Disbursement this Period

44.58

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WW71

Amount of Each Disbursement this Period

393.20

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WWT1

Amount of Each Disbursement this Period

226.20

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2015

**Transaction ID : VQZ6QA4WY02**

Amount of Each Disbursement this Period

28.63
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**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Chop't**

Mailing Address 730 7th St NW

City Washington State DC Zip Code 20001-3716

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2015

**Transaction ID : VQZ6QA4WQ22**

Amount of Each Disbursement this Period

286.80
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**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Mandu**

Mailing Address 453 K St NW

City Washington State DC Zip Code 20001-2530

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2015

**Transaction ID : VQZ6QA4WWB3**

Amount of Each Disbursement this Period

69.20
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**[MEMO ITEM]**

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Thinkstock, LLC**

Mailing Address 501 N College St

City Charlotte State NC Zip Code 28202-2213

Purpose of Disbursement  
Graphics Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WW55

Amount of Each Disbursement this Period

197.96
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WZP5

Amount of Each Disbursement this Period

282.98
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Livestream**

Mailing Address 195 Morgan Ave

City Brooklyn State NY Zip Code 11237-1000

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WQX5

Amount of Each Disbursement this Period

399.00
--------

[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2015			

**Transaction ID : VQZ6QA4WYC6**

Amount of Each Disbursement this Period

391.10
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Movement Ventures, Qzzr**

Mailing Address 3180 18th St  
Ste 100

City San Francisco State CA Zip Code 94110-2042

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2015			

**Transaction ID : VQZ6QA4WS17**

Amount of Each Disbursement this Period

49.00
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2015			

**Transaction ID : VQZ6QA4WY27**

Amount of Each Disbursement this Period

286.00
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[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
12 / 08 / 2015

Transaction ID : VQZ6QA4WXF7

Amount of Each Disbursement this Period

183.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
12 / 08 / 2015

Transaction ID : VQZ6QA4WT78

Amount of Each Disbursement this Period

49.99

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Yeung Fong**

Mailing Address 1701 N Capitol St NE

City Washington State DC Zip Code 20002-2109

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
12 / 08 / 2015

Transaction ID : VQZ6QA4WV88

Amount of Each Disbursement this Period

178.05

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. WP Engine**

Mailing Address 504 Lavaca St  
Ste 1000

City Austin State TX Zip Code 78701-2857

Purpose of Disbursement  
Web Hosting Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA4WZ69

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA4WVK9

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : VQZ6QA21A25

Amount of Each Disbursement this Period

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines, Co.</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2015
Mailing Address 2702 Love Field Dr		<b>Transaction ID : VQZ6QA21B51</b>
City Dallas	State TX	
Zip Code 75235-1908	Purpose of Disbursement Travel: Non-Contribution Account	Amount of Each Disbursement this Period 8.00
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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>B. National Car Rental</b>		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 1 World Way		<b>Transaction ID : VQZ6QA21A82</b>
City Los Angeles	State CA	
Zip Code 90045-5803	Purpose of Disbursement Travel: Non-Contribution Account	Amount of Each Disbursement this Period 354.25
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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. Uber Technologies</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 1455 Market St FI 4		<b>Transaction ID : VQZ6QA21B77</b>
City San Francisco	State CA	
Zip Code 94103-1355	Purpose of Disbursement Travel: Non-Contribution Account	Amount of Each Disbursement this Period 15.86
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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).....▶	0.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, Below if Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 12 / 2015

**Transaction ID : VQZ6QA4QT35**

Amount of Each Disbursement this Period

9667.68

Full Name (Last, First, Middle Initial)

**B. Ikea**

Mailing Address 10100 Baltimore Ave

City College Park State MD Zip Code 20740-4208

Purpose of Disbursement  
Furniture: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 12 / 2015

**Transaction ID : VQZ6QA4WR40**

Amount of Each Disbursement this Period

593.52

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)

**C. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 12 / 2015

**Transaction ID : VQZ6QA4WPB0**

Amount of Each Disbursement this Period

125.96

**[MEMO ITEM]**  
\*

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

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

9667.68

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Movement Ventures, Qzzr**

Mailing Address 3180 18th St  
Ste 100

City San Francisco State CA Zip Code 94110-2042

Purpose of Disbursement  
Software: Non-Contribution Account

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
0	8		1	2		2	0	1	5

Transaction ID : VQZ6QA4WVC0

Amount of Each Disbursement this Period

4	9	.	0	0
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[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

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
0	8		1	2		2	0	1	5

Transaction ID : VQZ6QA4WNN0

Amount of Each Disbursement this Period

4	9	.	9	9
---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
0	8		1	2		2	0	1	5

Transaction ID : VQZ6QA4WZX0

Amount of Each Disbursement this Period

1	0	2	.	8	2
---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

0	0	.	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2015

Transaction ID : VQZ6QA4WY51

Amount of Each Disbursement this Period

5.65
------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2015

Transaction ID : VQZ6QA4WYR1

Amount of Each Disbursement this Period

7.92
------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2015

Transaction ID : VQZ6QA4WVT1

Amount of Each Disbursement this Period

496.63
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
0	8		1	2		2	0	1	5

Transaction ID : VQZ6QA4WZ12

Amount of Each Disbursement this Period

7	.	7	8
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[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. The Custom House**

Mailing Address 139 Montague St

City Brooklyn State NY Zip Code 11201-3549

Purpose of Disbursement  
Meals: Non-Contribution Account

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
0	8		1	2		2	0	1	5

Transaction ID : VQZ6QA4WSD2

Amount of Each Disbursement this Period

6	6	2	.	2	1
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

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
0	8		1	2		2	0	1	5

Transaction ID : VQZ6QA4WPX2

Amount of Each Disbursement this Period

1	4	9	.	0	0
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[MEMO ITEM]

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City State Zip Code  
Scottsdale AZ 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	12	/	2015

Transaction ID : VQZ6QA4WVS3

Amount of Each Disbursement this Period

24.80
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City State Zip Code  
Atlanta GA 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	12	/	2015

Transaction ID : VQZ6QA4WT44

Amount of Each Disbursement this Period

418.20
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St

City State Zip Code  
Chicago IL 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	12	/	2015

Transaction ID : VQZ6QA4X054

Amount of Each Disbursement this Period

121.02
--------

[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines, Co.</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 2702 Love Field Dr		<b>Transaction ID : VQZ6QA4WSH4</b>
City Dallas	State TX	
Zip Code 75235-1908	Purpose of Disbursement Travel: Non-Contribution Account	Amount of Each Disbursement this Period 440.50
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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>B. Orbitz</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 500 W Madison St		<b>Transaction ID : VQZ6QA4WV05</b>
City Chicago	State IL	
Zip Code 60661-4544	Purpose of Disbursement Lodging: Non-Contribution Account	Amount of Each Disbursement this Period 221.54
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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. Modulus</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 1739 Elm St Ste 200B		<b>Transaction ID : VQZ6QA4WS75</b>
City Cincinnati	State OH	
Zip Code 45202-6965	Purpose of Disbursement Software: Non-Contribution Account	Amount of Each Disbursement this Period 75.76
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2015

Transaction ID : VQZ6QA4WZ85

Amount of Each Disbursement this Period

31.82
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. United Airlines, Inc.**

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2015

Transaction ID : VQZ6QA4WTJ5

Amount of Each Disbursement this Period

460.12
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2015

Transaction ID : VQZ6QA4WYV5

Amount of Each Disbursement this Period

177.90
--------

[MEMO ITEM]

\*

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

0.00
------

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

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Dell**

Mailing Address 2300 W Plano Pkwy

City State Zip Code  
Plano TX 75075-8427

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 12 / 2015

**Transaction ID : VQZ6QA4WRB6**

Amount of Each Disbursement this Period

975.21

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City State Zip Code  
San Jose CA 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 12 / 2015

**Transaction ID : VQZ6QA4WNP6**

Amount of Each Disbursement this Period

49.99

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. United Airlines, Inc.**

Mailing Address 233 S Wacker Dr

City State Zip Code  
Chicago IL 60606-7147

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 12 / 2015

**Transaction ID : VQZ6QA4WVW6**

Amount of Each Disbursement this Period

460.12

**[MEMO ITEM]**

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Rising Tide**

Mailing Address 1250 H St NW  
Ste 400

City Washington State DC Zip Code 20005-5903

Purpose of Disbursement  
Digital Software: Non-Contribution Account

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
0	8		1	2		2	0	1	5

Transaction ID : VQZ6QA4WXY6

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

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
0	8		1	2		2	0	1	5

Transaction ID : VQZ6QA4WQ97

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

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
0	8		1	2		2	0	1	5

Transaction ID : VQZ6QA4WPH7

Amount of Each Disbursement this Period

1	5	1	6	4	0	0	0	0	0

[MEMO ITEM]

\*

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

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

0	0	0	0	0	0	0	0	0	0

0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. National Journal**

Mailing Address 600 New Hampshire Ave NW  
FI 4

City Washington State DC Zip Code 20037-2403

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 12 / 2015

Transaction ID : VQZ6QA4WQW7

Amount of Each Disbursement this Period

215.62

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 12 / 2015

Transaction ID : VQZ6QA4WVD8

Amount of Each Disbursement this Period

295.60

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Rising Tide**

Mailing Address 1250 H St NW  
Ste 400

City Washington State DC Zip Code 20005-5903

Purpose of Disbursement  
Digital Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 12 / 2015

Transaction ID : VQZ6QA4WSM8

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 111 W Rio Salado Pkwy  
#

City State Zip Code  
Tempe AZ 85281-2880

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	12	/	2015

Transaction ID : VQZ6QA4WXR8

Amount of Each Disbursement this Period

926.20
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City State Zip Code  
San Jose CA 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	12	/	2015

Transaction ID : VQZ6QA4WNS8

Amount of Each Disbursement this Period

49.99
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City State Zip Code  
Atlanta GA 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	12	/	2015

Transaction ID : VQZ6QA4WVV8

Amount of Each Disbursement this Period

548.20
--------

[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Database Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4WR09**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. CNA Insurance**

Mailing Address 2020 K St NW  
Ste 500

City Washington State DC Zip Code 20006-1806

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA21W65**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement  
Retirement Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4SY65**

Amount of Each Disbursement this Period

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 111 W Rio Salado Pkwy  
#

City State Zip Code  
Tempe AZ 85281-2880

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 13 / 2015

Transaction ID : VQZ6QA4SYA5

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Daniel Wessel**

Mailing Address 6429 Spring Ter

City State Zip Code  
Falls Church VA 22042-3118

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
12 / 14 / 2015

Transaction ID : VQZ6QA3Y0C5

Amount of Each Disbursement this Period

42.43

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City State Zip Code  
Clinton MS 39056-5610

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 30 / 2015

Transaction ID : VQZ6QA2ASD5

Amount of Each Disbursement this Period

25633.91

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

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

25701.34

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 23 / 2015

Transaction ID : VQZ6QA1G2H5

Amount of Each Disbursement this Period

4237.99

Full Name (Last, First, Middle Initial)

**B. DC Health Benefit Exchange Authority**

Mailing Address 1225 I St NW  
Ste 400

City Washington State DC Zip Code 20005-5958

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
12 / 30 / 2015

Transaction ID : VQZ6QA4HSJ5

Amount of Each Disbursement this Period

2098.62

Full Name (Last, First, Middle Initial)

**C. DC Health Benefit Exchange Authority**

Mailing Address 1225 I St NW  
Ste 400

City Washington State DC Zip Code 20005-5958

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 03 / 2015

Transaction ID : VQZ6Q9YE0J5

Amount of Each Disbursement this Period

3908.19

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

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

10244.80



**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Blue State Digital**

Mailing Address 406 7th St NW  
FI 3

City Washington State DC Zip Code 20004-2260

Purpose of Disbursement  
Digital Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VQZ6QA218K5**

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. MBA Consulting Group**

Mailing Address 611 Pennsylvania Ave SE  
# 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement  
Compliance & Accounting Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4HPM5**

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Union Source**

Mailing Address PO Box 15084

City Washington State DC Zip Code 20003-0084

Purpose of Disbursement  
Printing: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VQZ6QA21QM5**

Amount of Each Disbursement this Period

Category/  
Type

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Stripe

Mailing Address 3180 18th St

City San Francisco State CA Zip Code 94110-2043

Purpose of Disbursement  
Credit Card Processing Fees: Non-Contribution Account

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
1	0		1	4		2	0	1	5

Transaction ID : VQZ6QA26EM5

Amount of Each Disbursement this Period

3	4	.	8	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

### B. Forward Solution Strategy Group

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, Below if Itemized: Non-Contribution Account

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
1	0		2	7		2	0	1	5

Transaction ID : VQZ6QA3Y1P5

Amount of Each Disbursement this Period

3	7	2	8	.	4	8
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### C. Rising Tide

Mailing Address 1250 H St NW  
Ste 400

City Washington State DC Zip Code 20005-5903

Purpose of Disbursement  
Digital Software: Non-Contribution Account

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
1	0		2	7		2	0	1	5

Transaction ID : VQZ6QA4WVZ0

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

3	7	6	.	2	8
---	---	---	---	---	---

3	7	2	.	8	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Virgin America**

Mailing Address 555 Airport Blvd  
FI 2

City Burlingame State CA Zip Code 94010-2000

Purpose of Disbursement  
Travel: Non-Contribution Account

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
10			27			2015			

Transaction ID : VQZ6QA4WTA1

Amount of Each Disbursement this Period

306.10
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
10			27			2015			

Transaction ID : VQZ6QA4WRD1

Amount of Each Disbursement this Period

347.76
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

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
10			27			2015			

Transaction ID : VQZ6QA4WWZ1

Amount of Each Disbursement this Period

230.00
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines, Co.</b>		Date of Disbursement MM / DD / YYYY 10 / 27 / 2015
Mailing Address 2702 Love Field Dr		<b>Transaction ID : VQZ6QA4WVY2</b>
City Dallas	State TX	
Zip Code 75235-1908	Purpose of Disbursement Travel: Non-Contribution Account	Amount of Each Disbursement this Period 167.00
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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>B. U.S. Airways</b>		Date of Disbursement MM / DD / YYYY 10 / 27 / 2015
Mailing Address 111 W Rio Salado Pkwy #		<b>Transaction ID : VQZ6QA4WYQ3</b>
City Tempe	State AZ	
Zip Code 85281-2880	Purpose of Disbursement Travel: Non-Contribution Account	Amount of Each Disbursement this Period 213.10
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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. Southwest Airlines, Co.</b>		Date of Disbursement MM / DD / YYYY 10 / 27 / 2015
Mailing Address 2702 Love Field Dr		<b>Transaction ID : VQZ6QA4WY35</b>
City Dallas	State TX	
Zip Code 75235-1908	Purpose of Disbursement Travel: Non-Contribution Account	Amount of Each Disbursement this Period 1088.00
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

**Transaction ID : VQZ6QA4WSG6**

Amount of Each Disbursement this Period

864.00

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Media Matters For America**

Mailing Address 455 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Rent: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : VQZ6QA4T6Q5**

Amount of Each Disbursement this Period

13483.00

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Management Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2015

**Transaction ID : VQZ6QA2ART5**

Amount of Each Disbursement this Period

19092.42

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

32575.42

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Franklin Forum**

Mailing Address 455 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2015

Transaction ID : VQZ6QA4P9T5

Amount of Each Disbursement this Period

65000.00

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2015

Transaction ID : VQZ6QA4Q4W5

Amount of Each Disbursement this Period

195.54

Full Name (Last, First, Middle Initial)

**C. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : VQZ6QA218W5

Amount of Each Disbursement this Period

207.57

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

65403.11

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2015

Transaction ID : VQZ6QA219H0

Amount of Each Disbursement this Period

15.29

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2015

Transaction ID : VQZ6QA219G3

Amount of Each Disbursement this Period

16.83

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : VQZ6QA4T5Z5

Amount of Each Disbursement this Period

15.00

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

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

15.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 15 / 2015

**Transaction ID : VQZ6QA24G06**

Amount of Each Disbursement this Period

88610.46

Full Name (Last, First, Middle Initial)

**B. Daniel Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 15 / 2015

**Transaction ID : VQZ6QA24Z00**

Amount of Each Disbursement this Period

413.54

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 15 / 2015

**Transaction ID : VQZ6QA24ZE0**

Amount of Each Disbursement this Period

1098.08

**[MEMO ITEM]**  
\*

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

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

88610.46



**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. James McClure**

Mailing Address 5410 Connecticut Ave NW  
Apt 609

City Washington State DC Zip Code 20015-2835

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : VQZ6QA24YV0

Amount of Each Disbursement this Period

2055.97

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : VQZ6QA24G21

Amount of Each Disbursement this Period

214.62

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : VQZ6QA24Z41

Amount of Each Disbursement this Period

1056.28

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Caryn Lenoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	0		1	5		2	0	1	5

Transaction ID : VQZ6QA24Z91

Amount of Each Disbursement this Period

1	4	4	3	.	0	8
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	0		1	5		2	0	1	5

Transaction ID : VQZ6QA24YP1

Amount of Each Disbursement this Period

1	4	7	8	.	5	3
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	0		1	5		2	0	1	5

Transaction ID : VQZ6QA24ZD2

Amount of Each Disbursement this Period

2	6	6	3	.	8	9
---	---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Ian S. Graham**

Mailing Address 831 Hollins St  
Apt 1B

City Baltimore State MD Zip Code 21201-1003

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	0		1	5		2	0	1	5

Transaction ID : VQZ6QA24YT2

Amount of Each Disbursement this Period

1	6	6	1	.	1	4
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	0		1	5		2	0	1	5

Transaction ID : VQZ6QA24YZ2

Amount of Each Disbursement this Period

1	2	8	4	.	7	6
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

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
1	0		1	5		2	0	1	5

Transaction ID : VQZ6QA24G13

Amount of Each Disbursement this Period

3	2	0	3	.	6	6
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[MEMO ITEM]

\*

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

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

0	0	0	0	.	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			15			2015			

Transaction ID : VQZ6QA24Z33

Amount of Each Disbursement this Period

1154.17
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			15			2015			

Transaction ID : VQZ6QA24Z83

Amount of Each Disbursement this Period

1484.42
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			15			2015			

Transaction ID : VQZ6QA24YN3

Amount of Each Disbursement this Period

1362.55
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

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
10			15			2015			

Transaction ID : VQZ6QA24ZC4

Amount of Each Disbursement this Period

1441.84
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

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
10			15			2015			

Transaction ID : VQZ6QA24ZG4

Amount of Each Disbursement this Period

1308.20
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			15			2015			

Transaction ID : VQZ6QA24YS4

Amount of Each Disbursement this Period

2602.31
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[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	0		1	5		2	0	1	5

**Transaction ID : VQZ6QA24YY4**

Amount of Each Disbursement this Period

1	4	4	5	.	4	5
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[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	0		1	5		2	0	1	5

**Transaction ID : VQZ6QA24Z25**

Amount of Each Disbursement this Period

3	8	0	.	3	0
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	0		1	5		2	0	1	5

**Transaction ID : VQZ6QA24Z75**

Amount of Each Disbursement this Period

1	6	0	.	3	7	1
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[MEMO ITEM]

\*

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

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

0	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			15			2015			

Transaction ID : VQZ6QA24YM5

Amount of Each Disbursement this Period

9004.78
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			15			2015			

Transaction ID : VQZ6QA24ZB6

Amount of Each Disbursement this Period

1903.75
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			15			2015			

Transaction ID : VQZ6QA24YR6

Amount of Each Disbursement this Period

1099.22
---------

[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Abigail Clark**

Mailing Address 1015 Euclid St NW

City Washington State DC Zip Code 20001-3995

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			15			2015			

Transaction ID : VQZ6QA24YX6

Amount of Each Disbursement this Period

674.07
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adam Talbot**

Mailing Address 2231 California St NW  
Apt 308

City Washington State DC Zip Code 20008-3919

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			15			2015			

Transaction ID : VQZ6QA24Z17

Amount of Each Disbursement this Period

1890.16
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			15			2015			

Transaction ID : VQZ6QA24Z67

Amount of Each Disbursement this Period

6480.55
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Benjamin Williams

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	0		1	5		2	0	1	5

Transaction ID : VQZ6QA24ZF8

Amount of Each Disbursement this Period

1	4	4	2	7	5
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. Elizabeth Cohen

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	0		1	5		2	0	1	5

Transaction ID : VQZ6QA24YQ8

Amount of Each Disbursement this Period

1	3	0	2	8	5
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. Ryan Migeed

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

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
1	0		1	5		2	0	1	5

Transaction ID : VQZ6QA24YW8

Amount of Each Disbursement this Period

1	2	4	5	7	8
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[MEMO ITEM]

\*

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

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

0	0	0	0	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : VQZ6QA24Z59

Amount of Each Disbursement this Period

353.49

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Karla Towle**

Mailing Address 3600 S Glebe Rd  
Unit 813

City Arlington State VA Zip Code 22202-2388

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : VQZ6QA24ZA9

Amount of Each Disbursement this Period

1606.56

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2015

Transaction ID : VQZ6QA4SY16

Amount of Each Disbursement this Period

142.85

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

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

142.85

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 02 / 2015

**Transaction ID : VQZ6QA4T748**

Amount of Each Disbursement this Period

10.25

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Jones Mandel, Inc.**

Mailing Address 1752 NW Market St  
# 730

City Seattle State WA Zip Code 98107-5264

Purpose of Disbursement  
Research Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 24 / 2015

**Transaction ID : VQZ6QA17B16**

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

**C. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
08 / 12 / 2015

**Transaction ID : VQZ6QA4RT26**

Amount of Each Disbursement this Period

89.49

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

20089.49

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
0	8		1	0		2	0	1	5

Transaction ID : VQZ6QA4RW11

Amount of Each Disbursement this Period

2	0	.	6	4
---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
0	8		1	0		2	0	1	5

Transaction ID : VQZ6QA4RW04

Amount of Each Disbursement this Period

1	3	.	7	0
---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

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
1	0		2	7		2	0	1	5

Transaction ID : VQZ6QA21X26

Amount of Each Disbursement this Period

3	1	.	9	4
---	---	---	---	---

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

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

3	1	.	9	4
---	---	---	---	---

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	22	/	2015

Transaction ID : VQZ6QA21X34

Amount of Each Disbursement this Period

31.94
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	14	/	2015

Transaction ID : VQZ6QA2AS36

Amount of Each Disbursement this Period

29248.07
----------

Full Name (Last, First, Middle Initial)

**C. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	10	/	2015

Transaction ID : VQZ6QA1G276

Amount of Each Disbursement this Period

118.95
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

29367.02
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Bonner Group**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2783

Purpose of Disbursement  
Fundraising Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2015

**Transaction ID : VQZ6QA3Y076**

Amount of Each Disbursement this Period

8125.00

Full Name (Last, First, Middle Initial)

**B. Washington Metropolitan Area Transit Authority**

Mailing Address 600 5th St NW

City Washington State DC Zip Code 20001-2610

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2015

**Transaction ID : VQZ6QA4SX96**

Amount of Each Disbursement this Period

1180.00

Full Name (Last, First, Middle Initial)

**C. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 06 / 2015

**Transaction ID : VQZ6QA4RYB6**

Amount of Each Disbursement this Period

55.65

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

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

9360.65

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Database Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2015

**Transaction ID : VQZ6QA21WF6**

Amount of Each Disbursement this Period

594.00
--------

Full Name (Last, First, Middle Initial)

**B. Group Benefit Service**

Mailing Address PO Box 64802

City Baltimore State MD Zip Code 21264-4802

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2015

**Transaction ID : VQZ6Q9ZDAF6**

Amount of Each Disbursement this Period

3668.75
---------

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2015

**Transaction ID : VQZ6QA4SYK6**

Amount of Each Disbursement this Period

374.89
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4637.64
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

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
10			27			2015			

**Transaction ID : VQZ6QA219K6**

Amount of Each Disbursement this Period

157.49
--------

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
08			20			2015			

**Transaction ID : VQZ6QA219Y3**

Amount of Each Disbursement this Period

26.14
-------

Category/  
Type

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
08			20			2015			

**Transaction ID : VQZ6QA219X5**

Amount of Each Disbursement this Period

15.73
-------

Category/  
Type

**[MEMO ITEM]**  
\*

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

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

157.49
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA1G6M6**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Public Policy Polling**

Mailing Address 2912 Highwoods Blvd Ste 201

City Raleigh State NC Zip Code 27604-1095

Purpose of Disbursement  
Polling: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4HRN6**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 504 Clinton Center Dr Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA1G2N6**

Amount of Each Disbursement this Period

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement  
Retirement Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4T5N6**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4A1R6**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, Below if Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA47KT6**

Amount of Each Disbursement this Period

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

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  
12 / 22 / 2015

Transaction ID : VQZ6QA4W7F0

Amount of Each Disbursement this Period

49.99

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Campaigns and Elections**

Mailing Address 1901 N Moore St Ste 1105

City Arlington State VA Zip Code 22209-1718

Purpose of Disbursement  
Submission Fees: Non-Contribution Account

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  
12 / 22 / 2015

Transaction ID : VQZ6QA4W7X0

Amount of Each Disbursement this Period

387.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines, Co.**

Mailing Address PO Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
12 / 22 / 2015

Transaction ID : VQZ6QA4W861

Amount of Each Disbursement this Period

208.98

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Network Solutions**

Mailing Address 12808 Gran Bay Pkwy W

City Jacksonville State FL Zip Code 32258-4468

Purpose of Disbursement  
Web Hosting Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : VQZ6QA4W7K1

Amount of Each Disbursement this Period

7.97
------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Mandu**

Mailing Address 453 K St NW

City Washington State DC Zip Code 20001-2530

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : VQZ6QA4W7R1

Amount of Each Disbursement this Period

30.65
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Yeung Fong**

Mailing Address 1701 N Capitol St NE

City Washington State DC Zip Code 20002-2109

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : VQZ6QA4W812

Amount of Each Disbursement this Period

169.40
--------

[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. WP Engine**

Mailing Address 504 Lavaca St  
Ste 1000

City Austin State TX Zip Code 78701-2857

Purpose of Disbursement  
Web Hosting Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : VQZ6QA4W7W2

Amount of Each Disbursement this Period

99.00
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Eagle Bank**

Mailing Address PO Box 108

City Saint Louis State MO Zip Code 63166-0108

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : VQZ6QA4W7J3

Amount of Each Disbursement this Period

220.57
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Rising Tide**

Mailing Address 1250 H St NW  
Ste 400

City Washington State DC Zip Code 20005-5903

Purpose of Disbursement  
List Acquisition: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : VQZ6QA4W7Q3

Amount of Each Disbursement this Period

500.00
--------

[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. WiseGuys Pizza**

Mailing Address 300 Massachusetts Ave NW  
# 1

City Washington State DC Zip Code 20001-2640

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

**Transaction ID : VQZ6QA4W804**

Amount of Each Disbursement this Period

57.18
-------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

**Transaction ID : VQZ6QA4W7V4**

Amount of Each Disbursement this Period

180.00
--------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Thinkstock, LLC**

Mailing Address 501 N College St

City Charlotte State NC Zip Code 28202-2213

Purpose of Disbursement  
Graphics Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

**Transaction ID : VQZ6QA4W7P5**

Amount of Each Disbursement this Period

197.96
--------

**[MEMO ITEM]**

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Mandu**

Mailing Address 453 K St NW

City Washington State DC Zip Code 20001-2530

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 22 / 2015

Transaction ID : VQZ6QA4W846

Amount of Each Disbursement this Period

43.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Movement Ventures, Qzzr**

Mailing Address 3180 18th St Ste 100

City San Francisco State CA Zip Code 94110-2042

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 22 / 2015

Transaction ID : VQZ6QA4W7Z6

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Modulus**

Mailing Address 1739 Elm St Ste 200B

City Cincinnati State OH Zip Code 45202-6965

Purpose of Disbursement  
Web Hosting Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 22 / 2015

Transaction ID : VQZ6QA4W887

Amount of Each Disbursement this Period

43.14

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2015			

Transaction ID : VQZ6QA4W7N7

Amount of Each Disbursement this Period

49.99
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines, Co.**

Mailing Address PO Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2015			

Transaction ID : VQZ6QA4W7T7

Amount of Each Disbursement this Period

177.98
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. United Airlines, Inc.**

Mailing Address 900 Grand Plaza Dr

City Houston State TX Zip Code 77067-4323

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2015			

Transaction ID : VQZ6QA4W838

Amount of Each Disbursement this Period

846.20
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[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2015

Transaction ID : VQZ6QA4W7G8

Amount of Each Disbursement this Period

13.17

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. WiseGuys Pizza**

Mailing Address 300 Massachusetts Ave NW  
# 1

City Washington State DC Zip Code 20001-2640

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2015

Transaction ID : VQZ6QA4W7Y8

Amount of Each Disbursement this Period

257.30

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Vonage**

Mailing Address PO Box 392415

City Pittsburgh State PA Zip Code 15251-9415

Purpose of Disbursement  
Telephone: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2015

Transaction ID : VQZ6QA4W879

Amount of Each Disbursement this Period

619.89

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Livestream**

Mailing Address 195 Morgan Ave

City State Zip Code  
Brooklyn NY 11237-1000

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2015

Transaction ID : VQZ6QA4W7M9

Amount of Each Disbursement this Period

399.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Amalgamated Bank**

Mailing Address 275 7th Ave

City State Zip Code  
New York NY 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 25 / 2015

Transaction ID : VQZ6QA4T5T6

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Group Benefit Service**

Mailing Address PO Box 64802

City State Zip Code  
Baltimore MD 21264-4802

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : VQZ6QA177Y6

Amount of Each Disbursement this Period

464.00

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

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

479.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 14 / 2015

**Transaction ID : VQZ6QA3Y0Y6**

Amount of Each Disbursement this Period

55.06

Full Name (Last, First, Middle Initial)

**B. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, Below if Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : VQZ6QA2JPY6**

Amount of Each Disbursement this Period

5459.31

Full Name (Last, First, Middle Initial)

**C. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : VQZ6QA4WWH0**

Amount of Each Disbursement this Period

939.24

**[MEMO ITEM]**

\*

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

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

5514.37

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

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
12			08			2015			

Transaction ID : VQZ6QA4X062

Amount of Each Disbursement this Period

283.00
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
12			08			2015			

Transaction ID : VQZ6QA4WVG2

Amount of Each Disbursement this Period

331.62
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Fuel Pizza**

Mailing Address 600 F St NW

City Washington State DC Zip Code 20004-1603

Purpose of Disbursement  
Meals: Non-Contribution Account

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
12			08			2015			

Transaction ID : VQZ6QA4WQ63

Amount of Each Disbursement this Period

255.21
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : VQZ6QA4X004**

Amount of Each Disbursement this Period

267.98

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Chop't**

Mailing Address 730 7th St NW

City Washington State DC Zip Code 20001-3716

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : VQZ6QA4WQ14**

Amount of Each Disbursement this Period

258.80

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : VQZ6QA4WVA4**

Amount of Each Disbursement this Period

49.99

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. JetBlue**

Mailing Address 2701 Queens Plz N

City Long Island City State NY Zip Code 11101-4021

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WQM4

Amount of Each Disbursement this Period

211.10

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. GoDaddy**

Mailing Address 14455 N Hayden Rd Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WTW4

Amount of Each Disbursement this Period

16.36

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WZV5

Amount of Each Disbursement this Period

261.98

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4X046

Amount of Each Disbursement this Period

541.98

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Rising Tide**

Mailing Address 1250 H St NW Ste 400

City Washington State DC Zip Code 20005-5903

Purpose of Disbursement  
Digital Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WXB6

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Thinkstock, LLC**

Mailing Address 501 N College St

City Charlotte State NC Zip Code 28202-2213

Purpose of Disbursement  
Graphics Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WWR6

Amount of Each Disbursement this Period

197.96

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Rising Tide**

Mailing Address 1250 H St NW  
Ste 400

City Washington State DC Zip Code 20005-5903

Purpose of Disbursement  
Digital Software: Non-Contribution Account

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  
12 / 08 / 2015

**Transaction ID : VQZ6QA4WWE7**

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adobe Creative Cloud**

Mailing Address 345 Park Ave

City San Jose State CA Zip Code 95110-2704

Purpose of Disbursement  
Software: Non-Contribution Account

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  
12 / 08 / 2015

**Transaction ID : VQZ6QA4WW48**

Amount of Each Disbursement this Period

49.99

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. United Airlines, Inc.**

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606-7147

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
12 / 08 / 2015

**Transaction ID : VQZ6QA4WWQ8**

Amount of Each Disbursement this Period

436.60

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. GoDaddy**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WY69

Amount of Each Disbursement this Period

233.40

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WQ89

Amount of Each Disbursement this Period

124.10

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 10 / 2015

Transaction ID : VQZ6QA21W07

Amount of Each Disbursement this Period

6639.57

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

6639.57

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. DC Health Benefit Exchange Authority**

Date of Disbursement

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

Mailing Address 1225 I St NW  
Ste 400

**Transaction ID : VQZ6QA4W385**

City Washington State DC Zip Code 20005-5958

Amount of Each Disbursement this Period

6	6	3	9	.	5	7
---	---	---	---	---	---	---

Purpose of Disbursement  
Insurance: Non-Contribution Account

Category/ Type
-------------------

Candidate Name

**[MEMO ITEM]**

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

Full Name (Last, First, Middle Initial)

**B. Forward Solution Strategy Group**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	5

Mailing Address 5248 Tancreti Ln

**Transaction ID : VQZ6QA4QT27**

City Alexandria State VA Zip Code 22304-8702

Amount of Each Disbursement this Period

1	9	0	9	.	4	2
---	---	---	---	---	---	---

Purpose of Disbursement  
Management Consulting: Non-Contribution Account

Category/ Type
-------------------

Candidate Name

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

Full Name (Last, First, Middle Initial)

**C. Wilson B. Woodhouse**

Date of Disbursement

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

Mailing Address 618 E St SE

**Transaction ID : VQZ6QA3Y127**

City Washington State DC Zip Code 20003-2786

Amount of Each Disbursement this Period

1	1	0	2	.	7	6
---	---	---	---	---	---	---

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Category/ Type
-------------------

Candidate Name

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

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

1	9	2	0	.	7	6
---	---	---	---	---	---	---

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

1	9	2	0	.	7	6
---	---	---	---	---	---	---

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
1	1		1	0		2	0	1	5

Transaction ID : VQZ6QA3Y143

Amount of Each Disbursement this Period

6	9	.	0	6
---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
1	1		1	0		2	0	1	5

Transaction ID : VQZ6QA3Y135

Amount of Each Disbursement this Period

4	1	.	2	8
---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Blue State Digital**

Mailing Address 406 7th St NW  
FI 3

City Washington State DC Zip Code 20004-2260

Purpose of Disbursement  
Digital Software: Non-Contribution Account

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
1	2		3	0		2	0	1	5

Transaction ID : VQZ6QA4HS37

Amount of Each Disbursement this Period

1	1	6	7	.	4	9
---	---	---	---	---	---	---

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

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

1	1	6	7	.	4	9
---	---	---	---	---	---	---

1	1	6	7	.	4	9
---	---	---	---	---	---	---

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Quick Messenger Service**

Mailing Address 4829 Fairmont Ave  
Ste B

City Bethesda State MD Zip Code 20814-6097

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
11 / 10 / 2015

Transaction ID : VQZ6QA21W57

Amount of Each Disbursement this Period

222.46

Full Name (Last, First, Middle Initial)

**B. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement  
Retirement Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 08 / 2015

Transaction ID : VQZ6QA4SY57

Amount of Each Disbursement this Period

3958.33

Full Name (Last, First, Middle Initial)

**C. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
07 / 10 / 2015

Transaction ID : VQZ6QA17877

Amount of Each Disbursement this Period

240.00

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

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

4420.79

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Lunar Dynasty Gaming**

Mailing Address PO Box 1688

City Bellevue State WA Zip Code 98009-1688

Purpose of Disbursement  
Hardware: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
07 / 10 / 2015

Transaction ID : VQZ6QA4TS12

Amount of Each Disbursement this Period

240.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Perkins Coie LLP**

Mailing Address 1201 3rd Ave Ste 4900

City Seattle State WA Zip Code 98101-3095

Purpose of Disbursement  
Legal Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
09 / 11 / 2015

Transaction ID : VQZ6QA24G97

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 504 Clinton Center Dr Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Bank error, duplicate payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
07 / 29 / 2015

Transaction ID : VQZ6QA478A7

Amount of Each Disbursement this Period

54294.45

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

69294.45

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Jones Mandel, Inc.

Mailing Address 1752 NW Market St  
# 730

City Seattle State WA Zip Code 98107-5264

Purpose of Disbursement  
Subscription: Non-Contribution Account

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
12			31			2015			

Transaction ID : VQZ6QA4HRB7

Amount of Each Disbursement this Period

40.00
-------

Full Name (Last, First, Middle Initial)

### B. ADP

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll: Non-Contribution Account

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
09			30			2015			

Transaction ID : VQZ6QA2ASC7

Amount of Each Disbursement this Period

47430.99
----------

Full Name (Last, First, Middle Initial)

### C. Abigail Clark

Mailing Address 1015 Euclid St NW

City Washington State DC Zip Code 20001-3995

Purpose of Disbursement  
Salary: Non-Contribution Account

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
09			30			2015			

Transaction ID : VQZ6QA4VY60

Amount of Each Disbursement this Period

1004.24
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[MEMO ITEM]

\*

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

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

47470.99
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	5		

**Transaction ID : VQZ6QA2AWW0**

Amount of Each Disbursement this Period

1	4	8	3	.	4	0
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	5		

**Transaction ID : VQZ6QA2ATZ0**

Amount of Each Disbursement this Period

1	9	0	2	.	9	0
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. James McClure**

Mailing Address 5410 Connecticut Ave NW  
Apt 609

City Washington State DC Zip Code 20015-2835

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	5		

**Transaction ID : VQZ6QA2AVT1**

Amount of Each Disbursement this Period

2	0	5	7	.	0	1
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

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

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

0	0	0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : VQZ6QA2ASX1

Amount of Each Disbursement this Period

1361.95

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : VQZ6QA2AW32

Amount of Each Disbursement this Period

1098.09

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : VQZ6QA2ATB2

Amount of Each Disbursement this Period

1614.96

[MEMO ITEM]

\*

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

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

0.00



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Camden Weber

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		3	0		2	0	1	5

Transaction ID : VQZ6QA2AWV2

Amount of Each Disbursement this Period

1	0	9	2	.	0	6
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. Ryan Migeed

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		3	0		2	0	1	5

Transaction ID : VQZ6QA2AWP3

Amount of Each Disbursement this Period

1	2	4	6	.	0	7
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[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. MJ Okma

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		3	0		2	0	1	5

Transaction ID : VQZ6QA2AVS3

Amount of Each Disbursement this Period

1	4	4	5	.	0	6
---	---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

0	0	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : VQZ6QA2AW74

Amount of Each Disbursement this Period

2664.92

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : VQZ6QA2ATF4

Amount of Each Disbursement this Period

2603.76

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Karla Towle**

Mailing Address 3600 S Glebe Rd  
Unit 813

City Arlington State VA Zip Code 22202-2388

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

Transaction ID : VQZ6QA2AVF4

Amount of Each Disbursement this Period

1637.34

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Ian S. Graham**

Mailing Address 831 Hollins St  
Apt 1B

City Baltimore State MD Zip Code 21201-1003

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		3	0		2	0	1	5

Transaction ID : VQZ6QA2AVM4

Amount of Each Disbursement this Period

1	6	6	1	.	1	2
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

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
0	9		3	0		2	0	1	5

Transaction ID : VQZ6QA2AWT4

Amount of Each Disbursement this Period

1	0	9	5	.	5	2
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		3	0		2	0	1	5

Transaction ID : VQZ6QA2AW25

Amount of Each Disbursement this Period

3	8	1	3	.	0	9
---	---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

0	0	0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adam Talbot**

Mailing Address 2231 California St NW  
Apt 308

City Washington State DC Zip Code 20008-3919

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		3	0		2	0	1	5

**Transaction ID : VQZ6QA2AWG5**

Amount of Each Disbursement this Period

1	8	9	1	.	2	1
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		3	0		2	0	1	5

**Transaction ID : VQZ6QA2ATE6**

Amount of Each Disbursement this Period

3	5	4	.	0	8
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Daniel Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	9		3	0		2	0	1	5

**Transaction ID : VQZ6QA2AVK6**

Amount of Each Disbursement this Period

4	1	3	.	5	4
---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	5		

**Transaction ID : VQZ6QA2ASP6**

Amount of Each Disbursement this Period

1	4	7	7	.	3	6
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	5		

**Transaction ID : VQZ6QA2AWS6**

Amount of Each Disbursement this Period

1	2	8	5	.	0	6
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	5		

**Transaction ID : VQZ6QA2AWM7**

Amount of Each Disbursement this Period

1	4	4	1	.	7	3
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

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

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

0	0	0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2ASZ7**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2AW58**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2ATD8**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Caryn Lenoff</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 1747 Church St NW Apt 3		<b>Transaction ID : VQZ6QA2AVQ8</b>
City Washington	State DC	
Zip Code 20036-1334		Amount of Each Disbursement this Period 1438.84
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<b>[MEMO ITEM]</b> *
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>B. Daniel Wessel</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 6429 Spring Ter		<b>Transaction ID : VQZ6QA2AWR8</b>
City Falls Church	State VA	
Zip Code 22042-3118		Amount of Each Disbursement this Period 1154.16
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<b>[MEMO ITEM]</b> *
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. Wilson B. Woodhouse</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 618 E St SE		<b>Transaction ID : VQZ6QA2AWK9</b>
City Washington	State DC	
Zip Code 20003-2786		Amount of Each Disbursement this Period 6481.12
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<b>[MEMO ITEM]</b> *
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).....▶	0.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, Below if Itemized: Non-Contribution Accou

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2015

Transaction ID : VQZ6QA47BD7

Amount of Each Disbursement this Period

7724.86

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 111 W Rio Salado Pkwy  
#

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2015

Transaction ID : VQZ6QA4WX90

Amount of Each Disbursement this Period

228.10

Category/  
Type

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

**C. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2015

Transaction ID : VQZ6QA4WPG0

Amount of Each Disbursement this Period

79.45

Category/  
Type

[MEMO ITEM]  
\*

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

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

7724.86



# 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. LexisNexis

Mailing Address PO Box 72477090

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	4			2	0	1	5		

Transaction ID : VQZ6QA4WQH0

Amount of Each Disbursement this Period

1	5	0	6	.	9	4
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. Amtrak

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	4			2	0	1	5		

Transaction ID : VQZ6QA4WP11

Amount of Each Disbursement this Period

2	3	5	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. Orbitz

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	4			2	0	1	5		

Transaction ID : VQZ6QA4WYA1

Amount of Each Disbursement this Period

1	5	3	.	5	8
---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	4			2	0	1	5		

**Transaction ID : VQZ6QA4WPM1**

Amount of Each Disbursement this Period

1	4	9	.	0	0
---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. TV Eyes, Inc.**

Mailing Address 2150 Post Rd

City Fairfield State CT Zip Code 06824-5669

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	4			2	0	1	5		

**Transaction ID : VQZ6QA4WTK2**

Amount of Each Disbursement this Period

1	2	0	.	0	0
---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Avis Car Rental**

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-3826

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	4			2	0	1	5		

**Transaction ID : VQZ6QA4WP03**

Amount of Each Disbursement this Period

3	0	6	.	0	7
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**[MEMO ITEM]**

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 24 / 2015

Transaction ID : VQZ6QA4WS83

Amount of Each Disbursement this Period

514.20

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines, Co.**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 24 / 2015

Transaction ID : VQZ6QA4X0A3

Amount of Each Disbursement this Period

353.98

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Email Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 24 / 2015

Transaction ID : VQZ6QA4WVK5

Amount of Each Disbursement this Period

165.75

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Vonage**

Mailing Address PO Box 392415

City Pittsburgh State PA Zip Code 15251-9415

Purpose of Disbursement  
Telephone: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2015

Transaction ID : VQZ6QA4WVR5

Amount of Each Disbursement this Period

632.30

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109-5210

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2015

Transaction ID : VQZ6QA4WQ06

Amount of Each Disbursement this Period

124.24

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. U.S. Airways**

Mailing Address 111 W Rio Salado Pkwy  
#

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2015

Transaction ID : VQZ6QA4WT86

Amount of Each Disbursement this Period

446.20

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	24	/	2015

Transaction ID : VQZ6QA4WPV6

Amount of Each Disbursement this Period

258.00
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. WP Engine

Mailing Address 504 Lavaca St  
Ste 1000

City Austin State TX Zip Code 78701-2857

Purpose of Disbursement  
Web Hosting Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	24	/	2015

Transaction ID : VQZ6QA4WWW7

Amount of Each Disbursement this Period

66.33
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. Amtrak

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	24	/	2015

Transaction ID : VQZ6QA4WPC8

Amount of Each Disbursement this Period

596.00
--------

[MEMO ITEM]

\*

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

0.00
------

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

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Mandu

Mailing Address 453 K St NW

City Washington State DC Zip Code 20001-2530

Purpose of Disbursement  
Meals: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2015

Transaction ID : VQZ6QA4WRW8

Amount of Each Disbursement this Period

40.60

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### B. Thinkstock, LLC

Mailing Address 501 N College St

City Charlotte State NC Zip Code 28202-2213

Purpose of Disbursement  
Graphics Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2015

Transaction ID : VQZ6QA4WTB9

Amount of Each Disbursement this Period

197.96

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

### C. Days Inn

Mailing Address 124 College Pkwy

City Colchester State VT Zip Code 05446-3048

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2015

Transaction ID : VQZ6QA4WRE9

Amount of Each Disbursement this Period

367.67

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie LLP**

Mailing Address 1201 3rd Ave  
Ste 4900

City State Zip Code  
Seattle WA 98101-3095

Purpose of Disbursement  
Legal Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 30 / 2015

**Transaction ID : VQZ6QA4HRG7**

Amount of Each Disbursement this Period

30000.00

Full Name (Last, First, Middle Initial)

**B. Intuit**

Mailing Address 2700 Coast Ave

City State Zip Code  
Mountain View CA 94043-1140

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 22 / 2015

**Transaction ID : VQZ6QA1G2G7**

Amount of Each Disbursement this Period

242.15

Full Name (Last, First, Middle Initial)

**C. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City State Zip Code  
Washington DC 20037-1014

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 22 / 2015

**Transaction ID : VQZ6QA47KG7**

Amount of Each Disbursement this Period

88.55

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

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

30330.70

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Allenswood Group</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 2001 N Kenilworth St		<b>Transaction ID : VQZ6Q9YDZG7</b>
City Arlington	State VA	
Purpose of Disbursement Video Consulting: Non-Contribution Account		Amount of Each Disbursement this Period
Candidate Name		11500.00
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>B. Forward Solution Strategy Group</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 5248 Tancreti Ln		<b>Transaction ID : VQZ6Q9YE0H7</b>
City Alexandria	State VA	
Purpose of Disbursement Reimbursement, Below if Itemized: Non-Contribution Account		Amount of Each Disbursement this Period
Candidate Name		12655.17
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. Orbitz</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 500 W Madison St		<b>Transaction ID : VQZ6QA4X020</b>
City Chicago	State IL	
Purpose of Disbursement Lodging: Non-Contribution Account		Amount of Each Disbursement this Period
Candidate Name		84.06
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

24155.17

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. WP Engine**

Mailing Address 504 Lavaca St  
Ste 1000

City Austin State TX Zip Code 78701-2857

Purpose of Disbursement  
Web Hosting Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 03 / 2015

Transaction ID : VQZ6QA4WXW0

Amount of Each Disbursement this Period

99.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 03 / 2015

Transaction ID : VQZ6QA4WWN2

Amount of Each Disbursement this Period

56.48

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Movement Ventures, Qzrz**

Mailing Address 3180 18th St  
Ste 100

City San Francisco State CA Zip Code 94110-2042

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 03 / 2015

Transaction ID : VQZ6QA4WW63

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. U.S. Airways**

Mailing Address 111 W Rio Salado Pkwy  
#

City State Zip Code  
Tempe AZ 85281-2880

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 03 / 2015

Transaction ID : VQZ6QA4WY93

Amount of Each Disbursement this Period

436.20

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City State Zip Code  
Atlanta GA 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 03 / 2015

Transaction ID : VQZ6QA4WWM4

Amount of Each Disbursement this Period

588.20

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Orbitz**

Mailing Address 500 W Madison St

City State Zip Code  
Chicago IL 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 03 / 2015

Transaction ID : VQZ6QA4WXT4

Amount of Each Disbursement this Period

142.76

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Frontier Airlines**

Mailing Address 7001 Tower Rd

City State Zip Code  
Denver CO 80249-7312

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 03 / 2015

Transaction ID : VQZ6QA4WT36

Amount of Each Disbursement this Period

374.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. United Airlines, Inc.**

Mailing Address 233 S Wacker Dr

City State Zip Code  
Chicago IL 60606-7147

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 03 / 2015

Transaction ID : VQZ6QA4WTC7

Amount of Each Disbursement this Period

531.60

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheatre Pkwy

City State Zip Code  
Mountain View CA 94043-1351

Purpose of Disbursement  
Email Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 03 / 2015

Transaction ID : VQZ6QA4WRF7

Amount of Each Disbursement this Period

369.03

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2015

**Transaction ID : VQZ6QA4WVQ7**

Amount of Each Disbursement this Period

49.63

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2015

**Transaction ID : VQZ6QA4WSS7**

Amount of Each Disbursement this Period

106.48

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Rising Tide**

Mailing Address 1250 H St NW  
Ste 400

City Washington State DC Zip Code 20005-5903

Purpose of Disbursement  
Digital Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2015

**Transaction ID : VQZ6QA4WTZ7**

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 03 / 2015

Transaction ID : VQZ6QA4WQ48

Amount of Each Disbursement this Period

790.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. LexisNexis**

Mailing Address PO Box 72477090

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 03 / 2015

Transaction ID : VQZ6QA4WRA8

Amount of Each Disbursement this Period

1506.94

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 03 / 2015

Transaction ID : VQZ6QA4WXA8

Amount of Each Disbursement this Period

77.00

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Apple**

Mailing Address 1 Infinite Loop

City State Zip Code  
Cupertino CA 95014-2083

Purpose of Disbursement  
Computer: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 03 / 2015

**Transaction ID : VQZ6QA4WQJ8**

Amount of Each Disbursement this Period

5707.33

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Modulus**

Mailing Address 1739 Elm St  
Ste 200B

City State Zip Code  
Cincinnati OH 45202-6965

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 03 / 2015

**Transaction ID : VQZ6QA4WTN8**

Amount of Each Disbursement this Period

44.58

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City State Zip Code  
Atlanta GA 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 03 / 2015

**Transaction ID : VQZ6QA4WX09**

Amount of Each Disbursement this Period

350.60

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Vonage**

Mailing Address PO Box 392415

City Pittsburgh State PA Zip Code 15251-9415

Purpose of Disbursement Telephone: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2015

Transaction ID : VQZ6QA4WW89

Amount of Each Disbursement this Period

632.30

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Lockton Insurance Brokers, LLC**

Mailing Address 23878 PO Box

City Pasadena State CA Zip Code 91185-0001

Purpose of Disbursement Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2015

Transaction ID : VQZ6QA21QK7

Amount of Each Disbursement this Period

47464.55

Full Name (Last, First, Middle Initial)

**C. Allenswood Group**

Mailing Address 2001 N Kenilworth St

City Arlington State VA Zip Code 22205-3130

Purpose of Disbursement Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2015

Transaction ID : VQZ6QA3Y1N7

Amount of Each Disbursement this Period

2846.04

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

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

50310.59

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Media Matters For America**

Mailing Address 455 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Rent: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4QTN7**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Group Benefit Service**

Mailing Address PO Box 64802

City Baltimore State MD Zip Code 21264-4802

Purpose of Disbursement  
Insurance: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4HSP7**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Bonner Group**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2783

Purpose of Disbursement  
Fundraising Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4T6P7**

Amount of Each Disbursement this Period

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Daniel Wessel

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

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
1	1		1	0		2	0	1	5

Transaction ID : VQZ6QA21WR7

Amount of Each Disbursement this Period

1	8	7	.	4	7
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### B. UPS

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

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
1	0		3	0		2	0	1	5

Transaction ID : VQZ6QA21WS5

Amount of Each Disbursement this Period

1	9	.	5	6
---	---	---	---	---

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

### C. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll: Non-Contribution Account

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
1	2		3	1		2	0	1	5

Transaction ID : VQZ6QA4P9S7

Amount of Each Disbursement this Period

9	1	8	1	2	.	6	2
---	---	---	---	---	---	---	---

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

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

9	2	0	0	0	.	0	9
---	---	---	---	---	---	---	---

--	--	--	--	--	--	--	--

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

**Transaction ID : VQZ6QA4RV60**

Amount of Each Disbursement this Period

1445.46

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Michael Schub**

Mailing Address 3636 16th St NW  
Apt B633

City Washington State DC Zip Code 20010-4157

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

**Transaction ID : VQZ6QA4RVB0**

Amount of Each Disbursement this Period

1387.43

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

**Transaction ID : VQZ6QA4RVS0**

Amount of Each Disbursement this Period

1056.27

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

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
12			31			2015			

Transaction ID : VQZ6QA4RV11

Amount of Each Disbursement this Period

2602.32
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

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
12			31			2015			

Transaction ID : VQZ6QA4RVF1

Amount of Each Disbursement this Period

1331.19
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

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
12			31			2015			

Transaction ID : VQZ6QA4RVM1

Amount of Each Disbursement this Period

1484.42
---------

[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : VQZ6QA4RV52

Amount of Each Disbursement this Period

413.54

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : VQZ6QA4RVA2

Amount of Each Disbursement this Period

1281.02

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : VQZ6QA4RVR2

Amount of Each Disbursement this Period

4126.49

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : VQZ6QA4RV03

Amount of Each Disbursement this Period

1603.72

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : VQZ6QA4RVE3

Amount of Each Disbursement this Period

1460.40

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Karla Towle**

Mailing Address 3600 S Glebe Rd  
Unit 813

City Arlington State VA Zip Code 22202-2388

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : VQZ6QA4RVK3

Amount of Each Disbursement this Period

1606.56

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : VQZ6QA4RV44

Amount of Each Disbursement this Period

1245.77

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : VQZ6QA4RV94

Amount of Each Disbursement this Period

2663.90

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : VQZ6QA4RVQ4

Amount of Each Disbursement this Period

1302.85

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : VQZ6QA4RVD5

Amount of Each Disbursement this Period

7185.38

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : VQZ6QA4RVJ5

Amount of Each Disbursement this Period

3800.29

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : VQZ6QA4RTZ5

Amount of Each Disbursement this Period

1099.23

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

**Transaction ID : VQZ6QA4RV36**

Amount of Each Disbursement this Period

1365.48

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

**Transaction ID : VQZ6QA4RV86**

Amount of Each Disbursement this Period

1661.43

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

**Transaction ID : VQZ6QA4RVH7**

Amount of Each Disbursement this Period

4502.38

[MEMO ITEM]

\*

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. David Brock</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2015
Mailing Address 2310 California St NW		<b>Transaction ID : VQZ6QA4RVP7</b>
City Washington State DC Zip Code 20008-1637	Amount of Each Disbursement this Period 4126.49	
Purpose of Disbursement Salary: Non-Contribution Account	Category/ Type	[MEMO ITEM] *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Elliot Fink</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2015
Mailing Address 1036 Paper Mill Ct NW		<b>Transaction ID : VQZ6QA4RTY7</b>
City Washington State DC Zip Code 20007-3619	Amount of Each Disbursement this Period 353.50	
Purpose of Disbursement Salary: Non-Contribution Account	Category/ Type	[MEMO ITEM] *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Caryn Lenoff</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2015
Mailing Address 1747 Church St NW Apt 3		<b>Transaction ID : VQZ6QA4RV78</b>
City Washington State DC Zip Code 20036-1334	Amount of Each Disbursement this Period 1470.62	
Purpose of Disbursement Salary: Non-Contribution Account	Category/ Type	[MEMO ITEM] *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<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 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : VQZ6QA4RVC8**

Amount of Each Disbursement this Period

1154.18

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : VQZ6QA4Q219**

Amount of Each Disbursement this Period

35220.04

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : VQZ6QA4RV29**

Amount of Each Disbursement this Period

1903.75

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : VQZ6QA4Q269

Amount of Each Disbursement this Period

120.65

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : VQZ6QA4RVG9

Amount of Each Disbursement this Period

1126.62

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : VQZ6QA4RTX9

Amount of Each Disbursement this Period

1711.24

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

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
0	8		1	2		2	0	1	5

Transaction ID : VQZ6QA21TV7

Amount of Each Disbursement this Period

9	7	.	9	3
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

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
1	0		0	9		2	0	1	5

Transaction ID : VQZ6QA4Q4V7

Amount of Each Disbursement this Period

2	2	5	.	8	1
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Public Policy Polling**

Mailing Address 2912 Highwoods Blvd  
Ste 201

City Raleigh State NC Zip Code 27604-1095

Purpose of Disbursement  
Polling: Non-Contribution Account

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
1	0		2	7		2	0	1	5

Transaction ID : VQZ6QA17AW7

Amount of Each Disbursement this Period

3	5	0	.	0	0
---	---	---	---	---	---

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

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

3	8	2	.	7	4
---	---	---	---	---	---

3	8	2	.	7	4
---	---	---	---	---	---

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Central Parking System**

Mailing Address 720 Olive St  
Ste 1650

City Saint Louis State MO Zip Code 63101-2329

Purpose of Disbursement  
Parking: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 30 / 2015

Transaction ID : VQZ6QA1G6X7

Amount of Each Disbursement this Period

540.00

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : VQZ6QA2ARY7

Amount of Each Disbursement this Period

54294.45

Full Name (Last, First, Middle Initial)

**C. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : VQZ6QA2AVH0

Amount of Each Disbursement this Period

1202.34

[MEMO ITEM]

\*

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

54834.45

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2AT21**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2AVC1**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2ATN1**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

Transaction ID : VQZ6QA2AVZ1

Amount of Each Disbursement this Period

1	3	4	4	9	4
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

Transaction ID : VQZ6QA2AV22

Amount of Each Disbursement this Period

1	4	6	4	5	4
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

Transaction ID : VQZ6QA2ATG2

Amount of Each Disbursement this Period

2	0	8	8	7	9
---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

0	0	0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2015

**Transaction ID : VQZ6QA2ATY2**

Amount of Each Disbursement this Period

1186.90
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2015

**Transaction ID : VQZ6QA2AT13**

Amount of Each Disbursement this Period

1254.32
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2015

**Transaction ID : VQZ6QA2AV63**

Amount of Each Disbursement this Period

1410.76
---------

[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. James McClure**

Mailing Address 5410 Connecticut Ave NW  
Apt 609

City Washington State DC Zip Code 20015-2835

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2ATM3**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2ASQ4**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2ATX4**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Joshua Dolin</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 2112 O St NW Apt 3		<b>Transaction ID : VQZ6QA2AT05</b>
City Washington	State DC	
Zip Code 20037-1014	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 1695.77
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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>B. Michael Lewis</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 7610 Elim Pl		<b>Transaction ID : VQZ6QA2ATK5</b>
City Manassas	State VA	
Zip Code 20111-2419	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 580.23
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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. Samuel F. Ritzman</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 2201 L St NW Apt 518		<b>Transaction ID : VQZ6QA2ATR5</b>
City Washington	State DC	
Zip Code 20037-1412	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 5039.72
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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).....▶	0.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2015

Transaction ID : VQZ6QA2AT47

Amount of Each Disbursement this Period

2908.15

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. David Brock**

Mailing Address 2310 California St NW

City Washington State DC Zip Code 20008-1637

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2015

Transaction ID : VQZ6QA2ASH7

Amount of Each Disbursement this Period

4503.41

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2015

Transaction ID : VQZ6QA2AVW7

Amount of Each Disbursement this Period

1670.90

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adam Talbot**

Mailing Address 2231 California St NW  
Apt 308

City Washington State DC Zip Code 20008-3919

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
07 / 31 / 2015

**Transaction ID : VQZ6QA2AV48**

Amount of Each Disbursement this Period

1945.22

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

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  
07 / 31 / 2015

**Transaction ID : VQZ6QA2AVJ8**

Amount of Each Disbursement this Period

1615.30

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

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  
07 / 31 / 2015

**Transaction ID : VQZ6QA2AST8**

Amount of Each Disbursement this Period

1469.21

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Colbourne Lewis**

Mailing Address 2005 Columbia Pike  
Apt 735

City Arlington State VA Zip Code 22204-4567

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : VQZ6QA2ATV8**

Amount of Each Disbursement this Period

4	5	8	.	8	3
---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : VQZ6QA2ASG9**

Amount of Each Disbursement this Period

1	6	6	.	4	7
---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Ian S. Graham**

Mailing Address 831 Hollins St  
Apt 1B

City Baltimore State MD Zip Code 21201-1003

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : VQZ6QA2ATH9**

Amount of Each Disbursement this Period

1	8	3	.	4	9
---	---	---	---	---	---

**[MEMO ITEM]**

\*

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

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

0	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Caryn Lenoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : VQZ6QA2ATP9

Amount of Each Disbursement this Period

1583.15

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : VQZ6QA2AVV9

Amount of Each Disbursement this Period

1670.90

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : VQZ6QA4T5Y7

Amount of Each Disbursement this Period

20.00

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

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

20.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Jones Mandel, Inc.**

Mailing Address 1752 NW Market St  
# 730

City Seattle State WA Zip Code 98107-5264

Purpose of Disbursement  
Research Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : VQZ6QA17B08

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

**B. Media Matters For America**

Mailing Address 455 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Rent: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : VQZ6QA17828

Amount of Each Disbursement this Period

6741.50

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2015

Transaction ID : VQZ6QA2AS28

Amount of Each Disbursement this Period

52794.09

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

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

79535.59

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2AV30**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2AW40**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2AT70**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	8		1	4		2	0	1	5

Transaction ID : VQZ6QA2AW90

Amount of Each Disbursement this Period

1	3	2	0	0	5
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adam Talbot**

Mailing Address 2231 California St NW  
Apt 308

City Washington State DC Zip Code 20008-3919

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	8		1	4		2	0	1	5

Transaction ID : VQZ6QA2AVP0

Amount of Each Disbursement this Period

1	9	4	5	.	2	3
---	---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	8		1	4		2	0	1	5

Transaction ID : VQZ6QA2ASS0

Amount of Each Disbursement this Period

1	4	9	6	.	0	0
---	---	---	---	---	---	---

[MEMO ITEM]

\*

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

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

0	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Joseph R. Wiley**

Mailing Address 719 Euclid St NW  
Apt 3

City Washington State DC Zip Code 20001-2200

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	8		1	4		2	0	1	5

Transaction ID : VQZ6QA2AWD1

Amount of Each Disbursement this Period

1	5	4	5	8	9
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Michael Lewis**

Mailing Address 7610 Elim Pl

City Manassas State VA Zip Code 20111-2419

Purpose of Disbursement  
Salary: Non-Contribution Account

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
0	8		1	4		2	0	1	5

Transaction ID : VQZ6QA2ATT1

Amount of Each Disbursement this Period

9	8	3	6	4
---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Philip Shulman**

Mailing Address 615 Park St  
Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

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
0	8		1	4		2	0	1	5

Transaction ID : VQZ6QA2AW82

Amount of Each Disbursement this Period

1	2	0	9	1	2
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[MEMO ITEM]

\*

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

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

0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. David Brock</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 2310 California St NW		<b>Transaction ID : VQZ6QA2ASK2</b>
City Washington State DC Zip Code 20008-1637	Amount of Each Disbursement this Period 4503.42	
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<b>[MEMO ITEM]</b> *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Elliot Fink</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 1036 Paper Mill Ct NW		<b>Transaction ID : VQZ6QA2AT63</b>
City Washington State DC Zip Code 20007-3619	Amount of Each Disbursement this Period 354.08	
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<b>[MEMO ITEM]</b> *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ian S. Graham</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 831 Hollins St Apt 1B		<b>Transaction ID : VQZ6QA2ATS3</b>
City Baltimore State MD Zip Code 21201-1003	Amount of Each Disbursement this Period 1718.90	
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<b>[MEMO ITEM]</b> *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<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 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Caryn Lenoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2015

Transaction ID : VQZ6QA2AV14

Amount of Each Disbursement this Period

1485.63

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2015

Transaction ID : VQZ6QA2ASW4

Amount of Each Disbursement this Period

1359.22

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2015

Transaction ID : VQZ6QA2AT55

Amount of Each Disbursement this Period

1159.51

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Joseph O'Connell</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 85 Manchester St Apt 107		<b>Transaction ID : VQZ6QA2AVA5</b>
City Concord	State NH	
Purpose of Disbursement Salary & Mileage: Non-Contribution Account		Amount of Each Disbursement this Period 1580.37
Candidate Name		<b>[MEMO ITEM]</b> *
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>B. Anthony Baker</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 4308 New Hampshire Ave NW		<b>Transaction ID : VQZ6QA2ASJ5</b>
City Washington	State DC	
Purpose of Disbursement Salary: Non-Contribution Account		Amount of Each Disbursement this Period 1539.86
Candidate Name		<b>[MEMO ITEM]</b> *
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. Daniel Wessel</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 6429 Spring Ter		<b>Transaction ID : VQZ6QA2AVX5</b>
City Falls Church	State VA	
Purpose of Disbursement Salary: Non-Contribution Account		Amount of Each Disbursement this Period 1254.17
Candidate Name		<b>[MEMO ITEM]</b> *
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).....▶	0.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	4			2	0	1	5		

**Transaction ID : VQZ6QA2AV06**

Amount of Each Disbursement this Period

1	5	2	8	.	3	8
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Camden Weber**

Mailing Address 1001 N Vermont St  
Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	4			2	0	1	5		

**Transaction ID : VQZ6QA2AWB6**

Amount of Each Disbursement this Period

1	1	2	7	.	7	2
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	4			2	0	1	5		

**Transaction ID : VQZ6QA2AVR6**

Amount of Each Disbursement this Period

1	2	8	5	.	5	7
---	---	---	---	---	---	---

**[MEMO ITEM]**

\*

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

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

0	0	0	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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. James McClure**

Mailing Address 5410 Connecticut Ave NW  
Apt 609

City Washington State DC Zip Code 20015-2835

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2ATW6**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2AW17**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2AV97**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2015

Transaction ID : VQZ6QA2AVE7

Amount of Each Disbursement this Period

1115.80

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2015

Transaction ID : VQZ6QA2ATJ7

Amount of Each Disbursement this Period

1965.31

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2015

Transaction ID : VQZ6QA2AT39

Amount of Each Disbursement this Period

1683.71

[MEMO ITEM]

\*

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Colbourne Lewis</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 2005 Columbia Pike Apt 735		<b>Transaction ID : VQZ6QA2AV89</b>
City Arlington	State VA	
Zip Code 22204-4567	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 770.84
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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>B. DC Health Benefit Exchange Authority</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 1225 I St NW Ste 400		<b>Transaction ID : VQZ6QA3Y068</b>
City Washington	State DC	
Zip Code 20005-5958	Purpose of Disbursement Insurance: Non-Contribution Account	Amount of Each Disbursement this Period 4931.49
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
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. VOYA</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2015
Mailing Address PO Box 990063		<b>Transaction ID : VQZ6QA4SX88</b>
City Hartford	State CT	
Zip Code 06199-0063	Purpose of Disbursement Retirement Contribution: Non-Contribution Account	Amount of Each Disbursement this Period 3958.33
Candidate Name	Category/Type	<b>[MEMO ITEM]</b> *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

8889.82

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Austin/Egoscue Development**

Mailing Address 9869 Easton Dr

City State Zip Code  
Beverly Hills CA 90210-1416

Purpose of Disbursement  
Fundraising Consulting: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2015			

**Transaction ID : VQZ6QA21BG8**

Amount of Each Disbursement this Period

16000.00
----------

Full Name (Last, First, Middle Initial)

**B. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City State Zip Code  
Washington DC 20009-1826

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2015			

**Transaction ID : VQZ6QA47KM8**

Amount of Each Disbursement this Period

9.36
------

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City State Zip Code  
San Francisco CA 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2015			

**Transaction ID : VQZ6QA47KN6**

Amount of Each Disbursement this Period

9.36
------

**[MEMO ITEM]**

\*

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

16009.36
----------

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

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Franklin Forum**

Mailing Address 455 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 24 / 2015

**Transaction ID : VQZ6QA1G2M8**

Amount of Each Disbursement this Period

200000.00

Full Name (Last, First, Middle Initial)

**B. VOYA**

Mailing Address PO Box 990063

City Hartford State CT Zip Code 06199-0063

Purpose of Disbursement  
Retirement Contribution: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 25 / 2015

**Transaction ID : VQZ6QA4T5M8**

Amount of Each Disbursement this Period

3752.07

Full Name (Last, First, Middle Initial)

**C. Granholm Mulhern Associates**

Mailing Address 21 Chelsea Ct

City Oakland State CA Zip Code 94611-2416

Purpose of Disbursement  
Communications Consulting and Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 27 / 2015

**Transaction ID : VQZ6QA21BN8**

Amount of Each Disbursement this Period

16536.49

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

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

220288.56

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 04 / 2015

**Transaction ID : VQZ6QA4Q4P8**

Amount of Each Disbursement this Period

209.68

Full Name (Last, First, Middle Initial)

**B. Bonner Group**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2783

Purpose of Disbursement  
Fundraising Consulting Fees: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 24 / 2015

**Transaction ID : VQZ6QA1G2R8**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**C. Wild Onion Media**

Mailing Address 217 Camaro Way

City San Marcos State TX Zip Code 78666-3035

Purpose of Disbursement  
Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
11 / 10 / 2015

**Transaction ID : VQZ6QA22GS8**

Amount of Each Disbursement this Period

3491.22

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

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

18700.90

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Management Consulting: Non-Contribution Account

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  
12 / 22 / 2015

**Transaction ID : VQZ6QA47KS8**

Amount of Each Disbursement this Period

15273.94

Full Name (Last, First, Middle Initial)

**B. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

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  
11 / 02 / 2015

**Transaction ID : VQZ6QA4T5S8**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Forward Solution Strategy Group**

Mailing Address 5248 Tancreti Ln

City Alexandria State VA Zip Code 22304-8702

Purpose of Disbursement  
Reimbursement, Below if Itemized: Non-Contribution Account

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  
12 / 08 / 2015

**Transaction ID : VQZ6QA2JPX8**

Amount of Each Disbursement this Period

10405.35

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

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

25694.29

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. LexisNexis**

Mailing Address PO Box 72477090

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WT60

Amount of Each Disbursement this Period

1808.33

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WYM0

Amount of Each Disbursement this Period

321.10

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WZ51

Amount of Each Disbursement this Period

54.00

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				08				2015					

Transaction ID : VQZ6QA4WXD1

Amount of Each Disbursement this Period

6	9	1	.	1	0
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[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				08				2015					

Transaction ID : VQZ6QA4WYX1

Amount of Each Disbursement this Period

5	6	0	.	1	0
---	---	---	---	---	---

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				08				2015					

Transaction ID : VQZ6QA4X012

Amount of Each Disbursement this Period

3	8	.	1	7
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[MEMO ITEM]

\*

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

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

0	0	0
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Thinkstock, LLC**

Mailing Address 501 N College St

City Charlotte State NC Zip Code 28202-2213

Purpose of Disbursement  
Graphics Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WT52

Amount of Each Disbursement this Period

197.96

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Hotels.com**

Mailing Address 5400 Lbj Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WYE2

Amount of Each Disbursement this Period

276.05

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Livestream**

Mailing Address 195 Morgan Ave

City Brooklyn State NY Zip Code 11237-1000

Purpose of Disbursement  
Subscription: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2015

Transaction ID : VQZ6QA4WRV2

Amount of Each Disbursement this Period

399.00

[MEMO ITEM]

\*

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Frontier Airlines**

Mailing Address 7001 Tower Rd

City State Zip Code  
Denver CO 80249-7312

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WS33

Amount of Each Disbursement this Period

195.99
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[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 455 Massachusetts Ave NW

City State Zip Code  
Washington DC 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WZQ3

Amount of Each Disbursement this Period

27.34
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City State Zip Code  
San Francisco CA 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WZW3

Amount of Each Disbursement this Period

23.09
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

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  
12 / 08 / 2015

Transaction ID : VQZ6QA4WYJ4

Amount of Each Disbursement this Period

131.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Orbitz**

Mailing Address 500 W Madison St

City Chicago State IL Zip Code 60661-4544

Purpose of Disbursement  
Lodging: Non-Contribution Account

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  
12 / 08 / 2015

Transaction ID : VQZ6QA4WZJ4

Amount of Each Disbursement this Period

94.16

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Hotels.com**

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

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  
12 / 08 / 2015

Transaction ID : VQZ6QA4WVX4

Amount of Each Disbursement this Period

481.98

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WXZ4

Amount of Each Disbursement this Period

506.10

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. U.S. Airways**

Mailing Address 111 W Rio Salado Pkwy #

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WV55

Amount of Each Disbursement this Period

758.10

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. WP Engine**

Mailing Address 504 Lavaca St Ste 1000

City Austin State TX Zip Code 78701-2857

Purpose of Disbursement  
Web Hosting Services: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WZC6

Amount of Each Disbursement this Period

99.00

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Budget**

Mailing Address 7426 New Ridge Rd

City Hanover State MD Zip Code 21076-3101

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WYH6

Amount of Each Disbursement this Period

306.62

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Priceline**

Mailing Address 800 Connecticut Ave

City Norwalk State CT Zip Code 06854-1631

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WRS6

Amount of Each Disbursement this Period

867.10

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Movement Ventures, Qzrz**

Mailing Address 3180 18th St  
Ste 100

City San Francisco State CA Zip Code 94110-2042

Purpose of Disbursement  
Software: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2015

Transaction ID : VQZ6QA4WYN7

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]

\*

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

0.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WZN7

Amount of Each Disbursement this Period

7.46
------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WYT7

Amount of Each Disbursement this Period

321.10
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Rising Tide**

Mailing Address 1250 H St NW  
Ste 400

City Washington State DC Zip Code 20005-5903

Purpose of Disbursement  
Digital Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WYB8

Amount of Each Disbursement this Period

500.00
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[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

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
1	2		0	8		2	0	1	5

Transaction ID : VQZ6QA4WYG8

Amount of Each Disbursement this Period

2	4	5	.	1	0
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[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

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
1	2		0	8		2	0	1	5

Transaction ID : VQZ6QA4WZG8

Amount of Each Disbursement this Period

1	4	.	2	0
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[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

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
1	2		0	8		2	0	1	5

Transaction ID : VQZ6QA4WZY8

Amount of Each Disbursement this Period

5	.	7	5
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[MEMO ITEM]

\*

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

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

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Vonage**

Mailing Address PO Box 392415

City Pittsburgh State PA Zip Code 15251-9415

Purpose of Disbursement  
Telephone: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WXE9

Amount of Each Disbursement this Period

631.93
--------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109-5210

Purpose of Disbursement  
Office Supplies: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WVP9

Amount of Each Disbursement this Period

85.44
-------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : VQZ6QA4WZS9

Amount of Each Disbursement this Period

7.46
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[MEMO ITEM]

\*

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Microsoft**

Mailing Address 205 108th Ave NE  
Ste 400

City Bellevue State WA Zip Code 98004-5770

Purpose of Disbursement  
Software: Non-Contribution Account

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
12			08			2015			

**Transaction ID : VQZ6QA4WSX9**

Amount of Each Disbursement this Period

253.80
--------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 201 I St NE

City Washington State DC Zip Code 20002-4449

Purpose of Disbursement  
Travel: Non-Contribution Account

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
12			08			2015			

**Transaction ID : VQZ6QA4WYY9**

Amount of Each Disbursement this Period

131.00
--------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Wynn Encore Hotel**

Mailing Address 3131 Las Vegas Blvd S

City Las Vegas State NV Zip Code 89109-1967

Purpose of Disbursement  
Lodging: Non-Contribution Account

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
10			14			2015			

**Transaction ID : VQZ6QA0YV19**

Amount of Each Disbursement this Period

1637.84
---------

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

1637.84
---------

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

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. Allenswood Group</b>		Date of Disbursement MM / DD / YYYY 11 / 10 / 2015
Mailing Address 2001 N Kenilworth St		<b>Transaction ID : VQZ6QA21W49</b>
City Arlington	State VA	
Zip Code 22205-3130	Purpose of Disbursement Video Consulting: Non-Contribution Account	Amount of Each Disbursement this Period 11500.00
Candidate Name	Category/ Type	
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>B. Wilson B. Woodhouse</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address 618 E St SE		<b>Transaction ID : VQZ6QA2JQ69</b>
City Washington	State DC	
Zip Code 20003-2786	Purpose of Disbursement Salary: Non-Contribution Account	Amount of Each Disbursement this Period 7185.38
Candidate Name	Category/ Type	
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. Union Source</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2015
Mailing Address PO Box 15084		<b>Transaction ID : VQZ6QA24G89</b>
City Washington	State DC	
Zip Code 20003-0084	Purpose of Disbursement Printing: Non-Contribution Account	Amount of Each Disbursement this Period 5635.95
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

24321.33

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Blue State Digital**

Mailing Address 406 7th St NW  
FI 3

City Washington State DC Zip Code 20004-2260

Purpose of Disbursement  
Digital Software: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VQZ6QA22F99**

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VQZ6QA1G7A9**

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Media Matters For America**

Mailing Address 455 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Rent: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : VQZ6QA4HRA9**

Amount of Each Disbursement this Period

Category/  
Type

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Benjamin Fischbein

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	22	/	2015

Transaction ID : VQZ6QA47KA9

Amount of Each Disbursement this Period

68.21
-------

Full Name (Last, First, Middle Initial)

### B. UPS

Mailing Address 455 Massachusetts Ave NW

City Washington State DC Zip Code 20001-2621

Purpose of Disbursement  
Shipping: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	12	/	2015

Transaction ID : VQZ6QA47KB7

Amount of Each Disbursement this Period

16.29
-------

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

### C. Joseph O'Connell

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	03	/	2015

Transaction ID : VQZ6Q9YDZA9

Amount of Each Disbursement this Period

125.29
--------

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

193.50
--------

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

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2ASB9**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA24YD9**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Elizabeth Kim**

Mailing Address 1349 Euclid St NW  
Apt 101

City Washington State DC Zip Code 20009-4822

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ6QA2AQ40**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
\*

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Ryan Migeed**

Mailing Address 1810 California St NW  
Apt 204

City Washington State DC Zip Code 20009-1826

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			30			2015			

Transaction ID : VQZ6QA2AQ90

Amount of Each Disbursement this Period

1245.78
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Adam Talbot**

Mailing Address 2231 California St NW  
Apt 308

City Washington State DC Zip Code 20008-3919

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			30			2015			

Transaction ID : VQZ6QA2AQD1

Amount of Each Disbursement this Period

1890.15
---------

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Daniel Wessel**

Mailing Address 6429 Spring Ter

City Falls Church State VA Zip Code 22042-3118

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			30			2015			

Transaction ID : VQZ6QA2AQJ1

Amount of Each Disbursement this Period

1154.18
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[MEMO ITEM]

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Anthony Baker**

Mailing Address 4308 New Hampshire Ave NW

City Washington State DC Zip Code 20011-4730

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2APT1

Amount of Each Disbursement this Period

1478.53

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Benjamin Fischbein**

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2APZ1

Amount of Each Disbursement this Period

2602.31

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Ian S. Graham**

Mailing Address 831 Hollins St  
Apt 1B

City Baltimore State MD Zip Code 21201-1003

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQ32

Amount of Each Disbursement this Period

1661.13

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. MJ Okma**

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQ82

Amount of Each Disbursement this Period

1445.45

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Camden Weber**

Mailing Address 1001 N Vermont St Apt 810

City Arlington State VA Zip Code 22201-4767

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQH3

Amount of Each Disbursement this Period

1056.27

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Philip Shulman**

Mailing Address 615 Park St Apt 611

City Des Moines State IA Zip Code 50309-1639

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQP3

Amount of Each Disbursement this Period

1370.71

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2APY3

Amount of Each Disbursement this Period

1302.84

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. James McClure**

Mailing Address 5410 Connecticut Ave NW  
Apt 609

City Washington State DC Zip Code 20015-2835

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQ74

Amount of Each Disbursement this Period

2055.97

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Samuel F. Ritzman**

Mailing Address 2201 L St NW  
Apt 518

City Washington State DC Zip Code 20037-1412

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQC4

Amount of Each Disbursement this Period

3800.29

[MEMO ITEM]

\*

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial) <b>A. David Brock</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2015
Mailing Address 2310 California St NW		<b>Transaction ID : VQZ6QA2AQ25</b>
City Washington State DC Zip Code 20008-1637	Amount of Each Disbursement this Period 4502.38	
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<b>[MEMO ITEM]</b> *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Payroll Data Processing</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2015
Mailing Address 4224 Henderson Blvd		<b>Transaction ID : VQZ6QA24YF5</b>
City Tampa State FL Zip Code 33629-5611	Amount of Each Disbursement this Period 132.62	
Purpose of Disbursement Payroll Services: Non-Contribution Account	Category/Type	<b>[MEMO ITEM]</b> *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Joseph R. Wiley</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2015
Mailing Address 719 Euclid St NW Apt 3		<b>Transaction ID : VQZ6QA2AQG5</b>
City Washington State DC Zip Code 20001-2200	Amount of Each Disbursement this Period 1484.41	
Purpose of Disbursement Salary: Non-Contribution Account	Category/Type	<b>[MEMO ITEM]</b> *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<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 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Wilson B. Woodhouse**

Mailing Address 618 E St SE

City Washington State DC Zip Code 20003-2786

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQN5

Amount of Each Disbursement this Period

6886.74

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Rebecca C. Charen**

Mailing Address 3004 32nd St NW

City Washington State DC Zip Code 20008-3417

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2APX5

Amount of Each Disbursement this Period

1362.54

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Joseph O'Connell**

Mailing Address 85 Manchester St  
Apt 107

City Concord State NH Zip Code 03301-5125

Purpose of Disbursement  
Salary & Mileage: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQ66

Amount of Each Disbursement this Period

1196.99

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 30 / 2015

**Transaction ID : VQZ6QA2AQB6**

Amount of Each Disbursement this Period

413.54

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Abigail Clark**

Mailing Address 1015 Euclid St NW

City Washington State DC Zip Code 20001-3995

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 30 / 2015

**Transaction ID : VQZ6QA2AQ17**

Amount of Each Disbursement this Period

674.08

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa State FL Zip Code 33629-5611

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

10 / 30 / 2015

**Transaction ID : VQZ6QA24YE7**

Amount of Each Disbursement this Period

27837.52

**[MEMO ITEM]**

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Adrienne Watson**

Mailing Address 440 K St NW  
Apt 714

City Washington State DC Zip Code 20001-2890

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQF7

Amount of Each Disbursement this Period

2663.91

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Benjamin Williams**

Mailing Address 2568 Sherman Ave NW  
Apt 2

City Washington State DC Zip Code 20001-2237

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQM7

Amount of Each Disbursement this Period

1442.74

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Sean England**

Mailing Address 334 Maryland Ave NE

City Washington State DC Zip Code 20002-5712

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2APW7

Amount of Each Disbursement this Period

1099.23

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Mary K. Jennings**

Mailing Address 1668 Beekman PI NW  
Apt C

City Washington State DC Zip Code 20009-6540

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQ58

Amount of Each Disbursement this Period

1903.76

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Caryn Lenoff**

Mailing Address 1747 Church St NW  
Apt 3

City Washington State DC Zip Code 20036-1334

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQ8

Amount of Each Disbursement this Period

1443.08

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Elliot Fink**

Mailing Address 1036 Paper Mill Ct NW

City Washington State DC Zip Code 20007-3619

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : VQZ6QA2AQ09

Amount of Each Disbursement this Period

353.50

[MEMO ITEM]

\*

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Connor Shaw**

Mailing Address 9802 Georgia Ave  
Apt 102

City Silver Spring State MD Zip Code 20902-5235

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			30			2015			

**Transaction ID : VQZ6QA2AQE9**

Amount of Each Disbursement this Period

1281.02
---------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Karla Towle**

Mailing Address 3600 S Glebe Rd  
Unit 813

City Arlington State VA Zip Code 22202-2388

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			30			2015			

**Transaction ID : VQZ6QA2AQK9**

Amount of Each Disbursement this Period

1606.57
---------

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**C. Joshua Dolin**

Mailing Address 2112 O St NW  
Apt 3

City Washington State DC Zip Code 20037-1014

Purpose of Disbursement  
Salary: Non-Contribution Account

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
10			30			2015			

**Transaction ID : VQZ6QA2APV9**

Amount of Each Disbursement this Period

1603.72
---------

**[MEMO ITEM]**

\*

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

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

0.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

### A. Benjamin Fischbein

Mailing Address 1350 Florida Ave NW  
Apt 303

City Washington State DC Zip Code 20009-6024

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 14 / 2015

Transaction ID : VQZ6QA3Y0F9

Amount of Each Disbursement this Period

573.69

Full Name (Last, First, Middle Initial)

### B. Hotels.com

Mailing Address 5400 Lbj Fwy  
Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Lodging: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 12 / 2015

Transaction ID : VQZ6QA3Y0J1

Amount of Each Disbursement this Period

206.07

[MEMO ITEM]  
\*

Full Name (Last, First, Middle Initial)

### C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City Ft Worth State TX Zip Code 76155-2605

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 09 / 2015

Transaction ID : VQZ6QA3Y0K9

Amount of Each Disbursement this Period

282.20

[MEMO ITEM]  
\*

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

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

573.69

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Daniel Shelton**

Mailing Address 122 Bates St NW  
Apt 2

City Washington State DC Zip Code 20001-1114

Purpose of Disbursement  
Salary: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 03 / 2015

**Transaction ID : VQZ6Q9YE0G9**

Amount of Each Disbursement this Period

785.16

Full Name (Last, First, Middle Initial)

**B. Allenswood Group**

Mailing Address 2001 N Kenilworth St

City Arlington State VA Zip Code 22205-3130

Purpose of Disbursement  
Video Consulting and Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 27 / 2015

**Transaction ID : VQZ6QA3Y1M9**

Amount of Each Disbursement this Period

19589.24

Full Name (Last, First, Middle Initial)

**C. Elizabeth Cohen**

Mailing Address 1715 15th St NW  
Apt 15

City Washington State DC Zip Code 20009-3876

Purpose of Disbursement  
Reimbursement - Below If Itemized: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 12 / 2015

**Transaction ID : VQZ6QA4RWN9**

Amount of Each Disbursement this Period

94.78

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

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

20469.18



**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Stripe**

Mailing Address 3180 18th St

City San Francisco State CA Zip Code 94110-2043

Purpose of Disbursement  
Credit Card Processing Fees: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	29	/	2015

**Transaction ID : VQZ6QA16VN9**

Amount of Each Disbursement this Period

290.30
--------

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Media Matters For America**

Mailing Address 455 Massachusetts Ave NW Ste 600

City Washington State DC Zip Code 20001-2774

Purpose of Disbursement  
Reimbursement: Flu Shots: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	09	/	2015

**Transaction ID : VQZ6QA4T6N9**

Amount of Each Disbursement this Period

288.00
--------

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Stripe**

Mailing Address 3180 18th St

City San Francisco State CA Zip Code 94110-2043

Purpose of Disbursement  
Credit Card Processing Fees: Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	16	/	2015

**Transaction ID : VQZ6QA26EQ9**

Amount of Each Disbursement this Period

6.61
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Category/  
Type

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

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

584.91
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 29 / 2015

Transaction ID : VQZ6QA2ARR9

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Services: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2015

Transaction ID : VQZ6QA4Q4T9

Amount of Each Disbursement this Period

337.40

Full Name (Last, First, Middle Initial)

**C. Wild Onion Media**

Mailing Address 217 Camaro Way

City San Marcos State TX Zip Code 78666-3035

Purpose of Disbursement  
Travel Expenses: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2015

Transaction ID : VQZ6QA17AV9

Amount of Each Disbursement this Period

1500.95

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

1878.35

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Correct the Record**

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Travel: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2015

Transaction ID : VQZ6QA21BX9

Amount of Each Disbursement this Period

12.76

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 504 Clinton Center Dr  
Ste 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Taxes: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2015

Transaction ID : VQZ6QA2ARX9

Amount of Each Disbursement this Period

29267.71

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-8800

Purpose of Disbursement  
Bank Fee: Non-Contribution Account

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2015

Transaction ID : VQZ6QA4T5X9

Amount of Each Disbursement this Period

20.00

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

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

29287.71

2768272.79

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 356 OF 357
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Correct the Record**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>West Wing Writers</b>	Nature of Debt (Purpose): Communications Consultant
Mailing Address 1150 Connecticut Ave NW Ste 505	
City State Zip Code Washington DC 20036-4138	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : VQX879H8GR2</b>	
Amount Incurred This Period 27000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 27000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>West Wing Writers</b>	Nature of Debt (Purpose): Communications Consultant
Mailing Address 1150 Connecticut Ave NW Ste 505	
City State Zip Code Washington DC 20036-4138	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : VQX879H8GQ4</b>	
Amount Incurred This Period 17000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 17000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>West Wing Writers</b>	Nature of Debt (Purpose): Communications Consultant and Transcription Services
Mailing Address 1150 Connecticut Ave NW Ste 505	
City State Zip Code Washington DC 20036-4138	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : VQX879H8GP6</b>	
Amount Incurred This Period 17845.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 17845.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	61845.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 357 OF 357
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Correct the Record**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>West Wing Writers</b>	Nature of Debt (Purpose): Communications Consultant
Mailing Address 1150 Connecticut Ave NW Ste 505	
City State Zip Code Washington DC 20036-4138	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : VQX879H8GN8</b>	
Amount Incurred This Period <input type="text" value="47000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="47000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="47000.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="108845.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="108845.00"/>