

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
PROGRESSIVE CHOICES PAC

ADDRESS (number and street) P.O. BOX 58
Check if different than previously reported. (ACC) EVANSTON IL 60204

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00381806 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 06 01 2016 through 06 30 2016

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 Karen Lennon

Signature of Treasurer Karen Lennon [Electronically Filed] Date 07 19 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PROGRESSIVE CHOICES PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		56224.11
(b) Cash on Hand at Beginning of Reporting Period.....	35735.81	
(c) Total Receipts (from Line 19)	50500.00	53500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	86235.81	109724.11
7. Total Disbursements (from Line 31).....	15240.50	38728.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	70995.31	70995.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PROGRESSIVE CHOICES PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 06 / 01 / 2016 To: M M / D D / Y Y Y Y 06 / 30 / 2016

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).....	42000.00	45000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	42000.00	45000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	8500.00	8500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	50500.00	53500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	50500.00	53500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	50500.00	53500.00

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	1240.50	1728.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1240.50	1728.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	36500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15240.50	38728.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15240.50	38728.80

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	50500.00	53500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50500.00	53500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1240.50	1728.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1240.50	1728.80

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. Jennie Berkson
Full Name (Last, First, Middle Initial)
Mailing Address 1316 Maple Avenue, Apt. B1
City Evanston State IL Zip Code 60201
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt **06 / 09 / 2016**
Transaction ID : SA11AI.4380
Amount of Each Receipt this Period **5000.00**
 Memo Item

B. David Edelstein
Full Name (Last, First, Middle Initial)
Mailing Address 1316 Maple Avenue, Apt. B1
City Evanston State IL Zip Code 60201
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt **06 / 09 / 2016**
Transaction ID : SA11AI.4382
Amount of Each Receipt this Period **5000.00**
 Memo Item

C. Fred Eychaner
Full Name (Last, First, Middle Initial)
Mailing Address 1645 W. Fullerton Avenue
City Chicago State IL Zip Code 60614
FEC ID number of contributing federal political committee. **C**
Name of Employer Newsweb Corporation Occupation President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt **06 / 06 / 2016**
Transaction ID : SA11AI.4388
Amount of Each Receipt this Period **5000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)
A. Thomas Little

Mailing Address 260 E. Chestnut, No. 4302

City Chicago	State IL	Zip Code 60611
-----------------	-------------	-------------------

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

Name of Employer Brandenburg Industrial Service Company	Occupation President
--	-------------------------

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
 06 / 02 / 2016

Transaction ID : SA11AI.4385

Amount of Each Receipt this Period
5000.00

Memo Item
Conduit: ActBlue

Full Name (Last, First, Middle Initial)
B. Jack Marco

Mailing Address 2121 Noyes

City Evanston	State IL	Zip Code 60201
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed	Occupation Consultant
-----------------------------------	--------------------------

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
 06 / 07 / 2016

Transaction ID : SA11AI.4387

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 4713 N. LaPorte

City Chicago	State IL	Zip Code 60630
-----------------	-------------	-------------------

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

Name of Employer SAP	Occupation Global Software Consultant
-------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2016

Transaction ID : SA11AI.4386

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 8 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. Florence Crown Rothman
 Full Name (Last, First, Middle Initial)
 Mailing Address 180 E. Pearson Street, Apt. 6301
 City Chicago State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 12 / 2016
Transaction ID : SA11AI.4384
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Conduit: ActBlue

B. Noel Rothman
 Full Name (Last, First, Middle Initial)
 Mailing Address 180 E. Pearson Street, Apt. 6301
 City Chicago State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 12 / 2016
Transaction ID : SA11AI.4381
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Conduit: ActBlue

C. David Sensibar
 Full Name (Last, First, Middle Initial)
 Mailing Address 5737 S. Blackstone Avenue
 City Chicago State IL Zip Code 60637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Constructure Aggregates Corporation Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 12 / 2016
Transaction ID : SA11AI.4383
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	42000.00

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. ACTBLUE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
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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
06	/	30	/	2016

Transaction ID : SA11C.4342

Amount of Each Receipt this Period

20000.00

 Memo Item
 Total Received Through Conduit This Period

B. American Podiatric Medical Association PAC
Full Name (Last, First, Middle Initial)
Mailing Address 9312 Old Georgetown Road

City Bethesda	State MD	Zip Code 20814
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00008839

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
06	/	28	/	2016

Transaction ID : SA11C.4392

Amount of Each Receipt this Period

2500.00

 Memo Item

C. Brotherhood of Railroad Signalmen PAC
Full Name (Last, First, Middle Initial)
Mailing Address 917 Shenandoah Shores Road

City Front Royal	State VA	Zip Code 22630
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FEC ID number of contributing federal political committee. **C** C00011262

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
06	/	28	/	2016

Transaction ID : SA11C.4394

Amount of Each Receipt this Period

1000.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 10 OF 16	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial)
United Food and Commercial Workers ABC

Mailing Address 1775 K Street N.W.

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002766

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	20	/	2016

Transaction ID : SA11C.4391

Amount of Each Receipt this Period
5000.00

Memo Item

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

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
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	8500.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 12 / 2016

Transaction ID : **SB21B.4343**

Amount of Each Disbursement this Period: 592.50

Memo Item

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address 208 Akard Street

City Dallas State TX Zip Code 75202

Purpose of Disbursement
Telephone and Internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 07 / 2016

Transaction ID : **SB21B.4345**

Amount of Each Disbursement this Period: 44.50

Memo Item

Full Name (Last, First, Middle Initial)

C. Broadway 5533 LLC

Mailing Address P.O. Box 669

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Office Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 16 / 2016

Transaction ID : **SB21B.4348**

Amount of Each Disbursement this Period: 300.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 937.00

TOTAL This Period (last page this line number only)..... ▶ 937.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. ANGIE CRAIG FOR CONGRESS

Mailing Address PO BOX 22116

City EAGAN State MN Zip Code 55122

Purpose of Disbursement
Contribution

Candidate Name
ANGELA DAWN CRAIG

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MN District: 02

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : **SB23.4359**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BRYAN CAFORIO FOR CONGRESS

Mailing Address 24307 MAGIC MOUNTAIN PARKWAY #548

City VALENCIA State CA Zip Code 91355

Purpose of Disbursement
Contribution

Candidate Name
BRYAN CAFORIO

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CA District: 25

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : **SB23.4353**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DENISE JUNEAU FOR CONGRESS

Mailing Address PO BOX 563

City HELENA State MT Zip Code 59624

Purpose of Disbursement
Contribution

Candidate Name
DENISE JUNEAU

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MT District: 01

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : **SB23.4368**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF CJ FOR CONGRESS

Mailing Address 111 WEST WASHINGTON STREET

City BELLEVILLE State IL Zip Code 62220

Purpose of Disbursement
Contribution

Candidate Name
CHARLES JOHN BARICEVIC

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: IL District: 12

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 21 / 2016

Transaction ID : **SB23.4377**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. GRETCHEN DRISKELL FOR CONGRESS

Mailing Address PO BOX 464

City SALINE State MI Zip Code 48176

Purpose of Disbursement
Contribution

Candidate Name
GRETCHEN DRISKELL

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MI District: 07

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2016

Transaction ID : **SB23.4351**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address PO BOX 5256

City NEW YORK State NY Zip Code 10185

Purpose of Disbursement
Contribution

Candidate Name
HILLARY RODHAM CLINTON

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2016

Transaction ID : **SB23.4373**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City CEDAR RAPIDS State IA Zip Code 52406

Purpose of Disbursement Contribution

Candidate Name
MONICA W VERNON

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : **SB23.4350**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. NELSON FOR WISCONSIN

Mailing Address PO BOX 348

City KAUKAUNA State WI Zip Code 54130

Purpose of Disbursement Contribution

Candidate Name
TOM NELSON

Office Sought: House Senate President
State: WI District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : **SB23.4362**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE

Mailing Address PO BOX 1041

City BRAINERD State MN Zip Code 56401

Purpose of Disbursement Contribution

Candidate Name
RICHARD M. NOLAN

Office Sought: House Senate President
State: MN District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : **SB23.4349**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. OWENS FOR CONGRESS

Mailing Address PO BOX 2786

City State Zip Code
SALT LAKE CITY UT 84110

Purpose of Disbursement
Contribution

Candidate Name
H DOUGLAS OWENS

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2016

Transaction ID : **SB23.4374**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY
#440-177

City State Zip Code
HENDERSON NV 89074

Purpose of Disbursement
Contribution

Candidate Name
JACKY ROSEN

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : **SB23.4356**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SCHNEIDER FOR CONGRESS

Mailing Address PO BOX 1318

City State Zip Code
DEERFIELD IL 60015

Purpose of Disbursement
Contribution

Candidate Name
BRADLEY SCOTT SCHNEIDER

Office Sought: House
 Senate
 President
State: IL District: 10

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : **SB23.4352**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address PO BOX 59348

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
Contribution

Candidate Name

L TAMMY DUCKWORTH

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	6

Transaction ID : SB23.4372

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B. TERRI BONOFF FOR CONGRESS

Mailing Address 807 BROADWAY STREET NE
#125

City State Zip Code
MINNEAPOLIS MN 55413

Purpose of Disbursement
Contribution

Candidate Name

TERRI BONOFF

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	6

Transaction ID : SB23.4365

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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Memo Item

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

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

2	0	0	0	0	0	0	0	0	0
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1	4	0	0	0	0	0	0	0	0
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